

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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- 1. CALL TO ORDER - CHAIRMAN**
- 2. APPROVAL OF WORK SESSION AGENDA - CHAIRMAN**
  - 2.1. BOC - Changes to the Agenda Pg.3
- 3. PUBLIC HEARINGS**
  - 3.1. County Manager - FY 2024 Budget - Public Hearing 5:30 p.m. Pg. 5
  - 3.2. County Manager - FY 2024 Economic Development Allocation - Public Hearing 5:30 p.m. Pg. 9
- 4. DISCUSSION ITEMS FOR ACTION**
  - 4.1. Sheriff's Office - Retirement of K9 Turbo Pg. 12
  - 4.2. County Manager - Provider for Regional Behavioral Health Center Pg. 13
  - 4.3. BOC - Appointments to Boards and Committees Pg. 119
  - 4.4. BOC - NACo Voting Credentials - 2023 Annual Conference Pg. 123
  - 4.5. BOC - Resolution Amending the Cabarrus County Board of Commissioners' 2023 Meeting Schedule Pg.124
  - 4.6. County Manager - Easement for Back Creek Greenway Pg. 126
  - 4.7. County Manager - Fiscal Year 2023 Funding Re-appropriations Pg. 138
  - 4.8. County Manager - Resolution Redesignating the Site of the Cabarrus County Courthouse Pg. 147
  - 4.9. DHS - FY24 Home and Community Care Block Grant Funding Plan Pg. 151
  - 4.10. Finance - Budget Amendment Ambulance Fees and EMS | MC billing service fees Pg. 153
  - 4.11. Finance - Cabarrus County Schools Health Sciences Institute Pg.156
  - 4.12. Finance - Capital Improvement Plan ("CIP") Funded Projects in the FY2024 General Fund Budget Pg. 162
  - 4.13. Finance - Governmental Accounting Standards Board (GASB) 87 Budget Amendment Pg. 198
  - 4.14. Finance - Government Accounting Standards Board (GASB) 96 Pg. 201
  - 4.15. Finance - Health Insurance Fund Balance Budget Amendment Pg. 205
  - 4.16. Finance - Opioid Abatement Funding Pg. 208
  - 4.17. Human Resources - Fire Services Compensation Pg. 219

- 4.18. Human Resources - Personnel Ordinance Update Pg. 222
- 4.19. Infrastructure and Asset Management - Rob Wallace Phase II B Bid Award Pg. 224
- 4.20. Juvenile Crime Prevention Council - Approval of FY 23-24 JCPC Certification Pg. 227
- 4.21. Planning and Development - Community Development Budget Amendment Pg. 234
- 4.22. Planning and Development - Community Development Grant Required Plans and Programs Pg. 237
- 4.23. Register of Deeds - Use of Register of Deeds Automation Fund for Re-indexing Cabarrus County Land Records Pg. 254

## **5. DISCUSSION ITEMS - NO ACTION**

- 5.1. BOC - Alternative Funding Options Pg. 259
- 5.2. BOC - Discussion on Central Cabarrus High School Tennis Courts Pg. 260
- 5.3. BOC - Solicitation Ordinance Pg. 261
- 5.4. Budget - Budget Discussion Pg. 262
- 5.5. Infrastructure and Asset Management - Cabarrus County Parking Deck Reserved Spaces Discussion Pg. 263
- 5.6. Infrastructure and Asset Management - Emergency Equipment Warehouse and ITS Building Project Update Pg. 287
- 5.7. Infrastructure and Asset Management - Emergency Medical Services Headquarters Project Update Pg. 306

## **6. APPROVAL OF REGULAR MEETING AGENDA**

- 6.1. BOC - Approval of Regular Meeting Agenda Pg. 325

## **7. ADJOURN**

*In accordance with ADA regulations, anyone in need of an accommodation to participate in the meeting should notify the ADA coordinator at 704-920-2100 at least 48 hours prior to the meeting.*



## CABARRUS COUNTY

### BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Approval of Work Session Agenda - Chairman

**SUBJECT:**

BOC - Changes to the Agenda

**BRIEF SUMMARY:**

A list of changes to the agenda is attached.

**REQUESTED ACTION:**

Motion to approve the agenda as amended.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Lauren Linker, Clerk to the Board

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Changes to the Agenda



**CABARRUS COUNTY BOARD OF COMMISSIONERS  
CHANGES TO THE AGENDA  
June 5, 2023**

**ADDITIONS:**

**Discussion Items for Action**

**4.17 Human Resources - Fire Services Compensation**

**UPDATED:**

**Discussion Items for Action**

**4.2 BOC – County Manager - Provider for Regional Behavioral Health Center**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**  
PUBLIC HEARINGS

**SUBJECT:**  
County Manager - FY 2024 Budget - Public Hearing 5:30 p.m.

**BRIEF SUMMARY:**  
There will be a public hearing to receive comments from the public on the proposed FY 2024 budget.

**REQUESTED ACTION:**  
Hold a public hearing.

Motion to direct staff to prepare the FY24 Budget Ordinance, consistent with the FY24 Recommended Budget and technical adjustments, for adoption by the Board at the regular meeting on June 19, 2023.

**EXPECTED LENGTH OF PRESENTATION:**  
5 Minutes

**SUBMITTED BY:**  
Mike Downs, County Manager

**BUDGET AMENDMENT REQUIRED:**  
No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Public Hearing Notice - Newspaper
- Public Hearing Notice - Website

# THE INDEPENDENT TRIBUNE

May 17, 2023



## **CABARRUS COUNTY BOARD OF COMMISSIONERS**

### **NOTICE OF PUBLIC HEARING**

**June 5, 2023 - 5:30 P.M.**

The Cabarrus County Manager presented the recommended Cabarrus County Budget for Fiscal Year 2024 to the Board of Commissioners on Monday, May 15, 2023. A copy of the recommended budget is filed in the Clerk's office and is available for inspection on the County's website: <https://www.cabarruscounty.us/Government/Departments/Budget-and-Evaluation>

A Budget Workshop meeting was held on April 27, 2023. An additional Budget workshop meeting is scheduled on June 8, 2023, if needed. A public hearing on the recommended budget is scheduled for Monday, June 5, 2023 at 5:30 p.m. (or as soon thereafter as persons may be heard). Adoption of the recommended budget is scheduled for June 19, 2023.

For ease of access, the Board of Commissioners' meetings are broadcast live on Channel 22, <https://www.youtube.com/cabarruscounty> and <https://www.cabarruscounty.us/cabctv>.

If reasonable accommodations are needed, please contact the ADA Coordinator at 704-920-2100 at least 48 hours prior to the public hearing.

Lauren Linker, Clerk to the Board

**Publish May 17, 2023**



CABARRUS COUNTY  
BOARD OF COMMISSIONERS

NOTICE OF PUBLIC HEARING  
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Lauren Linker, Clerk to the Board

Posted May 17, 2023



# CABARRUS COUNTY

## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**  
PUBLIC HEARINGS

**SUBJECT:**  
County Manager - FY 2024 Economic Development Allocation - Public Hearing 5:30 p.m.

**BRIEF SUMMARY:**  
Pursuant to N.C. General Statute 158-7.1, the County must conduct a separate public hearing for economic development appropriations. A funding plan is approved during the public hearing when each new economic incentive is approved, and now one is required for the County's annual appropriation for the contribution to the Cabarrus Economic Development Corporation.

**REQUESTED ACTION:**  
Hold a public hearing.

**EXPECTED LENGTH OF PRESENTATION:**  
5 Minutes

**SUBMITTED BY:**  
Mike Downs, County Manager

**BUDGET AMENDMENT REQUIRED:**  
No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

□ Public Hearing Notice



CABARRUS COUNTY  
BOARD OF COMMISSIONERS

NOTICE OF PUBLIC HEARING  
June 5, 2023 – 5:30 P.M.

Economic Development Appropriation

Notice is hereby given that the Cabarrus County Board of Commissioners will hold a public hearing at 5:30 p.m. (or as soon thereafter as persons may be heard) on Monday, June 5, 2023, to receive public input on the proposed allocation of funds for the following economic development appropriation:

Organization	FY 2023-2024 Recommended	Services Provided	Economic Development Purpose
Cabarrus County Economic Development Corporation	\$400,000	Promotes economic development within Cabarrus County by recruiting new businesses and encouraging retention and expansion of existing businesses.	Job retention, Increase in employment, and industry expansion & recruitment

The Board of Commissioners will consider this recommendation, and approval will include allocating the appropriation in conjunction with the adoption of the FY 2024 annual budget.

**For ease of access the Board of Commissioners' meetings will continue to be broadcast live on Channel 22, <https://www.youtube.com/cabarruscounty> and <https://www.cabarruscounty.us/cabctv>**

If reasonable accommodations are needed, please contact the ADA Coordinator at 704-920-2100 at least 48 hours prior to the public hearing.

Lauren Linker, Clerk to the Board

Posted May 17, 2023

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Sheriff's Office - Retirement of K9 Turbo

**BRIEF SUMMARY:**

Sheriff's Office - Retirement of K9 Turbo. Request to surplus K9 Turbo and turn over to K9 Handler Stephanie Champlin due to the upcoming retirement of the working K9 due to age. Turbo is now 8 years old and has worsening health problems, specifically a heart murmur and tires easily. Turbo's last working day would be June 30th.

**REQUESTED ACTION:**

Motion to declare K9 Turbo surplus property and authorize disposition in accordance with the County's policy.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Chief Deputy Tessa Burchett

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

County Manager - Provider for Regional Behavioral Health Center

**BRIEF SUMMARY:**

The County has received \$32.5 million from the State of North Carolina to design and construct a regional behavioral health facility. A Request for Proposals (RFP) was issued on January 18, 2023, with two proposals received by the due date of March 17, 2023. Interviews with each firm were conducted by County staff on Friday, May 5, 2023. Staff recommends entering contract negotiations with Monarch to operate the facility.

**REQUESTED ACTION:**

Motion to authorize the County Manager to negotiate and execute a contract with Monarch, subject to review and revision by the County Attorney, to operate the Cabarrus County Regional Behavioral Health Facility.

**EXPECTED LENGTH OF PRESENTATION:**

30 Minutes

**SUBMITTED BY:**

Rodney Harris, Deputy County Manager

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Monarch RFP Response
- Monarch RFP Response Attachments
- PowerPoint Presentation



## **REQUEST FOR PROPOSAL**

CABARRUS COUNTY  
REGIONAL BEHAVIORAL HEALTH CENTER

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## Executive Summary

Founded in 1958, Monarch is committed to enhancing existing psychiatric crisis response systems that maximize the quality of life for the people we support by providing evidence based, trauma informed care across a robust line of services. Our agency employs ~1500 staff across our 178 locations serving more than 29,500 people from 95 North Carolina counties to support a population that is largely underserved, with a majority being Medicaid-eligible, uninsured/underinsured and/or receiving state funding support. Our mission statement says that Monarch provides hope, promotes wellness, and empowers individuals and families impacted by mental illness, substance use disorders, intellectual and developmental disabilities, and traumatic brain injury. We do this by putting the person first, prioritizing staff and staff's lives second, and the company third.

Sound financials, high quality care delivery, decades of experience, and a strong data driven performance assessment culture contribute to Monarch's success. With 65 years of expert-level service to North Carolina, Monarch has earned the Gold Seal accreditation from The Joint Commission, indicating its alignment with the highest quality standards in behavioral health care delivery.

*Please see Attachment 1: Monarch Locations and Services Offered*

## Background of Organization

As a leading behavioral health provider in North Carolina, Monarch has extensive experience launching new services against established timelines. Monarch's service implementation team includes clinical and operations staff, along with representatives from information technology, human resources, marketing and communications, finance, performance improvement, safety and credentialing, transportation, and licensure. Monarch provides hope, promotes wellness, and empowers individuals and families impacted by mental illness, substance use disorders, intellectual and developmental disabilities, and traumatic brain injury. Our focus is on recovery.

Monarch has extensive experience providing all the services in this RFP except for PRTF facilities. Monarch has provided adult Facility-Based Crisis and SUD/Detox services in Lumberton since 2011. For the past five years we have provided Behavioral Health Urgent Care services with Alliance in Wake County, and Facility-Based Crisis services for children and adolescents in Charlotte. We also provide PATH services to assist the unhoused population in Mecklenburg County. Monarch was chosen by Alliance for an integral partnership to pilot Care Management Agency services for behavioral health, intellectual and developmental disabilities, and traumatic brain injury populations and was selected by all six of North Carolina's Tailored Plans to provide Care Management services. In addition to the services in the RFP, Monarch provides long term residential care to children and adolescents in two group homes, adults with mental illness and I/DD in 80 homes, apartments, and community placements. Monarch offers day services to multiple populations, supports people to find work using evidence-based practices, and provides a plethora of community services to these populations. Monarch operates 17 outpatient programs across the state, as well as offering enhanced services including ACTT, IPS, Community Support Team, Intensive In-home services and psychosocial rehabilitation services including one program that is certified as an international clubhouse model. Our services are both onsite and virtual.

### [\*\*Monarch Service Delivery Philosophy\*\*](#)

Monarch first believes it is important to listen to the people we support. We use a whole person approach, with an integrated trauma informed care model to meet all needs, including the eight areas of wellness: physical, emotional/mental, intellectual, social, occupational, financial, spiritual, and environmental. Rather than focus on illness, Monarch focuses on recovery, builds on individual's strengths, and pays close attention to social determinants of health. Our trauma informed care uses evidence-based tools and practices to develop individual strength-based care plans that provide the appropriate level of care needed to meet the complex needs of the people we support. We find that many people prefer to get all their services from Monarch, so we offer an array of service lines, though we work with partner providers and agencies in many areas of the state to ensure that an individual's needs are met. When someone receives services from multiple providers, we focus on bringing those providers together, so the individual has one comprehensive plan, not multiple disconnected plans.

Our core values, which apply to volunteers, staff, board, and the people we serve are integrity, compassion, respect, excellence, courage, and innovation. These values directly correlate to the Ten Essential Values of SAMHSA. In addition, we believe it is important to listen carefully; every person has something to teach us. What sets Monarch apart from other providers is that we make sure all staff are committed to our values and support our mission.

Monarch believes in the phrase, "Nothing about me, without me", and includes the individual in all aspects of planning for life. Each person supported has a treatment plan that is individualized and appropriate for that person, focused on recovery.

Monarch would also like to propose that if given the opportunity to provide services in this RFP, we would like to work with an advisory group of Cabarrus County residents who can provide

feedback, help modify programs if there are specific needs for Cabarrus County residents, review and advise on policy development or changes, and advocate on behalf of the community if state rules are contrary to treatment. We envision this collaborative to be a mix of partners including county officials such as someone from DSS, members of the community who are interested and knowledgeable about these types of services and once in operation, people who have used the service and/or their family members.

*Please see Attachment 2: Monarch Mission, Vision, Values*

### **Staff Recruitment**

Skilled and passionate staff, committed to carrying out the mission, vision, and values of Monarch are the foundation of the organization. Staffing begins with our talent acquisition teams consisting of recruiters, a dedicated staff member who sources talent and coordinators who deploy a multidimensional approach to recruiting well-qualified staff who have experience with the population they serve. Our talent acquisition teams are with our new hires from prospecting/application through orientation. From promoting within, employee referrals, use of social media and using platforms like Indeed to host virtual job fairs, Monarch utilizes a variety of approaches to attract the top talent in the industry.

### **Staff Education/Training**

Monarch uses a blended learning model for staff education/training. Each position in the organization has a training profile that includes a new hire orientation and required training set forth by Medicaid/State/Federal rules and regulations, and any current accrediting body based on the role and level of professional training. This list of training is expanded by Monarch to include what we believe to be critical, such as trauma informed care. In addition to in-person training, Monarch utilizes Relias Learning for online training opportunities and Power DMS to ensure staff remain up to date on current policies and standard operating procedures.

All web-based required training is offered through the Relias Learning platform. Training is developed by licensed/certified staff who are subject matter experts in the topic of the training. Staff can utilize Relias to complete continuing education hours for many different professional licenses and certifications and to develop additional skills.

In addition to all required state/licensure trainings, staff are empowered through training and continuing education that includes trauma informed care and Person-Centered Thinking Recovery and Resilience training which provides thinking strategies and tools for people receiving mental health and/or substance use services. Monarch also uses various conferences, both in state and nationally to ensure we are on the cutting edge of new ideas and concepts.

### **Technology Forward Data Driven Organization**

At Monarch, we have invested in our technology infrastructure and staffing to provide instant 24/7 access to all personal health records and agency databases that drive decision making. Our Information Technology services team led by our Chief Information and Chief Technology

Officers ensures our solutions architects, data analysts and application analysts support the organization using a variety of platforms to organize and design data to improve outcomes.

Monarch's network administration team plays a critical role in securing our company's computer systems and data from cyber-attacks. They are responsible for implementing and managing security measures such as firewalls, intrusion detection and prevention systems, antivirus software, and encryption protocols. Staff ensure our software and operating systems are up to date with the latest security patches and fixes. Additionally, they monitor the network for any suspicious activity and investigate potential security breaches. By working proactively to prevent cyber-attacks and responding quickly, when necessary, Monarch's network administration staff helps protect sensitive data and critical infrastructure from malicious actors.

Personal health information security is a priority at Monarch. To satisfy the highest levels of security for the protected health information of the people we support, all Monarch systems are fully HIPAA-compliant, and imbued with strict data access and role-based security constructs so that every system interaction is logged and reportable on-demand. Furthermore, all Monarch systems are securely hosted with ultra-high availability services that minimize downtime via state-of-the-art data centers with high availability infrastructure and optimal performance configurations. All data centers include industry leading, best of breed equipment and software, including enterprise level primary and secondary sites with 24 hour, 7 days a week, 365 days a year monitoring. All server rooms are secured with biometric thumbprint readers and monitored by security cameras. Our data centers have built-in redundancy for all power and cooling systems, as well as whole-system data replication in real-time.

Monarch collects a variety of data that is routinely disseminated throughout the organization as appropriate and utilized in the decision-making process. Measurement-based care and program performance data are archived in the electronic health record system (Credible) and available to be retrieved and analyzed by program directors, executive leadership, and other staff. Reporting is routinely and systematically utilized, and data is verified in various committees and sub-committees within the organization. Tools within the electronic health record and in other auxiliary systems are utilized to provide data dashboards to staff. Data reporting informs both our philosophical and mission-related objectives as well as day-to-day operations. The organization is thoroughly involved at all levels with data collection and analysis.

Decision making at Monarch is data driven. Anecdotal and case data are useful for refining and understanding the congregate data we collect and use for decision making. However, without the use of data, decisions cannot be based on comprehensive, thorough analysis of issues.

If granted the opportunity, the requirements of this RFP will be incorporated into our performance improvement, data collection and reporting processes and monitored accordingly to ensure project success.

## Relevant Organization Policies and Procedures

As mentioned earlier, Monarch uses a policy system (Power DMS) that ensures all policies are reviewed on a timely schedule, modified as necessary, and approved by the board and/or other appropriate body. All staff have access to these policies and can easily search using a keyword to find the methods to handle whatever situation the employee has encountered.

Policies/procedures and standard operating procedures (SOPs) are continually reviewed at staff meetings, as well as assigned as training for appropriate staff. The benefit of this system is that people are never looking through old, printed policies and procedures; always having access to the newest information that meets state standards and quality metrics.

*Please see Attachment 3: Monarch Policies and Standard Operating Procedures List*

## Proposed Cost Model

Monarch's Chief Financial Officer and Budget Analyst worked with c-suite operational leaders to develop a comprehensive cost model broken out by each of the four service lines for the Cabarrus County Behavioral Health Center. Monarch has in depth experience running a BHUC and Adult FBC and SUD program and will use similar staffing that meets and often exceeds state required staffing. Monarch is also well positioned to develop an appropriate PRTF cost model based off the combined experience in running the Goodale Recovery School and the SECU child and adolescent FBC.

Monarch anticipates expenses for startup. Typically, in addition to those provided by the county such as furniture, additional expenses can include technology, program supplies and hiring/training expenses. Monarch welcomes the opportunity to discuss the source of funds for this with Partners and Cabarrus County.

Monarch's financial statements as of June 30, 2022 and 2021 were audited by Davidson, Holland, Whitesell & Co., PPL on October 20, 2022, without findings. Monarch utilizes a diverse set of funding types which include Government Grants, Foundations, Corporations, Individual Donors, Membership Income, and Earned Income.

*Please see Attachment 4: Issued Financial Statements*

*Please see Attachment 5: Monarch Proposed Cost Model*

## Scope of Work

### General Proposed Staffing Model and Leadership Structure

Monarch believes that with the scope of this project, there needs to be a Centralized Director (Vice President, Cabarrus County Behavioral Health Center) who will ensure that each component of service is effective and working in coordination with other services.

Execution for the Cabarrus County Behavioral Health Center as it relates to this RFP will also include Program Directors, Psychiatrists, Physician Assistants, Psychiatric Nurse Practitioners, Licensed Clinical Therapists, Behavioral Technicians, Qualified Professionals, Registered Nurses, Occupational Therapists, Certified Occupational Therapy Assistants, Peer Support Specialists, Teachers, including EC Certified Teachers, Administrative Assistants and Security. Additional staff including facilities and information technology helpdesk support, call center, human resources and talent acquisition, finance, marketing and philanthropy, and performance improvement specialists will support the operation off site. Please see each specific service below for specific proposed staffing model and leadership structure.

Given the breadth and depth of the proposal, it is recommended that a commercial kitchen be available, and that a chef and assistants be hired to provide food that is attractive, healthy, and has excellent taste. Individuals have basic needs for food, shelter, clothing, and so on. When struggling with mental illness, those basics provide a level of safety and security that individuals need. People supported do not need to stress about food, portions, or dietary needs. That is the job of the program.

In addition, all services will have access to an on-call system for psychiatrists and/or nurse practitioners, as well as management staff for operational concerns. You will see in the staffing models for each program that we have ensured that operations leadership is on site daily, Monday through Sunday, and is also available on second shifts. On call would be primarily used for overnight concerns.

### Evidence-Based Treatment

Monarch offers treatment services, specialties and evidence-based therapies for the associated noted diagnoses: Cognitive Behavioral Therapy (depressive disorders, anxiety disorders, psychotic disorders); Dialectical Behavioral Therapy (personality disorders); Motivational Interviewing (SUD, depressive disorders, anxiety disorders, bipolar spectrum disorders, psychotic disorders); Family-Centered Treatment (DMDD, ODD, Conduct Disorder, depressive disorders, anxiety disorders); Mindfulness-Based Cognitive Therapy (SUD, depressive disorders, anxiety disorders, bipolar spectrum disorders); Solution Focused Brief Therapy (SUD, depressive disorders, anxiety disorders, bipolar spectrum disorders); EMDR (PTSD); Trauma-Focused Cognitive Behavioral Therapy (PTSD, depressive disorders, anxiety disorders, DMDD, ODD); Forensic Therapy (all diagnoses); Medication Assisted Treatment (opioid use disorders); MATRIX (substance use disorders) and Whole Health Action Management (all diagnoses). We also use the twelve steps of recovery from AA and NA, to ensure that when people leave us, they have access to those support groups 24/7.

At Monarch, we believe that standardized measurement tools can be powerful aids for diagnosing behavioral health conditions, assessing treatment response, providing data for data driven decisions and informing future course of treatment. We currently use the DLA-20, PHQ-9, PHQ-A, the GAD-7, the LEC-5, the LOCUS, the CALOCUS, the CAGE-AID, the ASAM, the AUDIT-C, the RAS, and the Columbia Suicide Severity Rating Scale (C-SSRS) standardized risk assessment screening tool, completed at assessment, and as needed.

In addition to group learning, part of this model can include wrap around services as defined by each individual treatment plan. This includes working with licensed professionals to incorporate individual and group therapy, medication management and symptom management, and recovery principles. It is possible that these individuals will also access ACTT or CST team services, or other services designed to prevent re-hospitalization.

Occupational therapy will use evidence-based models of care for assessment and treatment for developing community skills, independent living skills, and so on, ensuring that individuals are accessing modes of treatment that meet any cognitive or educational methods of learning that are most appropriate for the individual.

The program staff will work closely with other professionals to ensure that appropriate treatment continues post discharge, such as therapy (i.e., DBT, CBT, SUD services), psychiatric services and physical health services.

### [Community Collaborations](#)

Monarch collaborates with many local partners, including departments of social services, law enforcement, magistrates, EMS and/or advanced paramedics, health departments, schools, other behavioral health providers, and advocacy groups. In Cabarrus County, Monarch is a member of the Cabarrus Community Collaborative and supports the Cabarrus County Schools as a presenter and participant in their annual experiential resource fairs for staff and will participate in the resource fair for parents in May. We work closely with DSS to ensure we have a streamlined referral process, especially for youth in crisis to receive services at our SECU Child and Adolescent FBC in Charlotte and have been a presenter with Atrium Health - Cabarrus Hospital, to ensure their patients are connected to appropriate levels care upon discharge. We also are a partner with Amazing Grace Advocacy to help them support families of children diagnosed with a mental health or developmental disability and have been a presenter for the Mental Health America of the Central Carolinas – Cabarrus County Family and Parent Support Groups. We have a great relationship with NAMI Cabarrus and support them with presentations and distribution of their information.

Monarch regularly serves as a host site for Crisis Intervention Team (CIT) training for EMS personnel and law enforcement officers. We collaborate with magistrates, law enforcement, and EMS to request an Involuntary Commitment (IVC) and are a member of the RCORP Consortium, which also includes the sheriff's department, county DA, and a judge. In neighboring Mecklenburg County, staff interact with local law enforcement through our Project for Assistance with Transition from Homelessness (PATH) program and their Law Enforcement Assisted Diversion (LEADS) program.

### [Behavioral Health Urgent Care](#)

Monarch opened one of the first Behavioral Health Urgent Care Crisis Centers in North Carolina for those who are experiencing a crisis and are in immediate need of assessment.

Monarch's BHUC treatment model is designed to provide assessment, stabilization, and psychiatric intervention for people ages 4 and older who are experiencing a behavioral health crisis. A multidisciplinary team that includes nursing staff, licensed therapists, experienced medical professionals, qualified professionals, and peers provides the services. This program is designed to ensure people are linked to the least restrictive and most appropriate level of care that promotes their continued recovery. The BHUC also serves as a means of diversion from the use of emergency departments or hospitals and can initiate the involuntary commitment (IVC) petition via first-level evaluations (clinician petition) for people who require IVC. Our BHUC programs provide a safe, secure, and healthy environment where stabilization, healing, and recovery can begin.

#### **Proposed Staffing Model**

We plan to staff the model in the same effective way that we currently staff our BHUC in Wake County (Raleigh) with added peer support specialists, dedicated LCASs, chef/chef assistants to accommodate Tier IV services. Staff will include APPs – NP/PAs, Registered Nurses, Behavioral Therapists, Qualified Professionals in addition to the above-mentioned Peer Support Specialists, LCASs, Chef and Chef Assistants and security. BHUC FTEs are detailed in *Attachment 5: Monarch Proposed Cost Model*.

#### **Leadership Structure**

Leadership will include a BHUC Program Director, who will report to the Vice President of the Behavioral Health Complex and will be included as part of the Regional Behavioral Health leadership team. There will also be an Assistant Program Director, Associate Medical Director, and Nurse Manager. Additional leadership will include a lead psychiatrist and lead therapist.

#### **Financial Management Capabilities**

Monarch has established financial policies and standard operating procedures (SOPs) that remain the same for each service line across the organization. All policies and SOPs are easily accessible through Power DMS – our online document library platform which alerts staff when policies and SOPs have been updated or added. Staff are responsible for providing an electronic signature confirming review of updates or new policies/SOPs. Management runs staff compliance reports for policy/SOP reviews through a dashboard when they login to Power DMS.

*Please see attachment 6: Detailed Monarch Financial Capabilities*

#### **Child and Adolescent Psychiatric Rehabilitation Treatment Facility**

Monarch will model the PRTF using effective components of both our therapeutic boarding school, Goodale School for adolescent boys ages 14-18 who struggle with substance use and co-occurring disorders and our SECU Youth Crisis Center that provides short-term stabilization for

young people between the ages of 6-17 who are experiencing an acute psychiatric episode or are in mental health or substance use crisis.

The Goodale School program combines comprehensive clinical support with an accredited academic program and family support to create an individualized recovery experience for the youth. The academic program is individually customized to accommodate each student's learning ability, strengths and interests and is directed by a certified EC teacher who can provide instruction and accommodations as defined by Individualized Education Plans and plans generated through Section 504. The clinical emphasis includes individual therapy, group therapy, and one session per week with the family and the youth. If children are to return to their families, it is critical that the families be involved in treatment as well. Therapists do not only work with students individually or in groups, but also participate in the general milieu, as we know that teens in particular want to talk to someone when the urge hits, not necessarily when the structure directs. That means that therapists participate in activities in the structure – games, exercise, pottery classes, cooking classes and off-site events such as whitewater rafting and camping.

SECU Youth Crisis Center offers age-appropriate treatment to youth and adolescents in individual and group settings, with medication as needed and provides access to a variety of individual and family services to help the youth manage their illness in their community. Under the direction of a psychiatrist and other medical and professional staff, the program provides short-term therapeutic interventions designed to prevent hospitalization by stabilizing a child's crisis and linking them to needed care.

Because of these experiences, we are confident that we can manage an effective PRTF facility. Our plan is to provide significant structure based on positive approaches. The children's day will be organized as closely as possible by age and interest. We anticipate having certified teachers on site who can run small group classes for academics; therapists on site who can run group or classes around areas such as coping skills, emotional regulation, and anger management; occupational therapists on site who can focus on sensory deficits, occupational deficits, and appropriate leisure skills with an eye towards improving self-esteem.

Treatment will include scheduled individual and group therapy sessions that utilize evidence-based practices such as cognitive behavioral therapy and occupational therapy. Time will be allotted for academics/schoolwork and participating in recreational activities such as practicing yoga, playing games, art, physical activity, and mindfulness activities.

Monarch also does not believe in the use of planned restraints. Although all staff are trained in appropriate curriculums, we focus on de-escalating situations before they become significant conflict and have been very successful with this in our adolescent FBC. We have recently implemented the UKERU system, used in multiple PRTFs across the country. Using this system eliminates the need for physical restraint and keeps everyone, both the child, other children, and staff, safe.

### Proposed Staffing Model

There will be a Program Director that is available both days, evenings, and weekends, along with a back-up to this person in case of illness and to cover more shifts.

Monarch will ensure that there are always well-trained behavioral technicians on site, at the required ratio or better. We often find that specific students do better with smaller groups and more attentive staff, so will add staff as needed. Also in ratio will be teachers including an EC teacher who will have small groups of students for academics during the day. At least four teachers will be available for various academic classes during the day. A full-time psychiatrist will be available as well as on-call psychiatrists as necessary and there will be nursing staff on site 24/7. There will be clinical social work staff as well as clinical occupational therapy staff to provide individual and group therapy and there will also be qualified professional staff to function as care managers for the students. PRTF FTEs are detailed in *Attachment 5: Monarch Proposed Cost Model*.

### Leadership Structure

The Leadership Team at the PRTF will consist of the PRTF Program Director, and a Lead Psychiatrist, Nurse, Therapist, and Behavioral Technician. The PRTF Program Director will be supervised by the Vice President Operations, for the Cabarrus County Behavioral Health Center.

### Financial Management Capabilities

*Please see attachment 6: Detailed Monarch Financial Capabilities*

### Adult Facility Based Crisis (10 Bed)

Monarch currently manages a highly successful ten bed adult facility-based crisis program in Lumberton. We propose replicating that model for this proposal. Our Facility-Based Crisis (FBC) program is the first step in life-changing treatment for adults who are at risk of self-harm or harming others and/or suffer from mental illness that requires a short-term intensive evaluation and treatment. Under the clinical oversight of a psychiatrist, we offer a 5–7-day residential program that provides short-term stabilization, a comprehensive clinical assessment, treatment intervention, and aftercare planning. Once discharged, an individual is linked with community services that may include therapy, psychiatry, housing, employment, food, or whatever the individual needs.

Caring and experienced staff provide round-the-clock support and treatment via individual therapy, daily psychiatric assessment, group therapy, nursing services, and peer services. Because the service is designed as a time-limited alternative to hospitalization for an individual in crisis, upon discharge each person leaves with a personalized recovery focused care coordination plan that includes verification of 7 day follow up. We attempt to ensure that the individual meets with a community provider, or at minimum connects with a peer or other familiar staff. Our Facility-Based Crisis programs provide a safe, secure, and healthy environment where healing and recovery can begin.

### Staffing Model

Direct care staff will consist of an Associate Medical Director, Psychiatrist, APP – NP/PA, Nurse Manager, Registered Nurses, Behavioral Therapists, Behavioral Technicians, Qualified Professionals, and Peer Support Specialists. There will also be a Chef and Chef Assistant to prepare meals for the people supported. Adult FCB FTEs are detailed in *Attachment 5: Monarch Proposed Cost Model*.

### Leadership Structure

The Adult FBC will have a Program Director and the Leadership Team will consist of the Director, Associate Medical Director, Psychiatrist, Nurse Manager, and Lead Therapist.

### Financial Management Capabilities

*Please see attachment 6: Detailed Monarch Financial Capabilities*

### Adult Substance Use Disorder (10 Bed)

As we all know, the opioid crisis has not abated. Monarch currently operates a ten bed Facility-Based Crisis (FBC) program specifically for adults with substance use disorder, although they may have co-occurring mental illness or other disability. We propose replicating that model for this RFP.

In this program, under the clinical oversight of a psychiatrist, we will offer a 5–7-day residential program that provides short-term stabilization, a comprehensive clinical assessment, treatment intervention, non-hospital medical detoxification, education about substance abuse, introduction to the twelve-step program model (AA) and aftercare planning. This service is designed as a time-limited alternative to hospitalization for an individual in crisis.

For people with a substance use disorder, this is often the first step in life-changing treatment. We offer all the services that are in the mental health facility-based crisis program with an added emphasis on education and therapy to help the individual understand the need to stop using. Monarch also provides medication-assisted treatment (MAT) when appropriate for the treatment of opioid use disorder.

In this program, caring and experienced staff will provide round-the-clock support. At Monarch, we attempt to hire primarily staff who are in recovery which includes full-time LCAS staff who are specialists in substance use disorders, as well as peer staff. We know a significant issue for people with substance use disorder is stating the truth and have found that by incorporating peers and staff who are in recovery onto to our treatment teams, dishonesty is less able to be sustained.

Upon discharge each person supported leaves with an individual care coordination plan linking them with community services that can include information about AA meetings, therapy, psychiatry, housing, employment, food, or whatever their individual needs require. This plan

includes verification of 7 day follow up with a peer or other familiar staff they worked with during their stay at our FBC. If an individual is committed to sobriety and needs more treatment, we refer to a plethora of longer-term programs in NC that typically accept Medicaid or are offered for free or very low cost.

Our Facility-Based Crisis programs provide a safe, secure, and healthy environment where sobriety, healing and recovery can begin. We know that relapse is common and expected among substance users, so it may be typical to accept a person more than once for this service. We stress that substance use disorder is a disease, not a moral failing. Given that this disease is not curable but is manageable, we know that relapse can occur. Unlike some programs, we do not expect a person to have treatment and be “cured”. We know this is a lifelong experience, and teach coping, recovery, and management skills as appropriate.

#### Staffing Model

Staffing will be the same as the Adult FBC with the addition of a Licensed Clinical Addiction Specialist. Adult SUD FTEs are detailed in *Attachment 5: Monarch Proposed Cost Model*.

#### Leadership Structure

The Adult FBC will have a Program Director and the Leadership Team will consist of the Director, Associate Medical Director, Psychiatrist, Nurse Manager, and Lead Therapist.

#### Financial Management Capabilities

*Please see attachment 6: Detailed Monarch Financial Capabilities*

### Funding Facility Operations

Monarch manages revenue and expense tightly to be as efficient as possible. While we have provided detailed budgets and our monthly financial review process, there are many controls we place on our operations to maximize revenue, minimize expense, and operate efficiently. Some of those are detailed below:

#### Insurance/Medicaid Verification

Monarch verifies each patient's insurance or Medicaid eligibility prior to each visit so the individual understands the expected co-pay or payment required if applicable. We request co-pays up front when possible and do this for both virtual and in person appointments.

#### Billing

Monarch recently invested in a text message service that allows us the ability to provide bills to individuals via text message/cell phone. This is preferred to mailing bills for our patients who move often, as well as those younger individuals who have used technology their entire lives. We also have an online portal which people can access 24/7/365 to pay their bills.

### Patient Payment and Write-Offs

We monitor patient payments carefully. Although we can use a company to obtain payment on overdue bills, our philosophy is that for people that are exceptionally low income, medical debt is one more stress that adds to the individual's life that is not needed. We write off those bills, knowing that payment will not occur because we would rather see people feed families or maintain their housing. Because of this philosophy, we ensure that other services balance our need to provide free services to some individuals.

### Non-UCR Money

Monarch works with each of the LME/MCOs to find non-UCR money to cover as many people as possible that do not have funding, and create "shadow claims" which allows us to process the information appropriately in our metrics. In every business like ours there are discrepancies between what is billed versus what is paid or denied. These claims are carefully monitored and managed by our billing staff who work with our operations staff to ensure that things like target populations, authorizations, and other required information is correct on every bill so we can get paid.

### Provider Productivity

To maximize revenue, each billing provider is responsible for productivity measures balanced with a quality component. For example, a psychiatrist will have specific targets of number of people to see but will be held to data driven quality measures at the same time. New providers or therapists have specific ramp up expectations of patients seen per month that is lower than established staff. We want to see the quality of a provider in addition to quantity.

### Staff/Performance Audits

Monarch regularly reviews our organizational structure to ensure that all positions are needed, especially in administrative departments.

While there are many more aspects to our revenue management, this gives some insight into our operations. As a mission driven non-profit, our philosophy is to spend most of our income on the people we support. The Monarch board of directors are insistent about this and watch closely to ensure that our funds are spent where our values sit but they also understand the staffing crisis that has been termed "The Great Resignation." By establishing both performance and quality measures, staff are able to have salaries they perceive as consistent with market and their value.

## References

At Monarch, we are a proud partner with many organizations across the counties we serve and make ourselves available to support others in serving their population with the highest quality of care. Attached you will find letters of recommendation from a diverse group of partners, an

email from Penny Markey, a person supported in our Lumberton Adult FBC who now works as a peer support specialist and a letter of good standing from Partners LME/MCO.

Our mission driven marketing team works hard to break the stigma of mental illness and substance use disorder by featuring stories of people in recovery as well as highlights of our facilities to help people feel they are not alone and give people an understanding of what to expect when they enter one of our facilities. If granted the opportunity, these strategies would be deployed to introduce the Cabarrus County Behavioral Health Center. Please click on the links in “Feature Highlights” section below, to be directed to the stories/short videos on our webpage.

#### Featured Highlights

Lumberton, Adult Facility Based Crisis, and SUD Facility Overview

<https://monarchnc.org/behavior-health/crisis-services-prove-to-be-life-saving-option/>

Lumberton, Adult FBC – Penny Markey Offers to Bring Hope to Others

<https://monarchnc.org/behavior-health/recovery-offers-opportunity-to-bring-hope-to-others/>

SECU Youth Crisis Center – Video Highlight: Meet Ari, a youth supported.

<https://youtu.be/HkSqFBA56al>

Lumberton, Adult FBC – Video highlight of Steve, a person supported.

<https://youtu.be/OjX1ao8LjUI>

#### Letters of Recommendation

Kevin Turner, Principal Architect, *Human Experience*

Anjie Vickers, President, *NAMI Cabarrus County*

Karen McLeod, President and Chief Executive Officer, *Benchmarks NC*

Kathy Smith, Chief Operating Officer, *Alera Health*

*Please See Attachments 7-10*

#### Email of Support

Penny Markey, Peer Support Specialist, *Monarch*

*Please see Attachment 11*

#### Letter of Good Standing

Partners LME/MCO

*Please see Attachment 12*

## Results/Evaluation

### Clinical Outcome Measures

Monarch currently tracks 18 HEDIS and MIPS/MACRA measures for patients. We improved with these measures and received positive adjusted rates from Medicare as a result. As part of our APM/VBR with our MCOs, we track additional required data to demonstrate performance in areas of hospitalization discharge follow-up, patient progress through treatment and service model fidelity. Another example of this is our collaboration in Wake County with Alliance Health and provider partners who work with children and adolescents we support. Alliance provides data on the APM identifier measuring Metabolic Monitoring for Children and Adolescents on Antipsychotics. HEDIS measures give us a year view on performance. The Target Rate based on 2020 national Medicaid averages is 32%. At the time of last reporting, the rate for children and adolescents supported by Monarch was 51.2%, well above the Medicaid average.

Monarch also works with the standard plan vendors and private insurance companies on metrics. We operate many value-based reimbursement models with these groups as well as the LME/MCOs. All performance improvement initiatives are data driven. Performance improvement data is reviewed monthly or quarterly, depending on the metric, and adjustments are made as needed to obtain the appropriate outcomes desired.

At Monarch we emphasize quality care and regularly audit our staffing levels and effectiveness. An example of this is our SECU child and adolescent facility-based crisis program. We added certified occupational therapy assistants (COTAs) to create schedules, run therapeutic groups and add the clinical component to various activities that were being directed by the behavior technicians. Instead of simply creating and doing a craft suggested by the behavior technician, the COTAs will use the same activity to help a child understand how to manage frustration, sharing, coping skills and other key skills. This addition to our structure has provided additional skills for our behavior technicians, made a difference in how the children perceive the program, and improved the outcomes we see in the children.

We will establish targeted data tracking and performance review measures in conjunction with Cabarrus County and Partners MCO staff to ensure we are providing services and meeting project outcomes as planned. Regular data and performance reviews will determine any necessary service delivery, staffing, or other operational and clinical changes.

Monarch utilizes a Plan Do Study Act (PDSA) model for continuous quality improvement. Quality assessment is accomplished by internal audits, peer reviews, stakeholder feedback, data analysis and employee input.

*See Attachment 13: Monarch Clinical Assessment Grid*

*See Attachment 14: Monarch PI Plan 22-23*

## Key Financial Indicators

Monarch monitors key financial indicators for profitability, liquidity, and efficiency. For each of the service lines included in the Cabarrus County Behavioral Health Center, we will measure and trend gross margin, net margin, aged receivables by payer, revenue per day, volume metrics and number of FTEs.

The following are examples of key financial indicators tracked at the Agency level:

Gross Margin

Net Margin

Current Ratio

Days Cash on Hand

Days in AR

Cash Ratio

## Attachments

[Attachment 1: Monarch Locations and Services Offered](#)

[Attachment 2: Monarch Mission, Vision, Values](#)

[Attachment 3: Monarch Policies and Operating Procedures List](#)

[Attachment 4: Issued Financial Statements](#)

[Attachment 5: Monarch Proposed Cost Model](#)

[Attachment 6: Detailed Monarch Financial Capabilities](#)

[Attachment 7: Recommendation, Kevin Turner, hX](#)

[Attachment 8: Recommendation, Anjie Vickers, NAMI Cabarrus](#)

[Attachment 9: Recommendation, Karen McLeod, Benchmarks NC](#)

[Attachment 10: Recommendation, Kathy Smith, Alera Health](#)

[Attachment 11: Recommendation, Penny Markey, Monarch](#)

[Attachment 12: Letter of Good Standing, Partners LME/MCO](#)

[Attachment 13: Monarch Clinical Assessment Grid](#)

[Attachment 14: Monarch PI Plan 22-23](#)



**REQUEST FOR PROPOSAL  
CABARRUS COUNTY RETIONAL BEHAVIORAL HEALTH CENTER  
ATTACHMENTS**

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# Mission, Vision, Values

## OUR MISSION

- Monarch provides hope, promotes wellness, and empowers individuals and families impacted by mental illness, substance use disorders, intellectual and developmental disabilities, and traumatic brain injury.

## OUR VISION

- Monarch envisions a world where all people can achieve their unique potential.

## OUR VALUES

- **Integrity:** We value ethical and transparent behavior. We believe in honest and open communication that fosters trust and ensures we are accountable to each other and the people we support.
- **Compassion:** We believe in treating all people with basic human kindness, understanding that Monarch is a stronger organization when people are caring and compassionate toward each other.
- **Respect:** We value diversity in all its forms and work to ensure the inclusion of all people. We respect the rights and value the unique contributions of each individual.
- **Excellence:** We are committed to providing exceptional customer service and mission-driven care in a safe, healthy and respectful environment.
- **Courage:** We believe there is strength in having the courage to try and fail and in asking for help when assistance is needed. We value the ownership of mistakes and support the change and growth that can result.
- **Innovation:** We value learning, changing and charting the course for better behavioral health care for all. We commit to guiding operational performance through data driven leadership.

Document Name	Folder Path
Acquisition Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Facility and Program Naming Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Grant Fundraising Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Individual Advocacy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Financial Conflict of Interest - Federal Grants	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Social Media Community Guidelines	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Social Media Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Contracts	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Corporate Compliance Plan	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Fundraising Revenue Carry-Over Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Gift Acceptance Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Licensure of Agency Facilities	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Media policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Non-Discrimination of Customers	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Policy Procedure SOP Form Development and Implementation	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Research	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Scope of services-service purpose and eligibility	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Sponsorship Policy-Procedure	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Volunteer Policy	Documents / Policies, Forms, and SOP's / Administration / Administration Policies
Board Attendance Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Donation Fund Raising policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Ethics Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Family Members employment policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Authority	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Award Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Background Checks	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board committee	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Conflict of Interest Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board Expenditures policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Board response to concerns and complaints	Documents / Policies, Forms, and SOP's / Board / Board Policies
Executive compensation policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
Minutes of governing body	Documents / Policies, Forms, and SOP's / Board / Board Policies
Protection of Personal Information Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
HMIS Confidentiality Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
HMIS Grievance Policy	Documents / Policies, Forms, and SOP's / Board / Board Policies
System of Care Policy	Documents / Policies, Forms, and SOP's / Care Management / Care Management Policies
HCBS Waiver Care Coordination Requirements Procedure	Documents / Policies, Forms, and SOP's / Care Management / Care Management Policies
Conflict Free Care Management Procedure	Documents / Policies, Forms, and SOP's / Care Management / Care Management Policies
Tailored Care Management Policy	Documents / Policies, Forms, and SOP's / Care Management / Care Management Policies
Care Management Agency Grid	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Admissions Process SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Crisis Response SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
NCCare360 Outbound Referral Management SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Engagement SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Huddle SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Planning Process Companion Guide	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Clinical Consultant SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Internal and External Referrals SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Satisfaction Survey SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Discharge SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Transitional Care Management-Diversion-Community Inclusion SOP - DRAFT	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Education and Communication - Self Management SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Training Requirements	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Care Management Medication Review and Consultation SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
TCM Transportation SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
TCM On-Call Updates SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Tailored Care Management Disclosure Tracking SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
MS Teams Virtual Meetings SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Tailored Care Management Naming Convention - Attachments	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Tailored Care Management Medisked Coordinate Support Ticket SOP	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
New Document	Documents / Policies, Forms, and SOP's / Care Management / Care Management SOP's
Safety Steering Committee Charter	Documents / Policies, Forms, and SOP's / Culture of Safety / Charter

Document Name	Folder Path
Dietary Policy	Documents / Policies, Forms, and SOP's / Dietary Supports / Dietary Supports Policies
Food Storage and Kitchen Cleanliness Policy	Documents / Policies, Forms, and SOP's / Dietary Supports / Dietary Supports Policies
SOP Digital Thermometers for Refrigerators	Documents / Policies, Forms, and SOP's / Dietary Supports / Dietary Supports SOP's
Emergency Preparedness Plan - site specific	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Environmental Assessment	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Emergency relocation and notification form	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
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NFPA Med Gas Cylinder Storage	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Emergency Operations Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Emergency Closure Procedure	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
ILSM Contractor Checklist Appendix B	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
ILSM Initiation form Appendix C	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
ILSM risk assessment Appendix A	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
ILSM Termination form Appendix D	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Evacuation needs form	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Hot water heater sign	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Bedbug information flyer	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Annual Fire Drill form BH locations	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Fire drill form	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
BH Monthly Equipment checklist	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Blood Borne Pathogens Exposure Control Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Occupational Exposure Control Plan Levels	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Emergency Operations Annex plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Emergency Preparedness Plan-General	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Safety Manual 2020	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Facilities Information Form	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Forms & Plans
Facility Management policy	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Environment of Care Program	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Hazardous Materials and Waste Management Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Interim Life Safety Measures policy	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Lockout-tagout policy	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Life Safety Management Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Maintenance of Facility Equipment	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Utilities Management Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Identification badge	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Environment Of Care Safety and Security Plan	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Oxygen Policy	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety Policies
Bed Bug SOP	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety SOP's
SOP Woodworking Equipment	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety SOP's
IT Maintenance and System Changes	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety SOP's
Fire Drill- SOP	Documents / Policies, Forms, and SOP's / Facility Management-Safety / Facility Management-Safety SOP's
Procurement Manual - Monarch.2021	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Monarch Investment and Spending Policy 2021	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Audit Requirements	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Cash Disbursement Policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Patient Consent to Treat Disclosure for Billing	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Petty Cash Policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Accounts Receivable	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Audit Preparation	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Audit Selection	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Budget	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Capital Purchases	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Cash Management	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Cash Receipts	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Checking Account Signatures	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Financial Reporting	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Fiscal Year Closing	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Fixed Assets	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Fraud	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Front Desk Pay Source Verification	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Liabilities and Indebtedness loans	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Payment for individuals creating art work	Documents / Policies, Forms, and SOP's / Finance / Finance Policies

Document Name	Folder Path
Personal Funds Policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Preferred Vendor Policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Recording of cash donations	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Sliding fee scale policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Travel Expense	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Grant Preparation and Management Policy	Documents / Policies, Forms, and SOP's / Finance / Finance Policies
Drug Screening	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Professional Boundaries	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Staff as Role Model	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Student Self Governance	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Student tuition and payment	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Suicide Risk & Precautions	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Voluntary Work by Students	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Admission Assessment Goodale	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Admission Criteria	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Assessment and Treatment Planning	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Competencies and Supervision	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Discharge Criteria	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Ensuring the Highest Standard of Care	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Quality Assurance & Improvement	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Student Rights and Responsibilities	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Suspension and Expulsion	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
Training and Continuing Education	Documents / Policies, Forms, and SOP's / Goodale School / Goodale School Policies
HIPAA Complaints Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
HIPAA Security Policy Handbook	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
HIPAA Summary	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures - Authorization Objection Not Required Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures - Other Requirements relating to uses and disclosures of PHI Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures - Valid Authorization and Required Authorization Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures of PHI Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures-General Rules Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Access of Individuals to PHI	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Notice of Privacy Practice Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Accounting of Disclosures of PHI Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Administrative Requirements Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Breach of PHI Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Business Associates Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Right to Request Privacy Protection	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Uses and Disclosures - Agree or Object	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Amendment of PHI Policy	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
Designated Records Set Policy 2021	Documents / Policies, Forms, and SOP's / HIPAA / HIPAA Policies
2023 Employee Handbook	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Clinical Supervision and Administrative Supervision of Clinical staff	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Competency Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Maintenance of Licensure and Continuing Educational Units Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Credentialing Policy for Licensed Staff	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Employee Visitor Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Employment during COVID-19 Policy Non-CMS	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
PRN Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Staffing Requirements	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Employment during COVID-19 Policy CMS	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Independent Contractors Consultants	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Staff Credentialing	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Supervision of Associate and Para-Professional Staff	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Training Plan	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Site requirements for first aid-cpr-and other red cross training	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Associate Level Therapist Clinical Supervision and Reimbursement	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Training Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Telework (Work From Home) Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Emotional Support Animal Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Tobacco-free Policy	Documents / Policies, Forms, and SOP's / Human Resource / HR Policies
Instructions for completing Infection Control Risk Assessment	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Plans & Documents

Document Name	Folder Path
2023 INFECTION PREVENTION AND CONTROL PLAN	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Plans & Documents
Standard Precautions policy	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Policies
COVID-19 Vaccination Policy	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Policies
Communicable diseases Policy	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Policies
Flu Vaccine	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Policies
Hand Hygiene policy	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control Policies
Cleaning supplies SOP	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control SOP's
MRSA SOP	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control SOP's
OSHA Hazard Communication Standards-Safety Data Sheets SOP	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control SOP's
Confirmed Infections-Credible	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control SOP's
Immunizations-Credible	Documents / Policies, Forms, and SOP's / Infection Control / Infection Control SOP's
Admission Assessment	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Discharge and Transfer Policy	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Discharge Procedures FBC	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Storage of Client Belongings Crisis Programs	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Risk Assessment-Harm to self or others	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Comprehensive Clinical Assessment	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Drug Screening Policy GLH	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Emergency Admission	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Inter-Agency Transfers	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
LTSS Referral, Waiting List and Vacancy Notification	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Multidisciplinary Evaluations	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Pre-admission Medical Examination	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Monarch Standard Denial of Services Letter-LTSS	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
BH Referral Policy	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Outpatient Intake	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Appointment Confirmation Policy	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Consent to Treat Policy	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Intake, Admission, and Discharge Policies
Clinical Coverage-Service Definitions Policy	Documents / Policies, Forms, and SOP's / Intake, Admission, and Discharge / Service Definitions
Medication Checklist-Vivitrol	Documents / Policies, Forms, and SOP's / Medical Service and Supports / High Risk Medications
Vivitrol STAFF COMPETENCIES	Documents / Policies, Forms, and SOP's / Medical Service and Supports / High Risk Medications
Medication Checklist-Clozapine DRAFT 7.19.2021	Documents / Policies, Forms, and SOP's / Medical Service and Supports / High Risk Medications
Medication Checklist-Long Acting Injectables	Documents / Policies, Forms, and SOP's / Medical Service and Supports / High Risk Medications
Work instructions for providers - ordering injections	Documents / Policies, Forms, and SOP's / Medical Service and Supports / High Risk Medications
High Alert Medication Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Administration policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Management Program	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Refill	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
NC Controlled Substance reporting system	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Prescribers Order Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Venous Blood Drawing Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
AED Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Dispensing and Labeling of Meds	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Emergency Medications Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
HIV-AIDS	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
ICF data-menses-weight-ht-sleep	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Lab Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Look Alike Sound Alike Medication	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Med Admin LTSS Electronic MAR	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Disposal Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Education	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Orders	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medication Reconciliation Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Medications Brought into the Facility	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Metabolic Monitoring Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Monitoring Psychotropic Medication	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Obtaining Prescribed Medication	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Pharmacy Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Prescribing Controlled Medications to Adults Policy	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Process for Re-Called or Discontinued Medications	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Responding to Adverse Medications	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Routine and Preventative Medical Supports	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies

Document Name	Folder Path
Self Administration of Medications	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Storage of Medications	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Therapeutic leave	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Vital Signs	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Monitoring Effects of Medication	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports Policies
Insulin Injection SOP	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports SOP's
electronic labs - SOP	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports SOP's
Lab orders SOP paper	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports SOP's
ordering labs POC	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports SOP's
Medication Room Audit policyF	Documents / Policies, Forms, and SOP's / Medical Service and Supports / Medical Service and Supports SOP's
DOC Monarch PI Plan 21-22 Final Approved	Documents / Policies, Forms, and SOP's / Performance Improvement / Performance Improvement Plan
DOC QIP Summary FY 20-21 Final	Documents / Policies, Forms, and SOP's / Performance Improvement / Performance Improvement Plan
Performance Improvement Activities	Documents / Policies, Forms, and SOP's / Performance Improvement / Performance Improvement Policies
Continuous Quality Improvement Policy	Documents / Policies, Forms, and SOP's / Performance Improvement / Performance Improvement Policies
Performance Improvement Program	Documents / Policies, Forms, and SOP's / Performance Improvement / Performance Improvement Policies
Performance Health - How to Report an Incident Guide	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
Performance Health - Incident Reporting Supervisor Training - Back Office - Monarch	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
MAD Categories and Sub Categories	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
MAD (Monitoring Audit Database) SOP	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
SOP Surveys and POC	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
SOP -Internal Auditing of Records	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM SOP's
Satisfaction Survey Policy	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Complaint-Grievances	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Complaints-Online Reputation Policy	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Level I Minor Incident Report Policy	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Critical incident reporting policy	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Investigations policy	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Peer Review	Documents / Policies, Forms, and SOP's / QM/Regulatory Requirements / QM/Regulatory Requirements Policies
Consent by Minors. Summary	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Electronic Health Records	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Litigation Hold	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Treatment of Minors Without Parental Consent	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Fees for the Reproduction of Records Policy	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Responding to Court Orders or Subpoenas Policy	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
General Record Requirements	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Assurance of confidentiality	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Consent for observation taping, or photographing individuals receiving services	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Documentation of services	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Imaging Policy	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Medical necessity and Service Orders	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Ownership - Transfer of Records Policy	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Protecting and Safeguarding confidential information in paper	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Record Retention and Disposition	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Release of Confidential Information with or without Consent	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality Policies
Storage Training	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality SOP's
SOP to schedule ROI to Medical Records in CREDIBLE	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality SOP's
SOP- Record Transfer Tracking	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality SOP's
Record Storage and Destruction SOP	Documents / Policies, Forms, and SOP's / Records and Confidentiality / Records and Confidentiality SOP's
Abuse Neglect and Exploitation	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Human Rights Committee	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Administration of Emergency Medications	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Advance Directives Policy	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Appeal process for waiver services	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Approved Interventions	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Do Not Resuscitate Policy	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Informing people served of their rights	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Interpreter Services	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Least Restrictive Alternatives	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Magistrate Procedure	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Natural Supports	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Prohibited Procedures	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Protective Devices	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies

Document Name	Folder Path
Restricting Rights	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Restrictive Interventions	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Search and Seizure - BH Crisis Centers	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Search and Seizure	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Sexuality	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Suspension-Expulsion from services	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Voting Rights for People with Disabilities	Documents / Policies, Forms, and SOP's / Rights Protection and Promotion / Rights Protection and Promotion Policies
Company owned vehicles assigned to employees under the Commuting Rule	Documents / Policies, Forms, and SOP's / Transportation / Transportation Policies
Vehicle Commuter Policy	Documents / Policies, Forms, and SOP's / Transportation / Transportation Policies
Transportation policy	Documents / Policies, Forms, and SOP's / Transportation / Transportation Policies
Vehicle Accident Emergency	Documents / Policies, Forms, and SOP's / Transportation / Transportation Policies
Vehicle Maintenance Policy	Documents / Policies, Forms, and SOP's / Transportation / Transportation Policies
Assessments required by service	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Authorization Guidelines per Payor Source	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
EM Established Note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Consent to Treat addendum SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
AED SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Call center representative-911 calls SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Call Center SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
CCNC Process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
common side effects of injections	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Customer Service Expectations	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
EMAR Vehicle Administered Injection Process for Nursing	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Epi pen SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Final Critical Lab Protocol	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Final Lab Ordering Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Injection Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
MDE SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Narcan SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
PAP SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Pharma SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Prior Authorization SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
PHQ9 SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Credible Client Portal SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Evidence Based Practice Training SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Patient Ping SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Sample Medication SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
PHQ-9 Monitoring in Outpatient Behavioral Health	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Credible Updating Demographics	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Credible Emergent Risk Assessment	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Credible Discharge SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Point of Care (POC) Labs SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
eLabs SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Nutritional Screening SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Virtual Open Access SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Relatent On Demand Communication Letters	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
NCTOPPS	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Outpatient Commitment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Managing Refill Requests	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Registration Coordinator Performance Measures SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
BH Scheduler Dashboard User Guide	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Just in Time SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Internal Chart Audit SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Provider, Clinician Change Request	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Credible Communication Documentation	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
IDD Bridge Services SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Infinia COS Referral System	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Scheduling Expectations	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Scheduling On Site Resources-Offices	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
GAD 7 SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
AUDIT-C	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
CAGE AID SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's

Document Name	Folder Path
Monarch Referral Form	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Check in Check out Service	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Clozapine Therapy SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
DRUG SCREEN PROCEDURE	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
Measurement-Based Care	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
BH Mobile Clinic Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's
BHUC Credible Process Maps	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / BHUC
BHUC Process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / BHUC
CCBHC Training SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC
Stanly CCBHC Intake SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC
CCBHC Mobile Crisis from Daymark Entered in Credible SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC
GPRA Service SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC
CCBHC Mobile Crisis from Daymark Entered in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC
Care Manager Orientation Checklist	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
Monarch Fax Revised Cover Sheet to obtain PHI without consent	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Huddle SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Discharge Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Case Conference SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Engagement Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management How to Document Unsuccessful Contacts (No Shows)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Internal Referral SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Medical Records Request	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Process Checklist	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Risk Stratification Tool SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Management Service Note protocol	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC Care Manager Crisis Protocol	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC NC PCP Revision SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
CCBHC NC PCP Initial SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / CCBHC Care Management
MAT Critical Lab Info Protocol	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / MAT
CCBHC NOMS How to Complete in Credible Child SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / NOMS
CCBHC NOMS How to Complete in Credible Adult SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / NOMS
CCBHC NOMS Requirements (overview)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / NOMS
CCBHC SPARS Data Entry SOP (NOMS)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / NOMS
CCBHC NOMS How to Complete a Discharge Service in Credible SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / CCBHC / NOMS
ACTT Inpatient Treatment and Incarceration SOP- Rev 3-2021	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Intensive In Home Authorization Pilot - Cardinal Innovations SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
SOP-ACTT Crisis Response	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
SOP-ACTT Daily Team Meeting	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
SOP-ACTT Individual Treatment Team	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
SOP-ACTT Inpatient Treatment and Incarceration	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
SOP-ACTT Referral Process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Assessment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Credible Reports SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Discharge WorkFlow	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Incoming Referrals WorkFlow (Credible)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Injection SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Internal transfer SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
ACTT Prescriber scheduling SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Career Profile SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Child & Family Team Meeting SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Employer Contact SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Enhanced Services Inpatient Treatment and Incarceration SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
In or At Risk SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Intensive In-Home Process Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
IPS Credible Process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
IPS Progress Note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Job Disclosure SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Job Start Job Stop SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
CANS Assessment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Ongoing ACTT services Workflow (Credible)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
PSR Daily Note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
PSR NB Weekly Summary Note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services

Document Name	Folder Path
PSR Process Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
PSR Workflow SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Signing Service Orders Enhanced Services Providers	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Credible Attaching, Scanning and Uploading SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Credible Team Enrollment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Internal Referral SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Credible Registration-Enhanced Services	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
Enhanced Services Referrals SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
WRAP SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Enhanced Services
FBC Provider Work Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Outpatient-FBC Credible Service Order SOP Training Material	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Outpatient-FBC Standalone Service Order SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Child FBC Building Access.doc	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Child FBC Search SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Child FBC-Voluntary Admission Process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
FBC Admission Adult SOP FINAL	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
FBC Pain SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
Medical Clearance SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
PINPOINT process	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
MAT-confirmation POCC MAKO Lab	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
FBC IVC Admission Note Work Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
FBC Work Process Instructions Detailed	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / FBC
MAT SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / MAT
HOW TO REVIEW REFILL REQUESTS IN CREDIBLE FOR PROVIDERS	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
MAT SUB Enrollment Form SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Outpatient Credible Treatment Plan SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Psych Eval Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Risk Assessment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Open Access SOP Triage info	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
EM Established Note SOP Outpatient	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
After Visit Summary Printing to Site SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Care Coordination Form Work Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
CCA SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
EM Established Work Instructions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Group Therapy Workflows	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Injection Administration Work Instructions for Providers	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Pharmaceutical Sales Rep SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Writing Non-Billable Progress Note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Internal Referral SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
MCO Enrollment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Collecting Payment	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Relatient Appointment Reminder System	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Schedule Templates SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible OP Role Assignments	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Wait list	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Managing No Shows Procedures	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Microsoft Teams for Outpatient SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Insurance Verification	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Doxy.me	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Depression Clinical Pathway-Outpatient levels of care	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Doxy.me Electronic Signature for Documents	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Approving Services in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Clinic Emergency Procedure	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Letters	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Hospitalization Discharge Tracker	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Creating and Viewing Credible Contact Logs	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Opening or Reactivating a Chart	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Outpatient Service Order and Treatment Plan Signature SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Credible Scheduling Appointments	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Secondary Employee Scheduling - Hosp Discharge	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Individual and Group Therapy Internal Referral	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Monarch Concierge System	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient

Document Name	Folder Path
Real Time Check Out via Doxy.Me SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
SDOH assessment and referral Outpatient Therapy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
SDOH assessment and referral Psychiatric Services	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Slot Scheduler - Alpha MCS System SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Assertive Engagement SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Outpatient Therapy PIE note	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Outpatient Registration SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Accessing Interpreter Services SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Optum Prescription SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Monarch Assessment Portal/Web Assessment	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Nursing Check-In SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Quartet Referral Process SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
New Therapist Productivity Ramp Up Targets	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
Benefit Summary Form SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / Outpatient
SAIOP Standard Operation Policy SOP and work flow	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SAIOP
Guide To Online Authorization Requests	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
SECU Medication Returns SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
Process Flow for Client Auth Alpha System	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
Process Flow for Submitting Documentation for Auth	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
Admissions, FBC, SECU	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
SECU Benefits Verification SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
Hospital Information Form- SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
SECU Shoe Policy SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC RI SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC Refusals SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC Providing OT Services vs Direct Supervision on Milieu SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC Individual Treatment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC Group Treatment SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
COTA FBC Group Screen SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Behavioral Health SOP's / SECU
LTSS Required Assessment by Service Type	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS Residential Vacancy Notification and Intake Timeline SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Outside food at day sites SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
SOP - Workflow Maintenance LTSS	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
SOP-eMAR new hires and terminated staff	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
SOP-Internal Monitoring REC	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
SOP-PRN medication-pain scale	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Adding allergies to Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Adding and signing a service	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Admission in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Attachments to the record	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Bed Board	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Client page overview	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Electronic and handwritten signatures in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Entering Primary Care Physician	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Hospitalization follow-up documentation	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Logging into Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Periodic billing in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Psychiatric Advanced Directives in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS Risk Assessment and Follow-up	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Saving document from Credible to your computer	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Using a form group	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Using a shared plan in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Writing a PIE Note in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Writing a progress Note	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - EVV - Invalid User Credential message	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - EVV - Updating Credible Care App	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - EVV services using desktop	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - EVV services using IPad	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - EVV services using iPhone	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Entering preventive medical care dates in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Fall Prevention and Response	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS Internal Transfers	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's

Document Name	Folder Path
LTSS SOP - Self administration of medications	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - CLFS 5 Residential	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Entering height and weight	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Nutrition and Pain Screening	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - PCP - Revision of a plan	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - PCP - New plan in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Record set up checklist	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Discharge in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - DLA20	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Immunization documentation in Credible	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - PCP service type definitions	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - QP PIE Note	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Investigation Process Incidents (Levels 2 and 3)	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
LTSS SOP - Medical progress note SOP	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Guidelines for Back-up Staffing Reports	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / LTSS SOP's
Child FBC Educational Services	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Day pass policy for FBCs	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Diagnostic Coding and Reporting	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Elopement Precautions Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
FBC Breathalyzer Use and Maintenance	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Levels of Observation	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Medication Assisted Treatment	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
No Show/No Call	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Person Centered Planning	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Post Hospitalization and Incarceration	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Suicidal-Homicidal Risk response-BH	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
TB Screening	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Visitation Procedures- Crisis Residential	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Enhanced Services Crisis Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Assistive Tech Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Behavior Support Plans	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Coordination of Care	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Duty to Warn	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Emergency on call LTSS	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Evidence Based Best Practices	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
First Responder-On call Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
HIV Referrals	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
ICF Active treatment, admission, discharge, individual program plan	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Individual Choice	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Managing those who are intoxicated	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Pregnant Women-IV Drug Users	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Service-Support Animals	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Supervision of People We Support/Alone Time	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Voluntary non compensated work	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Treating Friends and Family Members	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Involuntary Commitment Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Virtual Services Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Communication Policy	Documents / Policies, Forms, and SOP's / Treatment and Habilitation Services / Treatment and Habilitation Services Policies
Waived Testing –SARS-CoV-2	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing Policies
Waived Testing - Glucometer Testing	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing Policies
Waived Testing - Pregnancy Tests	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing Policies
Waived Testing Policy	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing Policies
Waived Testing Urine Drug Screens policy	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing Policies
Accutrend Metabolic Monitoring Point of Care Testing	Documents / Policies, Forms, and SOP's / Waived Testing / Waived Testing SOP's

**MONARCH**  
**FINANCIAL STATEMENTS**  
**AND SUPPLEMENTARY INFORMATION**

**June 30, 2022 and 2021**

*(With Independent Auditors' Reports Thereon)*



# MONARCH

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Independent Auditors' Report on the Financial Statements

The Board of Directors  
Monarch:

**Report on the Audit of the Financial Statements**

***Opinion***

We have audited the accompanying financial statements of Monarch (a nonprofit organization), which comprise the statements of financial position as of June 30, 2022 and 2021, and the related statements of operations and change in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Monarch as of June 30, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

***Basis for Opinion***

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Monarch and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

***Responsibilities of Management for the Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Monarch's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

***Auditor's Responsibilities for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Monarch's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Monarch's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

#### ***Supplementary Information***

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The combining schedule of financial position and combining schedule of operations and change in net assets are presented for purposes of additional analysis and are not a required part of the financial statements. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

#### ***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated October 20, 2022 on our consideration of Monarch's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Monarch's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Monarch's internal control over financial reporting and compliance.

*Davidson, Holland, Whitesell & Co., PLLC*

Hickory, North Carolina  
October 20, 2022

# MONARCH

## Statements of Financial Position

**June 30, 2022 and 2021**

	<u>Assets</u>	
	<u>2022</u>	<u>2021</u>
<b>Current assets:</b>		
Cash and cash equivalents	\$ 16,788,490	19,487,068
Residents' cash	279,986	505,988
Accounts receivable, net of allowance for doubtful accounts of \$2,190,000 in 2022 and \$1,822,000 in 2021	5,687,056	4,522,435
Prepaid expenses	<u>997,777</u>	<u>507,231</u>
 Total current assets	 <u>23,753,309</u>	 <u>25,022,722</u>
 <b>Property and equipment:</b>		
Land and land improvements	580,566	538,906
Buildings and improvements	10,282,522	9,923,404
Equipment	5,183,588	5,164,853
Furniture and fixtures	731,790	731,790
Vehicles	<u>6,174,058</u>	<u>5,287,301</u>
 Less accumulated depreciation	 <u>22,952,524</u>	 <u>21,646,254</u>
Net property and equipment	 <u>14,282,882</u>	 <u>13,439,299</u>
 <b>Other assets:</b>		
Cash value of life insurance	201,404	253,999
Investments	<u>3,462,305</u>	<u>4,052,675</u>
Total other assets	<u>3,663,709</u>	<u>4,306,674</u>
	<u>\$ 36,086,660</u>	<u>37,536,351</u>

*See accompanying notes to financial statements.*

## Liabilities and Net Assets

	<u>2022</u>	<u>2021</u>
<b>Current liabilities:</b>		
Refundable advance	\$ -	10,000,000
Current installments of long-term debt	525,827	718,745
Current installments of capital lease obligations	46,613	90,473
Accounts payable and accrued expenses	7,494,266	6,763,439
Residents' cash liability	279,986	505,988
Deferred revenue	<u>1,119,722</u>	<u>1,359,411</u>
<b>Total current liabilities</b>	<u>9,466,414</u>	<u>19,438,056</u>
<b>Long-term liabilities:</b>		
Long-term debt	2,113,050	2,310,991
Capital lease obligations	<u>1,479</u>	<u>46,315</u>
<b>Total long-term liabilities</b>	<u>2,114,529</u>	<u>2,357,306</u>
<b>Total liabilities</b>	<u>11,580,943</u>	<u>21,795,362</u>
<b>Net assets without donor restrictions</b>	<u>24,505,717</u>	<u>15,740,989</u>
	<u>\$ 36,086,660</u>	<u>37,536,351</u>

**MONARCH**  
**Statement of Operations and Change in Net Assets**  
**Year Ended June 30, 2022**

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenue, gains (losses), and other support:			
Sales - merchandise and service	\$ 18,987	-	18,987
Less: Cost of materials and supplies	6,231	-	6,231
Less: Cost of labor	8,975	-	8,975
Gross profit	3,781	-	3,781
Grants and service contracts	82,379,387	-	82,379,387
Service fees	4,822,310	-	4,822,310
Contributions and local support	640,086	-	640,086
Other revenue	6,257,446	-	6,257,446
Grant - PPP loan	10,000,000	-	10,000,000
Interest and dividends	75,409	-	75,409
Realized and unrealized losses on investments	(707,245)	-	(707,245)
Gain on disposal of property and equipment	192,198	-	192,198
Total revenue, gains, and other support	<u>103,663,372</u>	<u>-</u>	<u>103,663,372</u>
Expenses:			
Program services:			
Residential services	30,011,235	-	30,011,235
Vocational services	7,999,131	-	7,999,131
Outpatient community support	40,727,551	-	40,727,551
Supporting services:			
Administration and general	16,148,101	-	16,148,101
Fundraising	12,626	-	12,626
Total expenses	<u>94,898,644</u>	<u>-</u>	<u>94,898,644</u>
Change in net assets	8,764,728	-	8,764,728
Net assets at beginning of year	<u>15,740,989</u>	<u>-</u>	<u>15,740,989</u>
Net assets at end of year	<u>\$ 24,505,717</u>	<u>-</u>	<u>24,505,717</u>

*See accompanying notes to financial statements.*

**MONARCH**  
**Statement of Operations and Change in Net Assets**  
**Year Ended June 30, 2021**

	<u>Without Donor Restrictions</u>	<u>With Donor Restrictions</u>	<u>Total</u>
Revenue, gains, and other support:			
Sales - merchandise and service	\$ 14,143	-	14,143
Less: Cost of materials and supplies	2,680	-	2,680
Less: Cost of labor	7,005	-	7,005
Gross profit	<u>4,458</u>	<u>-</u>	<u>4,458</u>
Grants and service contracts	81,572,729	-	81,572,729
Service fees	5,140,669	-	5,140,669
Contributions and local support	545,888	-	545,888
Other revenue	4,808,649	-	4,808,649
Interest and dividends	69,965	-	69,965
Realized and unrealized gains on investments	770,718	-	770,718
Gain on disposal of property and equipment	34,437	-	34,437
Total revenue, gains, and other support	<u>92,947,513</u>	<u>-</u>	<u>92,947,513</u>
Expenses:			
Program services:			
Residential services	28,883,040	-	28,883,040
Vocational services	7,863,506	-	7,863,506
Outpatient community support	39,400,349	-	39,400,349
Supporting services:			
Administration and general	13,224,183	-	13,224,183
Fundraising	12,597	-	12,597
Total expenses	<u>89,383,675</u>	<u>-</u>	<u>89,383,675</u>
Change in net assets	3,563,838	-	3,563,838
Net assets at beginning of year	12,177,151	-	12,177,151
Net assets at end of year	<u>\$ 15,740,989</u>	<u>-</u>	<u>15,740,989</u>

*See accompanying notes to financial statements.*

**MONARCH**

**Statement of Functional Expenses**

**Year Ended June 30, 2022**

	Program Services				Supporting Services			<b>Total</b>
	<b>Residential Services</b>	<b>Vocational Services</b>	<b>Outpatient Community Support</b>	<b>Sub-Total Program Services</b>	<b>Administration and General</b>	<b>Fundraising</b>	<b>Sub-Total Supporting Services</b>	
<b>Expenses:</b>								
Personnel costs	\$ 23,981,810	6,192,649	32,426,229	62,600,688	10,504,453	-	10,504,453	73,105,141
Food and provisions	775,031	11,931	263,868	1,050,830	16,889	-	16,889	1,067,719
Supplies	274,622	54,695	386,684	716,001	1,177,510	-	1,177,510	1,893,511
Client recreation	16,409	25	22,443	38,877	-	-	-	38,877
Medical services and supplies	122,775	9,801	85,964	218,540	2,851	-	2,851	221,391
Telephone	276,376	72,855	448,517	797,748	276,595	-	276,595	1,074,343
Office supplies and postage	18,473	6,400	44,455	69,328	73,368	-	73,368	142,696
Contract services	617,530	444,988	2,351,309	3,413,827	1,599,777	-	1,599,777	5,013,604
Miscellaneous expense	79,863	20,013	144,318	244,194	473,802	-	473,802	717,996
Bad debt expense	143,297	62,826	1,376,499	1,582,622	-	-	-	1,582,622
Medicaid assessment	713,807	-	-	713,807	-	-	-	713,807
Tax and license fees	35,574	4,298	50,271	90,143	4,965	-	4,965	95,108
Plant and operation	1,426,234	516,049	810,799	2,753,082	1,462,514	-	1,462,514	4,215,596
Depreciation and amortization	301,310	118,374	369,124	788,808	364,322	-	364,322	1,153,130
Building and equipment rent	1,204,971	476,108	1,892,869	3,573,948	177,801	-	177,801	3,751,749
Interest expense	23,153	8,119	54,202	85,474	13,254	-	13,254	98,728
Fundraising expenses	-	-	-	-	-	12,626	12,626	12,626
<b>Total expenses</b>	<b>\$ 30,011,235</b>	<b>7,999,131</b>	<b>40,727,551</b>	<b>78,737,917</b>	<b>16,148,101</b>	<b>12,626</b>	<b>16,160,727</b>	<b>94,898,644</b>

*See accompanying notes to financial statements.*

**MONARCH**

**Statement of Functional Expenses**

**Year Ended June 30, 2021**

	Program Services				Supporting Services			<b>Total</b>
	<b>Residential Services</b>	<b>Vocational Services</b>	<b>Outpatient Community Support</b>	<b>Sub-Total Program Services</b>	<b>Administration and General</b>	<b>Fundraising</b>	<b>Sub-Total Supporting Services</b>	
<b>Expenses:</b>								
Personnel costs	\$ 23,145,018	6,148,275	31,695,398	60,988,691	8,877,734	-	8,877,734	69,866,425
Food and provisions	708,559	9,280	235,945	953,784	4,225	-	4,225	958,009
Supplies	314,278	54,868	460,309	829,455	668,129	-	668,129	1,497,584
Client recreation	16,819	-	4,496	21,315	-	-	-	21,315
Medical services and supplies	121,181	6,739	95,115	223,035	2,480	-	2,480	225,515
Telephone	291,060	91,336	381,541	763,937	296,547	-	296,547	1,060,484
Office supplies and postage	18,593	5,556	42,921	67,070	64,022	-	64,022	131,092
Contract services	594,876	256,585	2,561,818	3,413,279	963,840	-	963,840	4,377,119
Miscellaneous expense	102,153	16,273	114,498	232,924	302,916	-	302,916	535,840
Bad debt expense	229,784	97,548	1,027,960	1,355,292	-	-	-	1,355,292
Medicaid assessment	651,871	-	-	651,871	-	-	-	651,871
Tax and license fees	35,165	5,761	34,020	74,946	22,987	-	22,987	97,933
Plant and operation	1,117,123	497,447	825,617	2,440,187	1,385,621	-	1,385,621	3,825,808
Depreciation and amortization	293,679	135,381	319,206	748,266	429,854	-	429,854	1,178,120
Building and equipment rent	1,212,280	528,183	1,538,873	3,279,336	179,303	-	179,303	3,458,639
Interest expense	30,601	10,274	62,632	103,507	26,525	-	26,525	130,032
Fundraising expenses	-	-	-	-	-	12,597	12,597	12,597
<b>Total expenses</b>	<b>\$ 28,883,040</b>	<b>7,863,506</b>	<b>39,400,349</b>	<b>76,146,895</b>	<b>13,224,183</b>	<b>12,597</b>	<b>13,236,780</b>	<b>89,383,675</b>

*See accompanying notes to financial statements.*

**MONARCH**

**Statements of Cash Flows**

**Years Ended June 30, 2022 and 2021**

	<u>2022</u>	<u>2021</u>
Cash flows from operating activities:		
Cash received from residents and contributors	\$ 92,727,593	91,414,169
Cash paid to suppliers and employees	(93,643,646)	(87,603,258)
Investment income	75,409	69,965
Interest paid	(98,728)	(130,032)
Net cash provided (used) by operating activities	<u>(939,372)</u>	<u>3,750,844</u>
Cash flows from investing activities:		
Proceeds from sale of investments	1,887,245	2,201,953
Purchase of investments	(2,004,120)	(2,302,434)
Purchase of property and equipment	(1,251,836)	(832,263)
Proceeds from sale of property and equipment	302,032	41,003
Net cash used by investing activities	<u>(1,066,679)</u>	<u>(891,741)</u>
Cash flows from financing activities:		
Proceeds from issuance of long-term debt	-	725,912
Principal payments of long-term debt	(829,833)	(877,615)
Principal payments of capital lease obligations	(88,696)	(154,897)
Net cash used by financing activities	<u>(918,529)</u>	<u>(306,600)</u>
Net increase (decrease) in cash, restricted cash and cash equivalents	<u>(2,924,580)</u>	<u>2,552,503</u>
Cash, restricted cash and cash equivalents at the beginning of the year	\$ 19,993,056	17,440,553
Cash, restricted cash and cash equivalents at the end of the year	<u>\$ 17,068,476</u>	<u>19,993,056</u>

The following table provides a reconciliation of cash, restricted cash and cash equivalents reported with the statements of financial position that sum to the total of the same such amounts shown in the statements of cash flows above:

Cash and cash equivalents	\$ 16,788,490	19,487,068
Residents' cash	279,986	505,988
	<u>\$ 17,068,476</u>	<u>19,993,056</u>

*See accompanying notes to financial statements.*

**MONARCH**

**Statements of Cash Flows, Continued**

	<u>2022</u>	<u>2021</u>
<b><u>Reconciliation of change in net assets to net cash provided (used) by operating activities</u></b>		
Change in net assets	\$ 8,764,728	3,563,838
Adjustments to reconcile change in net assets to net cash provided (used) by operating activities:		
Depreciation and amortization	1,153,130	1,178,149
Net realized and unrealized (gains) losses from investments	707,245	(770,718)
Gain on disposal of property and equipment	(192,198)	(34,466)
Increase in accounts receivable	(1,164,621)	(951,944)
(AIncrease) decrease in prepaid expenses	(525,387)	47,408
(AIncrease) decrease in cash surrender value of life insurance	52,595	(46,577)
Decrease in refundable advance	(10,000,000)	-
Increase in accounts payable and accrued expenses	730,827	1,227,922
Increase (decrease) in residents' cash liability	(226,002)	284,035
Decrease in deferred revenue	(239,689)	(746,803)
Net adjustments	<u>(9,704,100)</u>	<u>187,006</u>
Net cash provided (used) by operating activities	<u>\$ (939,372)</u>	<u>3,750,844</u>

**Supplemental schedule of noncash investing and financing activities**

Acquisition of property and equipment through issuance of long-term debt	\$ 438,974	-
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# **MONARCH**

## **Notes to Financial Statements**

**June 30, 2022 and 2021**

### **(1) Operations and Summary of Significant Accounting Policies**

#### **(a) Operations**

Monarch (“Organization”) is a nonprofit organization supporting people with intellectual and developmental disabilities, mental illness, substance use disorder issues, and traumatic brain injuries throughout North Carolina. The Organization’s administrative offices are in Albemarle, North Carolina.

#### **(b) Basis of Presentation**

The financial statements are presented under accounting principles generally accepted in the United States of America. Under those principles, the Organization is required to report information regarding its financial position and activities according to two classes of net assets: net assets without donor restrictions and net assets with donor restrictions. In addition, the Organization is required to present a statement of cash flows. The Organization uses the accrual method of accounting. Under this basis, revenue is recognized when earned and expenses are recognized when incurred.

#### **(c) Cash, restricted cash and cash equivalents**

For purposes of reporting cash flows, cash, restricted cash and cash equivalents include cash on hand, cash in banks, and highly liquid investments with an original maturity date of three months or less and residents’ cash.

The Organization maintains its cash in bank deposit accounts which, at times, may exceed federally insured limits. The Organization has not experienced any losses in such accounts. The Organization believes it is not exposed to any significant credit risk on cash and cash equivalents.

## MONARCH

### Notes to Financial Statements, Continued

#### **(1) Operations and Summary of Significant Accounting Policies, Continued**

##### **(d) Revenue and Accounts Receivable**

The Organization provides services to individuals under the North Carolina Medicaid Program with funding being passed through Local Management Entities/Managed Care Organizations (“LME/MCOs”) which are agencies of the North Carolina Department of Health and Human Services and Medicaid Prepaid Health Plans (“Standard Plan”) through contract insurance carriers with North Carolina. LME/MCOs were created by legislation in 2011 to serve Medicaid, uninsured, and underinsured individuals with mental illness, intellectual and developmental disabilities, and substance use disorders. Currently, there are six LME/MCOs operating under the North Carolina 1915(b)(c) Medicaid waiver. The Organization receives a significant amount of revenue under contractual arrangements with LME/MCOs. Revenue is recognized for individuals authorized by the LME/MCOs as fee for service revenue as services are performed and room and board is provided.

Revenue received from Managed Care Organizations and the State of North Carolina may be subject to post-payment review and retroactive adjustment by the payers. The Organization provides estimates for potential adjustments when it is likely that an assessment based on such adjustments will be made against the Organization. Adjustments that are significantly different from the applicable estimates are reflected as an increase or decrease in revenues in the year the adjustments are finalized. Management does not believe that it is likely that adjustments will be made to revenue received during the years ended June 30, 2022 and 2021, and therefore no estimate for potential adjustments or assessments is necessary as of June 30, 2022 and 2021.

Revenues are recognized as services are provided to consumers in an amount that reflects the consideration the Organization expects to be entitled to in exchange for those services and a related receivable is recorded. Management evaluates receivable balances periodically. Based upon these reviews, management will establish an allowance for uncollectible accounts or will write-off specific amounts if deemed uncollectible. In this review, management considers historical losses, results of any ongoing collection efforts, and any other relevant information available. Substantially all of the Organization’s revenue was derived from performance obligations satisfied at a point in time for 2022 and 2021.

Credit risk for accounts receivable are concentrated because substantially all of the balances are receivable from the North Carolina Medicaid Program and agencies of the North Carolina Department of Health and Human Services.

## MONARCH

### Notes to Financial Statements, Continued

#### **(1) Operations and Summary of Significant Accounting Policies, Continued**

##### **(e) Investments**

The Organization records its investments under the provisions of accounting principles generally accepted in the United States of America. In accordance with those standards, the Organization has characterized its investments in securities, based on the priority of the inputs used to value the investments, into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1), and the lowest priority to unobservable inputs (Level 3). If the inputs used to measure the investments fall within different levels of the hierarchy, the categorization is based on the lowest level input that is significant to the fair value measurement of the investment.

Investments recorded in the statement of financial position are categorized based on the inputs to valuation techniques as follows:

*Level 1* - These are investments where values are based on unadjusted quoted prices for identical assets in an active market the Organization has the ability to access.

*Level 2* - These are investments where values are based on quoted prices in markets that are not active or model inputs that are observable either directly or indirectly for substantially the full term of the investments.

*Level 3* - These are investments where values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. These inputs reflect assumptions of management about assumptions market participants would use in pricing the investments.

##### **(f) Property and Equipment**

Property and equipment is recorded at cost if purchased. Donated property and equipment is recorded at estimated market value, if determinable, as of the date received. Depreciation of property and equipment is computed by the straight-line method over the estimated useful lives of the respective assets. The Organization capitalizes property and equipment if its value is greater than \$5,000 and its useful life is more than one year. Estimated useful lives range from 15 years on land improvements, 5 to 40 years on buildings and improvements, 3 to 20 years on equipment, 7 to 20 years on furniture and fixtures, and 4 to 5 years on vehicles.

## **MONARCH**

### **Notes to Financial Statements, Continued**

#### **(1) Operations and Summary of Significant Accounting Policies, Continued**

##### **(g) Contributions**

In accordance with accounting principles generally accepted in the United States of America, contributions received are recorded as support without donor restrictions or support with donor restrictions, depending on the existence and nature of any donor restrictions.

Grants and other contributions of cash and other assets are reported as support with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of operations and change in net assets as net assets released from restrictions. Contributions that are restricted by the donor and whose restrictions expire in the fiscal year in which the contributions are recognized are reported as net assets without donor restrictions.

Contributions of donated non-cash assets are recorded at their fair values in the period received. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received.

##### **(h) Accounting Estimates**

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent liabilities at the date of the financial statements and revenue and expenses during the periods reported. Estimates are used when accounting for allowance for doubtful accounts receivable, depreciation, and contingencies, among others. Actual results could differ from these estimates.

##### **(i) Advertising**

Advertising costs are charged to operations when incurred. Advertising expense was \$189,489 and \$82,226 for the years ended June 30, 2022 and 2021, respectively.

## MONARCH

### Notes to Financial Statements, Continued

#### **(1) Operations and Summary of Significant Accounting Policies, Continued**

##### **(j) Tax-exempt Status**

The Organization is exempt from income taxes under Section 501 of the Internal Revenue Code as an organization described in Section 501(c)(3). Accordingly, no provision for Federal or state income taxes has been made in the accompanying financial statements. The Organization is not classified as a private foundation.

The Organization has implemented the accounting requirements associated with uncertainty in income taxes using the provisions of Financial Accounting Standards Board ("FASB") ASC 740, *Income Taxes*. Using that guidance, tax positions initially need to be recognized in the financial statements when it is more-likely-than-not the positions will be sustained upon examination by the tax authorities. It also provides guidance for derecognition, classification, interest and penalties, accounting in interim periods, disclosure and transition. As of June 30, 2022 and 2021, the Organization had no uncertain tax positions that qualify for either recognition or disclosure in the financial statements and recognized no such interest or penalties during the years ended June 30, 2022 and 2021.

#### **(2) Government Grants**

The Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") and the American Rescue Plan Act ("ARP Act") established the Provider Relief Fund and American Rescue Plan Rural Distribution program ("PRF"). PRF payments must be used for necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19) between January 1, 2020 and December 31, 2022. Payments passed-through the Department of Health and Human Services and Department of Treasury for distribution in response to the public health emergency onset through the Coronavirus Pandemic. Amounts received from the PRF are recognized as revenue when expenditures have been incurred in compliance with specific terms and conditions of the grant. Of those funds distributed, Monarch expended \$818,228 and \$2,093,768 during the years ended June 30, 2022 and 2021, respectively.

In addition to PRF, Monarch received and expended \$1,768,530 and \$1,738,170 in federal and state grants for operational purposes in behavioral health, transportation, food, and disaster relief, during the years ended June 30, 2022 and 2021, respectively.

## MONARCH

### Notes to Financial Statements, Continued

#### (3) Investments

In accordance with accounting principles generally accepted in the United States of America, the Organization's investments are shown at aggregate fair value based on quoted prices in active markets. Realized and unrealized gains and losses are reflected in the statements of operations and change in net assets. Investments consisting of mutual funds categorized as Level 1 are \$3,462,305 and \$4,052,675 at June 30, 2022 and 2021, respectively.

Investment activity for the years ended June 30, 2022 and 2021, is summarized below:

	<u>2022</u>	<u>2021</u>
Investments at beginning of year	\$ 4,052,675	3,181,476
Investments purchased	2,004,120	2,302,434
Investments sold/redeemed	(1,887,245)	(2,201,953)
Investment fees	(21,556)	(19,678)
Investment returns:		
Interest and dividend income	71,516	59,085
Realized gains	277,008	223,507
Unrealized gains (losses)	(984,253)	547,211
Amounts appropriated for current operations	(49,960)	(39,407)
Investments at end of year	<u>\$ 3,462,305</u>	<u>4,052,675</u>

Investment fees of \$21,556 and \$19,678 for the years ended June 30, 2022 and 2021, respectively are included in supporting services expenses in the statements of operations and change in net assets.

#### (4) Property and Equipment

Property and equipment purchased with state funds is to be used only for the purpose of the program granting the funds. Proceeds from the sale of these assets may be required to be returned to the funding agency.

## MONARCH

### Notes to Financial Statements, Continued

#### (5) Refundable Advance

On May 7, 2020, the Organization entered into a federally guaranteed loan agreement (“PPP loan”) for \$10,000,000 with a lender pursuant to a new loan program through the U.S. Small Business Administration (“SBA”) as the result of the Paycheck Protection Program (“PPP”) established by the CARES Act and amended by the Paycheck Protection Program Flexibility Act of 2020. Under the terms of the PPP loan, the principal may be forgiven if the loan proceeds are used for qualifying expenses as described in the CARES Act, such as payroll costs, benefits, mortgage interest, rent and utilities.

The Organization has accounted for the PPP proceeds under *ASC 958-605 Not-for-Profit Entities: Revenue Recognition*. Under *ASC 958-605*, the proceeds are recorded as conditional and not recognized as revenue until the conditions are substantially met or explicitly waived. On January 12, 2022, the Organization obtained forgiveness of the PPP loan from the SBA and First Citizens Bank and has therefore recognized \$10,000,000 of grant revenue in the statement of operations and change in net assets for the year ended June 30, 2022.

#### (6) Note Payable, Bank

The Organization has available a \$2,000,000 line of credit with interest payable monthly at prime (4.75% and 3.25% at June 30, 2022 and 2021, respectively) plus 0.5%. There were no borrowings against the line of credit at June 30, 2022 and 2021. The line of credit matures May 2023 and is collateralized by real estate.

# MONARCH

## Notes to Financial Statements, Continued

### (7) Long-term Debt

Long-term debt as of June 30, 2022 and 2021, is summarized as follows:

	<u>2022</u>	<u>2021</u>
3.8% note, payable in monthly installments of \$11,015, including interest, with a final payment due March 2024; collateralized by real property	\$ 1,072,815	1,161,793
3.29% to 5.15% notes, payable in aggregate monthly installments of \$32,900 including interest, with final payments due March 2023 through June 2027 collateralized by vehicles	970,058	824,531
6.75% note, payable in monthly installments of \$2,236, including interest, with a final payment due April 2046; collateralized by real property	317,893	323,097
2.75% EIDL note, payable in monthly installments of \$641, including interest, with a final payment due June 2050; collateralized by substantially all assets	138,000	150,000
Non interest bearing note payable in monthly installments of \$1,667 with final payment due December 2024; collateralized by software	49,750	70,000
Non interest bearing note payable in monthly installments of \$3,485 with final payment due August 2023; collateralized by software	48,790	90,609
5.29% unsecured note, payable in monthly installments of \$10,213, including interest, with a final payment due February 2023	41,571	159,482
5.25% unsecured note, payable in monthly installments of \$11,589, including interest, with a final payment due June 2024	-	85,305

# MONARCH

## Notes to Financial Statements, Continued

### (7) Long-term Debt, Continued

	<u>2022</u>	<u>2021</u>
3.49% note, payable in monthly installments of \$1,702, including interest, with a final payment due September 2021; collateralized by real property	\$ -	76,109
5.25% unsecured note, payable in monthly installments of \$7,831, including interest, with a final payment due April 2022	-	63,135
4.16% unsecured note, payable in monthly installments of \$5,514, including interest, with a final payment due October 2021	-	25,675
Less current installments	<u>2,638,877</u>	<u>3,029,736</u>
	<u>525,827</u>	<u>718,745</u>
	<u><u>\$ 2,113,050</u></u>	<u><u>2,310,991</u></u>

Principal maturities for years subsequent to June 30, 2022, are summarized as follows:

<u>Years Ending June 30,</u>	<u>Amount</u>
2023	\$ 525,827
2024	1,308,378
2025	218,478
2026	121,414
2027	59,780
Thereafter	<u>405,000</u>
	<u><u>\$ 2,638,877</u></u>

Certain of the notes contain various restrictive covenants including provisions related to tangible net worth and submission of financial statements. At June 30, 2022, the Organization was in compliance with all of the covenants.

# MONARCH

## Notes to Financial Statements, Continued

### (8) Capital Leases

The Organization leases certain vehicles under the terms of capital lease agreements, which expire through September 2024. The assets and liabilities under the capital leases are recorded at the lower of the present value of the minimum lease payments or the fair value of the assets. The assets are amortized over the estimated useful life of the assets using the straight-line method. Amortization expense related to the leases amounted to \$62,354 and \$114,566 for 2022 and 2021, respectively. Property and equipment includes \$355,899 and \$544,889 of assets under capital leases at June 30, 2022 and 2021, respectively. Accumulated amortization was \$350,956 and \$471,055 at June 30, 2022 and 2021, respectively.

Future minimum lease payments of capital leases for years subsequent to June 30, 2022, are as follows:

<u>Years Ending June 30,</u>	<u>Amount</u>
2023	\$ 48,161
2024	1,479
	49,640
Amount representing interest	1,548
	<u>48,092</u>

### (9) Operating Leases

Monthly rents for certain IDD homes are based on the residents' social security benefits. The terms of the leases are one year. The homes are owned by the U.S. Department of Housing and Urban Development (HUD). Rent expense was approximately \$897,700 and \$884,600 for the years ended June 30, 2022 and 2021, respectively.

The Organization also leases certain office facilities and equipment, vehicles, ICF homes, IDD homes and mental health homes under the terms of operating lease agreements, some of which are month-to-month and others that expire through July 2036.

## MONARCH

### Notes to Financial Statements, Continued

#### (9) Operating Leases, Continued

Future minimum rentals for five years subsequent to June 30, 2022, and in the aggregate are as follows:

<u>Years Ending June 30,</u>	<u>Amount</u>
2023	\$ 1,940,496
2024	1,421,411
2025	1,109,676
2026	820,583
2027	360,012
	\$ <u>5,652,178</u>

Rent expense for the years ended June 30, 2022 and 2021, was approximately \$2,576,000 and \$2,275,600, respectively.

#### (10) Employee Benefit Plans

##### (a) 403(b) Plan

The Organization has a 403(b) plan which covers substantially all employees who meet eligibility requirements. Contributions are made at the discretion of management. During the years ended June 30, 2022 and 2021, the Organization did not make any retirement contributions.

##### (b) Employees' Basic Group Health Plan

The Organization provides certain medical benefits to eligible employees and covered dependents through an employee welfare benefit plan. Contributions to the Plan are made by Plan participants and the Organization. The Plan is responsible for all eligible claims up to a maximum of \$200,000 per individual and an aggregating specific of \$155,000 (individual or combined individuals) up to the group aggregate established by expected claims and reinsurance. The group aggregate for the fiscal years ended June 30, 2022 and 2021, was \$9,991,882 and \$9,922,351, respectively. Claims in excess of this amount are covered by contracts with an insurance company.

## MONARCH

### Notes to Financial Statements, Continued

#### (11) Economic Dependence

A substantial portion of the Organization's revenue is derived through programs funded by the State of North Carolina Department of Health and Human Services through the following agencies:

	<u>2022</u>	<u>2021</u>
Division of Health Benefits (Medicaid)	50 %	51
Division of Mental Health, Developmental Disabilities and Substance Abuse Services	<u>25</u> %	<u>33</u>
Total	<u><u>75</u></u> %	<u><u>84</u></u>

#### (12) Liquidity

The Organization's financial assets available within one year of the balance sheet date for general expenditure are as follows:

Cash and cash equivalents	\$ 16,788,490
Accounts receivable, net of allowance for doubtful accounts	5,687,056
	<u><u>\$ 22,475,546</u></u>

As part of the Organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations are due. In addition, the Organization has investments that may be appropriated for expenditure by management.

#### (13) Contingencies

At June 30, 2022, the Organization had certain claims and litigation pending, all of which were in the ordinary course of business. In the opinion of management, settlement of these claims and litigation pending against the Organization will not have a material adverse effect on the Organization's financial condition.

## **MONARCH**

### **Notes to Financial Statements, Continued**

#### **(14) Accounting Impact of COVID-19**

On January 30, 2020, the World Health Organization (“WHO”) announced a global health emergency because of a new strain of coronavirus originating in Wuhan, China (the “COVID-19 outbreak”) and the risks to the international community as the virus spreads globally beyond its point of origin. In March 2020, the WHO classified the COVID-19 outbreak as a pandemic, based on the rapid increase in exposure globally.

The full impact of the COVID-19 outbreak continues to evolve as of the date of this report. As such, it is uncertain as to the full magnitude that the pandemic will have on the Organization’s financial condition, liquidity, and future results of operations. Management is actively monitoring the global situation on its financial condition, liquidity, operations, suppliers, industry, and workforce. Given the daily evolution of the COVID-19 outbreak and the global responses to curb its spread, the Organization is not able to estimate the effects of the COVID-19 outbreak on its results of operations, financial condition, or liquidity for the year ending June 30, 2023.

Although the Organization cannot estimate the length or gravity of the impact of the COVID-19 outbreak at this time, if the pandemic continues, it may have an adverse effect on the Organization’s results of future operations, financial position, and liquidity in the year ending June 30, 2023.

#### **(15) Subsequent Events**

The Organization has evaluated subsequent events through October 20, 2022, the date which the financial statements were available to be issued. There were no significant subsequent events identified which require disclosure in the financial statements or footnotes.

***SUPPLEMENTARY INFORMATION***

**MONARCH**

**Schedule 1 - Combining Schedule of Financial Position**

**June 30, 2022**

	<b>Assets</b>									
	<b>The Arc of Stanly County</b>	<b>Investment Fund</b>	<b>Supports and Public Relations</b>	<b>Residential Services</b>	<b>Day and Employment Services</b>	<b>Behavioral Health</b>	<b>Health Insurance Fund</b>	<b>Subtotal</b>	<b>Eliminations</b>	<b>Total</b>
<b>Current assets:</b>										
Cash and cash equivalents	\$ (115,321)	161,577	9,761,495	13,106,682	1,899,535	(13,056,734)	5,031,256	16,788,490	-	16,788,490
Residents' cash	-	-	-	279,986	-	-	-	279,986	-	279,986
Accounts receivable	852	-	589,492	1,735,886	402,206	2,532,880	425,740	5,687,056	-	5,687,056
Prepaid expenses	165	-	934,405	-	24,562	38,645	-	997,777	-	997,777
<b>Total current assets</b>	<b>(114,304)</b>	<b>161,577</b>	<b>11,285,392</b>	<b>15,122,554</b>	<b>2,326,303</b>	<b>(10,485,209)</b>	<b>5,456,996</b>	<b>23,753,309</b>	<b>-</b>	<b>23,753,309</b>
<b>Property and equipment:</b>										
Land and land improvements	74,825	35,614	14,508	172,673	43,188	239,758	-	580,566	-	580,566
Buildings and improvements	553,857	409,597	1,051,679	1,670,190	745,309	5,851,890	-	10,282,522	-	10,282,522
Equipment	27,749	13,267	3,782,513	368,632	415,769	575,658	-	5,183,588	-	5,183,588
Furniture and fixtures	-	-	198,650	104,218	30,603	398,319	-	731,790	-	731,790
Vehicles	-	-	832,758	2,532,245	1,280,234	1,528,821	-	6,174,058	-	6,174,058
	656,431	458,478	5,880,108	4,847,958	2,515,103	8,594,446	-	22,952,524	-	22,952,524
Less accumulated depreciation	479,397	417,157	4,753,777	4,154,876	2,110,834	2,366,841	-	14,282,882	-	14,282,882
<b>Net property and equipment</b>	<b>177,034</b>	<b>41,321</b>	<b>1,126,331</b>	<b>693,082</b>	<b>404,269</b>	<b>6,227,605</b>	<b>-</b>	<b>8,669,642</b>	<b>-</b>	<b>8,669,642</b>
<b>Other assets:</b>										
Cash value of life insurance	-	-	201,404	-	-	-	-	201,404	-	201,404
Investments	-	3,462,305	-	-	-	-	-	3,462,305	-	3,462,305
<b>Total other assets</b>	<b>-</b>	<b>3,462,305</b>	<b>201,404</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>3,663,709</b>	<b>-</b>	<b>3,663,709</b>
<b>Total assets</b>	<b>\$ 62,730</b>	<b>3,665,203</b>	<b>12,613,127</b>	<b>15,815,636</b>	<b>2,730,572</b>	<b>(4,257,604)</b>	<b>5,456,996</b>	<b>36,086,660</b>	<b>-</b>	<b>36,086,660</b>

**MONARCH**

**Schedule 1 - Combining Schedule of Financial Position, Continued**

<b><u>Liabilities and Net Assets</u></b>										
	<u>The Arc of Stanly County</u>	<u>Investment Fund</u>	<u>Supports and Public Relations</u>	<u>Residential Services</u>	<u>Day and Employment Services</u>	<u>Behavioral Health</u>	<u>Health Insurance Fund</u>	<u>Subtotal</u>	<u>Eliminations</u>	<u>Total</u>
<b>Current liabilities:</b>										
Current installments of long-term debt	\$ 5,539	-	160,355	160,072	55,068	144,793	-	525,827	-	525,827
Current installments of capital lease obligations	-	-	5,780	30,240	10,593	-	-	46,613	-	46,613
Accounts payable and accrued expenses	2,631	-	2,958,116	1,068,270	269,402	1,752,863	1,442,984	7,494,266	-	7,494,266
Residents' cash liability	-	-	-	279,986	-	-	-	279,986	-	279,986
Deferred revenue	-	-	640,267	-	-	479,455	-	1,119,722	-	1,119,722
<b>Total current liabilities</b>	<b>8,170</b>	<b>-</b>	<b>3,764,518</b>	<b>1,538,568</b>	<b>335,063</b>	<b>2,377,111</b>	<b>1,442,984</b>	<b>9,466,414</b>	<b>-</b>	<b>9,466,414</b>
<b>Long-term liabilities:</b>										
Long-term debt	312,354	-	323,668	284,070	76,302	1,116,656	-	2,113,050	-	2,113,050
Capital lease obligations	-	-	-	1,479	-	-	-	1,479	-	1,479
<b>Total long-term liabilities</b>	<b>312,354</b>	<b>-</b>	<b>323,668</b>	<b>285,549</b>	<b>76,302</b>	<b>1,116,656</b>	<b>-</b>	<b>2,114,529</b>	<b>-</b>	<b>2,114,529</b>
<b>Total liabilities</b>	<b>320,524</b>	<b>-</b>	<b>4,088,186</b>	<b>1,824,117</b>	<b>411,365</b>	<b>3,493,767</b>	<b>1,442,984</b>	<b>11,580,943</b>	<b>-</b>	<b>11,580,943</b>
Net assets without donor restrictions	<u>(257,794)</u>	<u>3,665,203</u>	<u>8,524,941</u>	<u>13,991,519</u>	<u>2,319,207</u>	<u>(7,751,371)</u>	<u>4,014,012</u>	<u>24,505,717</u>	<u>-</u>	<u>24,505,717</u>
<b>Total liabilities and net assets</b>	<b>\$ 62,730</b>	<b><u>3,665,203</u></b>	<b><u>12,613,127</u></b>	<b><u>15,815,636</u></b>	<b><u>2,730,572</u></b>	<b><u>(4,257,604)</u></b>	<b><u>5,456,996</u></b>	<b><u>36,086,660</u></b>	<b><u>-</u></b>	<b><u>36,086,660</u></b>

**MONARCH**

**Schedule 2 - Combining Schedule of Operations and  
Change in Net Assets**

**Year Ended June 30, 2022**

	<b>The Arc of Stanly County</b>	<b>Investment Fund</b>	<b>Supports and Public Relations</b>	<b>Residential Services</b>	<b>Day and Employment Services</b>	<b>Behavioral Health</b>	<b>Health Insurance Fund</b>	<b>Subtotal</b>	<b>Eliminations</b>	<b>Total</b>
Revenue, gains, and other support:										
Sales - merchandise and service	\$ -	-	-	-	18,987	-	-	18,987	-	18,987
Less: Cost of materials and supplies	-	-	-	-	6,231	-	-	6,231	-	6,231
Less: Cost of labor	-	-	-	-	8,975	-	-	8,975	-	8,975
Gross profit	-	-	-	-	3,781	-	-	3,781	-	3,781
Medicaid	-	-	-	25,621,894	6,577,339	20,149,289	-	52,348,522	-	52,348,522
Mental health	-	-	-	7,696,360	2,104,830	15,601,951	-	25,403,141	-	25,403,141
Resident rent	-	-	-	4,787,416	-	-	-	4,787,416	-	4,787,416
Medicare	-	-	-	-	-	1,541,027	-	1,541,027	-	1,541,027
Vocational rehabilitation	-	-	-	-	-	336,947	-	336,947	-	336,947
Rent	33,738	63,396	-	-	1,156	-	-	98,290	(63,396)	34,894
Insurance	-	-	-	-	-	1,645,005	-	1,645,005	-	1,645,005
Private pay	-	-	-	-	-	824,553	-	824,553	-	824,553
Other revenue	1,293	2,092	620,077	1,053,846	490,220	1,339,585	-	3,507,113	-	3,507,113
County funds	-	-	-	30,000	350,828	56,738	-	437,566	-	437,566
Interest and dividends	9	71,516	3,884	-	-	-	-	75,409	-	75,409
Contributions	-	-	64,779	72,700	20,010	45,031	-	202,520	-	202,520
Interest subsidy	30,045	-	-	-	-	-	-	30,045	-	30,045
Special events and projects	-	-	52,289	-	-	-	-	52,289	-	52,289
Transportation fees	-	-	-	-	4,738	-	-	4,738	-	4,738
Refunds and reimbursements	-	-	161,634	66,852	-	-	-	228,486	-	228,486
Gain on disposal of property and equipment	-	-	9,000	176,423	6,775	-	-	192,198	-	192,198
Realized and unrealized losses on investments	-	(707,245)	-	-	-	-	-	(707,245)	-	(707,245)
Grant - PPP loan	-	-	10,000,000	-	-	-	-	10,000,000	-	10,000,000
Grants	-	-	1,086,830	-	268,112	1,360,025	-	2,714,967	-	2,714,967
Total revenue, gains, and other support	65,085	(570,241)	11,998,493	39,505,491	9,827,789	42,900,151	-	103,726,768	(63,396)	103,663,372

**MONARCH**

**Schedule 2 - Combining Schedule of Operations and  
Change in Net Assets, Continued**

	<b>The Arc of Stanly County</b>	<b>Investment Fund</b>	<b>Supports and Public Relations</b>	<b>Residential Services</b>	<b>Day and Employment Services</b>	<b>Behavioral Health</b>	<b>Health Insurance Fund</b>	<b>Subtotal</b>	<b>Eliminations</b>	<b>Total</b>
<b>Expenses:</b>										
Salaries and wages	\$ -	-	8,796,727	19,154,686	4,794,040	26,669,360	-	59,414,813	-	59,414,813
Employee benefits	-	-	1,559,759	4,497,194	1,237,945	5,297,899	-	12,592,797	-	12,592,797
Staff travel and training	70	-	147,897	329,930	160,664	458,970	-	1,097,531	-	1,097,531
Food and provisions	-	-	16,889	775,031	11,931	263,868	-	1,067,719	-	1,067,719
Supplies	428	-	1,177,082	274,622	54,695	386,684	-	1,893,511	-	1,893,511
Client recreation	-	-	-	16,409	25	22,443	-	38,877	-	38,877
Medical services and supplies	-	-	2,851	122,775	9,801	85,964	-	221,391	-	221,391
Telephone	465	-	276,130	276,376	72,855	448,517	-	1,074,343	-	1,074,343
Office supplies and postage	-	-	73,368	18,473	6,400	44,455	-	142,696	-	142,696
Contract services	7,059	-	1,592,718	617,530	444,988	2,351,309	-	5,013,604	-	5,013,604
Gas and oil	-	-	46,600	250,871	72,848	48,986	-	419,305	-	419,305
Miscellaneous	6,938	21,556	209,654	59,782	18,457	64,439	-	380,826	-	380,826
Medicaid assessment	-	-	-	713,807	-	-	-	713,807	-	713,807
Tax and license fees	-	-	4,965	35,574	4,298	50,271	-	95,108	-	95,108
Advertising and printing	-	-	235,654	10,181	1,556	79,879	-	327,270	-	327,270
Bad debt expense	-	-	-	143,297	62,826	1,376,499	-	1,582,622	-	1,582,622
Building and equipment rent	-	-	177,801	1,268,367	476,108	1,892,869	-	3,815,145	(63,396)	3,751,749
Utilities	16,052	-	15,445	283,073	123,674	150,133	-	588,377	-	588,377
Insurance - general	2,378	-	104,340	282,990	153,345	188,469	-	731,522	-	731,522
Repairs and maintenance	21,114	-	1,256,585	609,300	166,182	423,211	-	2,476,392	-	2,476,392
Depreciation	13,600	2,449	348,273	287,722	114,890	351,355	-	1,118,289	-	1,118,289
Amortization	-	-	-	13,588	3,484	17,769	-	34,841	-	34,841
Interest expense	4,174	-	9,080	23,153	8,119	54,202	-	98,728	-	98,728
Administrative overhead	-	-	(13,424,650)	4,594,467	1,223,132	7,607,051	-	-	-	-
Allocations	9,745	-	(1,093,619)	865,216	230,594	(11,936)	-	-	-	-
Living subsidies	-	-	-	9,900	-	-	-	9,900	-	9,900
Fundraising expenses	-	-	12,626	-	-	-	-	12,626	-	12,626
Total expenses	82,023	24,005	1,546,175	35,534,314	9,452,857	48,322,666	-	94,962,040	(63,396)	94,898,644
Changes in net assets	(16,938)	(594,246)	10,452,318	3,971,177	374,932	(5,422,515)	-	8,764,728	-	8,764,728
Net assets at beginning of year	(240,856)	4,259,449	(1,927,377)	10,020,342	1,944,275	(2,328,856)	4,014,012	15,740,989	-	15,740,989
Net assets at end of year	\$ (257,794)	3,665,203	8,524,941	13,991,519	2,319,207	(7,751,371)	4,014,012	24,505,717	-	24,505,717

Independent Auditors' Report on Internal Control over Financial Reporting and on Compliance  
and Other Matters Based on an Audit of Financial Statements Performed in Accordance With  
Government Auditing Standards

The Board of Directors  
Monarch:

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Monarch (a nonprofit organization), which comprise the statement of financial position as of June 30, 2022, and the related statements of operations and change in net assets, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated October 20, 2022.

**Report on Internal Control over Financial Reporting**

In planning and performing our audit of the financial statements, we considered Monarch's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Monarch's internal control. Accordingly, we do not express an opinion on the effectiveness of Monarch's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## **Report on Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Monarch's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

### **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

*Davidson, Holland, Whitesell & Co., PLLC*

Hickory, North Carolina  
October 20, 2022

Independent Auditors' Report on Compliance for Each Major Program and on Internal Control  
Over Compliance Required by the Uniform Guidance

The Board of Directors  
Monarch:

**Report on Compliance for Each Major Federal Program**

***Opinion on Each Major Federal Program***

We have audited Monarch's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Monarch's major federal programs for the year ended June 30, 2022. Monarch's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, Monarch complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2022.

***Basis for Opinion on Each Major Federal Program***

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of Monarch and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Monarch's compliance with the compliance requirements referred to above.

***Responsibilities of Management for Compliance***

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Monarch's federal programs.

### ***Auditors' Responsibilities for the Audit of Compliance***

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on Monarch's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about Monarch's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding Monarch's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of Monarch's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of Monarch's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

## ***Other Matters***

### **Report on Internal Control over Compliance**

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Davidson, Holland, Whitesell & Co., PLLC*

Hickory, North Carolina  
October 20, 2022

**MONARCH**  
**Schedule of Findings and Questioned Costs**  
**Year Ended June 30, 2022**

**Summary of Independent Auditors' Results**

**Financial Statements**

Type of report the auditor issued on whether the financial statements audited were prepared in accordance to GAAP: Unmodified

Internal control over financial reporting:

- Material weakness(es) identified?  yes  no
- Significant Deficiency(s)  yes  none reported

Noncompliance material to financial statements noted?  yes  no

**Federal Awards**

Internal control over major federal programs:

- Material weakness(es) identified?  yes  no
- Significant Deficiency(s) identified  yes  none reported

Type of auditor's report issued on compliance for major federal programs: Unmodified.

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?  yes  no

Identification of major federal programs:

Assistance Listing No(s).	Names of Federal Program or Cluster
93.829	Certified Community Behavior Health Clinic Demonstration

Dollar threshold used to distinguish between Type A and Type B Programs \$750,000

Auditee qualified as low-risk auditee?  yes  no

**MONARCH**

**Schedule of Findings and Questioned Costs, Continued**

**Findings – Financial Statement Audit**

None reported.

**Findings and Questioned Costs – Major Federal Award Programs Audit**

None reported.

**MONARCH**

**Schedule of Expenditures of Federal Awards**

**Year Ended June 30, 2022**

<b>Federal Grantor/Pass-through Grantor/Program Title</b>	<b>Federal CFDA Number</b>	<b>Pass-through Entity Identifying Number</b>	<b>Federal Expenditures</b>
U.S. Department of Health and Human Services			
Substance Abuse and Mental Health Administration			
Certified Community Behavior Health Clinic Demonstration	93.829	H79SM083115	\$ 1,388,366
Substance Abuse and Mental Health Administration			
Pass-through: North Carolina Department of Health and Human Services, DMH/DD/SAS			
Projects for Assistance in Transition of Homelessness (PATH)	93.150	X06SM085835	141,006
Total U.S. Department of Health and Human Services			<u>1,529,372</u>
U.S. Department of Transportation			
Pass-through: North Carolina Department of Transportation			
Enhanced Mobility of Seniors & Individuals with Disabilities	20.513	22-ED-913	239,158
Total U.S. Department of Transportation			<u>239,158</u>
Total expenditures of Federal awards			<u>\$ 1,768,530</u>

**Notes to the Schedule of Expenditures of Federal Awards**

**1 Basis of Presentation**

The accompanying schedule of expenditures of federal awards (SEFA) includes the federal grant activity of Monarch under the programs of the federal government for the year ended June 30, 2022. The information in the SEFA is presented in accordance with the requirements of *Title 2 US Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the SEFA presents only a selected portion of the operations of Monarch, it is not intended to and does not present the financial position, statement of operations and change in net assets, functional expenses, or cash flows of Monarch.

**2 Summary of Significant Accounting Policies**

Expenditures reported in the SEFA are reported on the accrual basis of accounting. Such expenditures are recognized following the cost principles contained in Uniform Guidance, wherein certain types of expenditures are not allowed or are limited as to reimbursement.

**3 Indirect Cost Rate**

Monarch has elected to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

Budget		Annual
<b>Cabazon County RFP - Consolidated Services</b>		
432100 Medicare	\$ 4,814,399	
432110 Health Services-Tailored Plan	\$ 7,221,598	
43380 State IPRS Funds	\$ 5 -	
43385 Mental Health (Expense Based)	\$ 5 -	
43394 Grant Revenue	\$ 5 -	
43395 Other Revenues	\$ 5 -	
48890 Other Revenue	\$ 5 -	
48891 Private Pay	\$ 5 -	
48895 Allowance for Doubtful Accounts	\$ (30,900)	
48896 Unreserved Allowance	\$ 5 -	
<b>REV40000 Total Revenue</b>	<b">\$ 11,735,097</b">	
51120 Salaries-Indirect	\$ 639,642	
51125 Temporary Service Agency (Nursing)	\$ 202,493	
51126 Salaries-Parttime	\$ 6,709,549	
51128 Temp/Subs	\$ 5 -	
51129 Overtime	\$ 134,191	
51130 Payroll Contribution	\$ 1,063,313	
51183 Health Insurance Benefit	\$ 672,570	
51185 Unemployment Insurance	\$ 5 -	
51186 Workers Comp. Expense	\$ 161,682	
51187 Life Insurance	\$ 5,400	
51188 Staff Ascertainment	\$ 5 -	
51190 Criminal Verifications	\$ 3,900	
<b>EXP40 Total Personal Expenses</b>	<b">\$ 9,091,637</b">	
52220 Food & Beverage/Drinking Supplies	\$ 333,360	
52220 Linen & Bedding	\$ 226,800	
52230 Program & Operating Supplies	\$ 78,480	
52237 Legend Drugs	\$ 37,440	
52238 Non-Legend Drugs	\$ 62,640	
52239 Non-Legend Drugs	\$ 5 -	
53395 Staff Training	\$ 7,200	
54493 Dues & Subscriptions	\$ 18,000	
55510 Furniture & Fixtures	\$ 6,000	
55511 Equipment	\$ 10,200	
57714 Contract Psych Services	\$ 5 -	
53318 Recreation	\$ 57,600	
<b>EXP40 Accountable Expense Line Items</b>	<b">\$ 936,510</b">	
53330 Maintenance Service	\$ 10,000	
53331 Postage	\$ 200	
53326 Security Monitoring	\$ 1,800	
53331 Electric, Water & Sewer	\$ 24,000	
53332 Natural Gas	\$ 6,000	
53334 Internet	\$ 1,200	
53351 Repair & Maintenance-Building	\$ 25,000	
53352 Repairs & Maintenance-Equipment	\$ 2,000	
53353 Repairs & Maintenance-Vehicle	\$ 1,000	
53354 Repairs & Maintenance	\$ 1,800	
53357 Garbage & Trash Disposal	\$ 2,400	
53358 Equip. Maintenance Agreement	\$ -	
53371 Advertising	\$ 6,600	
54421 Equipment Leasing	\$ 5 -	
54421 Lease Equipment	\$ 7,200	
54451 Insurance-Property & General Liability	\$ 9,600	
54452 Insurance-Professional Liability	\$ 1,200	
54453 Insurance-Vehicle	\$ 5 -	
54454 Interest Expense-Accrued	\$ 150,000	
54493 Tax & License	\$ 3,800	
54495 Interest Exp (Loan Set)	\$ -	
56621 Allocation-Transportation	\$ 9,000	
56621 Allocation-Transportation	\$ 26,191	
56623 Allocation-Vehicles	\$ 5 -	
56630 Allocation-Quality Management	\$ 52,383	
56640-2191 2191 Operations Allocations	\$ 5 -	
56640-2192 2192 Operations Allocations	\$ 969,081	
56683-2192 2192 Regional Alloc	\$ 120,000	
57727 Contracted Cleaning Service	\$ 48,000	
57728 Contracted Grounds Maint.	\$ 12,000	
57729 Contracted Laundry	\$ 10,000	
57730 Security Personnel/Outside Contractor	\$ 208,000	
<b>EXP40 Non-Accountable Expense Line Items</b>	<b">\$ 1,704,055</b">	
<b>EXP50000 Total Expenses</b>	<b">\$ 11,732,202</b">	
<b>NET1 Net Income</b>	<b">\$ 2,891</b">	

#### PRTF Staffing

Staff includes:	FTE
Indirect Budgeted:	
1 Program Director	1.00
1 Administrative Assistant	1.00
1 Admissions Coordinator	1.00
1 Assistant Program Director	1.00
<b>Total FTE calc'd to Personnel</b>	<b>4.00</b>

#### BHUC Staffing

Staff includes:	FTE
Indirect Budgeted:	
1 Program Director	1.00
2 Administrative Assistant	2.00
1 Assistant Program Director	1.00
0	0.00
<b>Total FTE calc'd to Personnel</b>	<b>4.00</b>

#### FBC Staffing

Staff includes:	FTE
Indirect Budgeted:	
0.5 Program Director (Split FBC/SUD)	0.50
1 Administrative Assistant	1.00
0	0.00
<b>Total FTE calc'd to Personnel</b>	<b>1.50</b>

#### SUD Staffing

Staff includes:	FTE
Indirect Budgeted:	
0.5 Program Director (Split FBC/SUD)	0.50
1 Administrative Assistant	1.00
0	0.00
<b>Total FTE calc'd to Personnel</b>	<b>1.50</b>

Total FTE calc'd to Personnel: **24.25**

Total FTE calc'd to Personnel: **16.50**

Total FTE calc'd to Personnel: **119.25**

Total Indirect Staffing: **11.00**

Total Direct Staffing: **108.25**

Total Consolidated FTE: **119.25**

Direct Staffing:

Direct Staffing:

Direct Staffing:

PRTF 4.00

BHUC 24.25

FBC 16.50

SUD 17.50

## Financial Management Capabilities

Dedicated accounts payable staff, accounts receivable staff, payroll staff and a budget analyst will support each of the 4 operations for the Cabarrus Regional Behavioral Health Center (BHUC, PRTF, Adult FBC, and Adult SUD). This team is led by our Chief Financial Officer and Controller. The accounts receivable and payable staff have an average tenure of 15 years with Monarch which includes billing experience within Behavioral Health for BHUC, Adult FBC, and Adult SUD, Child & Adolescent FBC and Goodale School programs and have experience being the representative payee for 330 people that we serve. We bill to each of the LME/MCOs in North Carolina as well as close to 50 commercial insurance payers. Due to the tenure of our billing team, they have established relationships with each of our LME/MCO partners and remain in regular communication to review and resolve billing issues as they arise.

Monarch manages all accounting and billing online and is supported by our IT department to make sure each platform is properly integrated with the many sources required to exchange financial information. Our accounting system, Black Baud is fully integrated with Workday for Human Resources and Payroll and Credible, our EHR platform for billing. Financials are independently audited on an annual basis by Davidson Holland Whitesell.

Monthly financials for the Agency and each service line are reviewed by the executive team and the board of directors. Monarch believes in transparency, so these are also reviewed by each department and cost center to discuss both revenue and expense. The cross collaboration between finance, operations and coding supports optimization of revenue, correct billing practices and a focus on quality and compliance.

Each service line at the Cabarrus County Behavioral Health Complex will follow our standard financial process and operating procedures. This will include the following processes:

Purchase Orders

Proper invoice approvals

Position control and time management system for payroll

Monthly financial package

Monthly operational reviews to identify trends and areas for improvement.

Annual budget process

We are closely watching Medicaid Expansion currently considered for the state. While the total implications are unknown at this point, we anticipate improved coverage for individuals with more individuals being eligible for services. We continue to monitor for changes in state reimbursement compared to Medicaid reimbursement as this becomes effective.

March 7, 2023

Rodney Harris  
Deputy County Manager  
Cabarrus County

**Re: Reference for Monarch**

Dear Rodney:

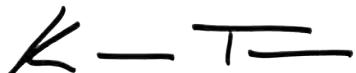
I am writing this letter to summarize how much I have enjoyed working with Monarch over the last 15+ years. That relationship has involved collaborating on design and construction projects, supporting mission related causes, and talking about how we can most effectively make a positive impact on the behavioral health environment in North Carolina.

I first met Peggy Terhune at a conference around 2012, when I heard her speak about the new crisis program Monarch developed to support people in need. In the years following that meeting, I have had the chance to work with many leaders and staff at Monarch on a variety of projects. The one thing that has been consistent across everyone I meet at Monarch is that they are truly committed to the organization's mission. The conversations are always about care, always about doing what is best for patients and clients, and always about doing the most possible with limited resources.

When we have reached out to Monarch for expert knowledge to supplement our own experience, Monarch leadership always says yes, providing valuable insights and help without ever asking what is in it for them. When Monarch leaders reach out to us for assistance, we always say yes. Because that is what friends do.

I value the relationship we have built with Monarch leaders, past and present, over the years. I feel strongly that they are an organization committed to serving vulnerable populations in North Carolina.

Sincerely,



Kevin M. Turner, AIA, LEED AP  
Principal Architect

March 13, 2023

Rodney Harris  
Deputy County Manager  
Cabarrus County

Re: Letter of Recommendation for Monarch

Dear Rodney:

On behalf of NAMI, it is my pleasure to write a letter in support of Monarch's Request for Proposal (RFP) for a Regional Behavioral Health Facility in Cabarrus County. Monarch has been a wonderful partner with NAMI and is a committed advocate to providing people with mental illness, substance use disorders and intellectual disabilities the quality care to help them reach their health goals.

My work with Peggy Terhune and the staff at Monarch has always been a positive experience. The organization employs staff who are passionate about caring for the people they support and are always willing to lend a hand to ensure our efforts at NAMI are successful. They also do a wonderful job helping support and educate the families/caregivers or other key stakeholders in the care of their patients.

I know having Monarch as the provider for the Cabarrus County Behavioral Health Facility will provide the community with top quality care that will improve the lives of those they serve and wholeheartedly recommend the organization as the top candidate for your RFP.

Sincerely,

*Anjie Vickers*  
Anjie Vickers MSN, RN  
President NAMI Cabarrus

March 13, 2023

Rodney Harris  
Deputy County Manager  
Cabarrus County

Re: Letter of Recommendation for Monarch

Dear Mr. Harris:

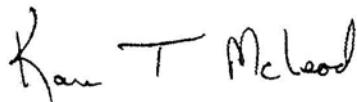
On behalf of Benchmarks, it is my pleasure to write a letter in support of Monarch's Request for Proposal (RFP) for a Regional Behavioral Health Facility in Cabarrus County. Monarch stands out as a premier behavioral health provider in North Carolina.

Monarch has a strong reputation and track record of continued commitment in providing innovative services that best meet the needs of people in North Carolina with behavioral health and/or I/DD disability. The organization has remained true to their mission and always puts the people they serve first.

Monarch's CEO, Dr. Terhune, is an advocate for the families and caregivers they serve and through her leadership have been diverting people with behavioral health needs from emergency departments through their BHUC in Wake County and their Child and Adolescent Facility Based Crisis center in Charlotte. Furthermore, Monarch is willing to assist other agencies and the state to solve complex problems that impact access to quality care.

I strongly encourage you to choose Monarch as the provider for the Cabarrus County Behavioral Health Facility, and I wholeheartedly recommend the organization to provide each of the service lines described in the RFP.

Sincerely,



Karen Taylor McLeod, MSW  
BENCHMARKS  
President/CEO

March 10, 2023

Rodney Harris  
Deputy County Manager  
Cabarrus County

**Re: Alera Health Letter of Recommendation for Monarch**

Dear Mr. Harris:

On behalf of Alera Health, it is my pleasure to write a letter in support of Monarch's Request for Proposal (RFP) for a Regional Behavioral Health Facility in Cabarrus County. Monarch remains committed to supporting, educating, and empowering people with developmental disabilities and intellectual disabilities, mental illness and substance use disorders to choose and achieve what is important to them.

Monarch has responded to the community needs in Raleigh, North Carolina through the successful implementation of a Behavioral Health Urgent Care (BHUC). Monarch's BHUC has diverted individuals from unnecessarily entering hospital emergency rooms and is staffed with high quality, caring teams of psychiatrists, therapists, and nurses.

Across North Carolina, Monarch plays a significant role in the continuum of care through the services it provides and its extensive partnerships with key community stakeholders. Monarch understands the role that the Behavioral Health Urgent Care (BHUC) plays in the larger landscape of holistic service delivery, which allows for optimal outcomes for individuals and families.

I hope you will look favorably upon their request and thank you for your service to the community.

*Sincerely,*

*Kathryn H Smith, Ph.D.*

**Kathy Smith, Ph.D.** (She, Her)  
Chief Operating Officer  
*Alera Health / Uncommonly Good Collaborations*  
p: 919.610.9433 | [Email](#) | [LinkedIn](#) | [alerahhealth.com](#)  
Wilmington, NC (EST)

**From:** pennyj8@verizon.net <pennyj8@verizon.net>  
**Sent:** Monday, March 13, 2023 4:04 PM  
**To:** Laurie Weaver <Laurie.Weaver@monarchnc.org>  
**Subject:** Monarch Letter of Support – Cabarrus Behavioral Health Center

March 13, 2023

Rodney Harris, Deputy County Manager  
Cabarrus County  
PO Box 707  
Concord, NC 28026

Dear Mr. Harris,

As a former recipient of services at Monarch's Lumberton Facility Based Crisis Center, I am writing in support of Monarch's application to provide services at the Cabarrus County Regional Behavioral Health Center.

In 2019, I reached a low point in my life and found myself experiencing a mental health crisis. Following a series of life challenges including a substance use disorder, post-traumatic stress disorder and depression, I needed help and reached out to Monarch's Facility Based Crisis Center in Lumberton. There, I found the support I needed to navigate the crisis I was experiencing and a connection to on-going therapy that I still find helpful today.

As a result of the care I received then and since, I have gone on to become a Peer Support Specialist and I use my experience to help others navigate the mental health and substance use challenges they face.

The help and support I found at Monarch is something that should be available to everyone who needs it. There are not enough crisis resources in North Carolina, and I applaud Cabarrus County for working to address this need. I know that Monarch is well-equipped to provide these services to people there, just as they did for me.

Thank you,

Sincerely,

Penny Markey  
Peer Support Specialist  
(410) 961-9113



March 13, 2023

Monarch  
Melissa Hall  
350 Pee Dee Avenue  
Albemarle, NC 28001

To Whom It May Concern,

This letter is being written at the request of Monarch.

Monarch is a current provider in the Partners Health Management Network. They are in good standing and have been in network since 2013. Monarch serves the following populations: adults and youth in the following counties: Cabarrus, Cleveland, Davie, Forsyth, Gaston, Lincoln, Rutherford, Stanly, and Union for Partners Health Management network.

Following review of the above documentation, Partners deems the provider's request for consideration of services appropriate. This letter is not intended as an endorsement of the Provider, quality of services, nor is it to be interpreted as a guarantee of business. Information utilized to assess provider status is current as of the date of the letter and subject to change

Sincerely,

*jamie sales*

Jamie Sales, MaEL  
Network Development Manager

Corporate Office  
901 S. New Hope Road  
Gastonia, NC 28054

Elkin Region Office  
200 Elkin Business Park Drive  
Elkin, NC 28621

Hickory Region Office  
1985 Tate Blvd. SE, Suite 529  
Hickory, NC 28602

Please complete the grid for your service line

1. For each assessment, indicate if it is required and the frequency (ex - at admission and every 90 days)

2. In last column, reference which outside agency or state/federal requirement determines our frequency for the assessment

N/A+L27:

Assessment	Behavioral Health								Enhanced Services								Other		
	CCBHC (on-hold)	FBC - adult	FBC - child	MAT	Mobile Crisis	Outpatient (Med Mgmt)	Outpatient (Therapy)	Urgent Care	ACTT	ACTT-Child	CST	IIH	Peer Support	Peer Bridger	IPS	PSR	Club Horizon	Goodale School	Comments - Related Requirements
24-hour ACUTE SCREENING	N/A																		
AIMS	AS needed if on Psychotropic Medication	AS needed if on Psychotropic Medication	AS needed if on Psychotropic Medication	N/A	N/A	AS needed if on Psychotropic Medication every 6 months (more frequent if needed)	N/A	Completed during visit if individual currently on an antipsychotic/psychotropic medication	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	AIMS required every 6 months per Monarch policy (Monitoring Psychotropic Medications). MM.01.01.05 EP 1 requires we monitor, but does not specify frequency. Mobile Crisis
ASAM	At intake if SUD Dx is given and monthly thereafter if in SAOR;	At time of assessment if active use of substance; updated as needed for any active use		N/A		At time of assessment if active use of substance; updated as needed for any active use	At CCA and once a month if receiving outpatient substance abuse treatment	Up to individual clinician discretion. (at one time this was included, but recently streamlined assessments completed during BHUC admission)	At CCA and every authorization with a substance use disorder	At CCA and every authorization with a substance use disorder	N/A	N/A	Cardinal requires with authorization request if SU diagnosis	N/A	N/A	N/A	N/A	N/A	Mobile Crisis - Upon admission service delivery with substance use disorder diagnosis, "Ongoing basis" but no time frame defined. <u>How have we defined ongoing basis?</u> CT1.02.03.07 EP - 7 - assessment requirements for MAT admission CT1.02.03.11 EP - 1 - level of care placement at admission
CAGE-AID	At intake if Sud Dx is given.	Not required. Up to individual clinician discretion.	Not required. Up to individual clinician discretion.			Completed at time of crisis assessment.	not required	Up to individual clinician discretion. (at one time this was included, but recently streamlined assessments completed during BHUC admission)	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	CT1.02.01.05 - Screenings/assessments are completed per policy & timeframe defined per policy	
CALOCUS	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CT1.02.01.03 - Screenings/assessments are completed per policy & timeframe defined per policy	
COWS	MAT program - for inductions only	For individuals in detox if ordered by provider. Frequency defined by provider order.	N/A		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CT1.02.01.03 - Screenings/assessments are completed per policy & timeframe defined per policy	
CCA	Completed by therapist (CCA) upon admission to service - on-assessment will be completed whenever clinically indicated, such as a change in diagnosis, or when required by service definition	On Admission (within 24 hours of admission)	On Admission (within 24 hours of admission)		Completed at time of crisis assessment	Completed prior to receiving services. Re-assessments will be completed whenever clinically indicated, such as a change in diagnosis, or when required by service definition	N/A	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	At intake/admission and as required by service definition	State requirement - to identify appropriate services. Upon admission, Records Mgmt Manual - at a frequency "as needed". At time of treatment planning - per MCO Medicaid allows us to bill up to 2 a year	
DIA - 20 (daily living activities)	Required for all individuals at first therapy session and update every 90 days	not in use at TA as of 7/29/2021	N/A	N/A	N/A	N/A	N/A	N/A	Required at admission and annually thereafter (Alliance & CST only)	N/A	Within first 60 days and every 90 days thereafter (Alliance & CST only)	N/A	N/A	N/A	N/A	N/A	N/A	may need to cross reference the service definitions.	
GAD 7 (generalized anxiety disorder)	At CCA and monthly or next appointment if more than a month out. (For anxiety disorder diagnosis)	N/A	N/A		Completed at time of crisis assessment.	N/A	Completed during initial assessment (CCA) for everyone. For individuals with a history of Generalized Anxiety Disorder or other anxiety disorder, it will be completed whenever clinically indicated (initial therapy session. If they score 0, reassess in 6 months. If they score 10-24, reassess in 30 days)	Up to individual clinician discretion. (at one time this was included, but recently streamlined assessments completed during BHUC admission)	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake	Upon intake	Upon intake	Upon intake	Upon intake	Upon intake	Measurement based standard - TIC7		
Homicide/Violence Risk Assessment (CSSR + People in Crisis Tool)	At CCA and next OP contact if moderate or high risk is indicated.	On admission and per shift	On admission and per shift		Completed at time of crisis assessment.	Required at time of crisis assessment. Required at time of psych eval and as indicated by each visit.	At CCA and next OP contact if moderate or high risk is indicated	At admission at time of BHUC eval	At CCA and whenever ideations are reported		At CCA and whenever ideations are reported	At intake and whenever ideations are reported	At intake and whenever ideations are reported	At intake and whenever ideations are reported	At intake and whenever ideations are reported	At intake and whenever ideations are reported	On Admission and as needed	CT1.02.01.01 - 1. The screening procedure determines the need for immediate intervention to protect the individual served or others. ACTT service definition	
IN/At Risk Form	N/A	N/A	N/A		Completed at time of crisis assessment.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CT1.02.01.05 - Screenings/assessments are completed per policy & timeframe defined per policy	
IECS - Trauma	At intake (CCA). Completed with any CCA reassessment.	On admission	On admission		Completed at time of crisis assessment.	N/A	At registration - If not completed prior, will be completed at time of CCA. Completed with any CCA reassessment	On admission	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	Upon intake and with any CCA reassessments	CT1.02.02.05 EP - 2. The organization identifies individuals who may have experienced trauma, abuse, neglect, or exploitation during initial screening and assessment and an ongoing plan	
LOCUS	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CT1.02.01.05 - Screenings/assessments are completed per policy & timeframe defined per policy	
Medication Reconciliation	At every medical visit	On Admission & at time of discharge	On Admission & at time of discharge		N/A	At every visit	N/A	On admission & at time of discharge	When medications are changed by the provider and after patient reauthorization		N/A	N/A	N/A	N/A	N/A	N/A	N/A	On medications	NPHG.03.06.01 - everytime there is a medication change and individual is being discharged
NCTOPPS	#SUD is primary - At admission, and at 3, 6, 12 months and bi-annually thereafter.	N/A	N/A		N/A	N/A	If SUD is primary - At admission, and at 3, 6, 12 months and bi-annually thereafter. At discharge.	N/A	At admission, and at 3, 6, 12 months and bi-annually thereafter. At discharge.	N/A	At admission, and at 3, 6, 12 months and bi-annually thereafter. At discharge.	N/A	At admission, and at 3, 6, 12 months and bi-annually thereafter. At discharge.	N/A	At admission, and at 3, 6, 12 months and bi-annually thereafter. At discharge.	N/A	N/A	state requirement - initial, 3 mo, 6 months and annually thereafter (substance use disorder, etc)	
Nutrition	On intake & annually	On Admission	On Admission		N/A	On intake & annually	On intake & annually	Completed during triage	At intake and annually		At intake and annually	At intake and annually	At intake and annually	At intake and annually	At intake and annually	At intake and annually	At intake and annually	At intake and annually	Top 10 physical pain assessment is indicated. At minimum, the screening includes questions about the following: Food allergies
Pain	On intake	On admission and per shift	On admission and per shift		N/A	During initial psych eval & at every visit	During registration - Part of medical profile completed by PA at time of psych eval	During triage	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and with any CCA assessment	On intake and BPS	CT1.02.01.01 - 1. The organization screens all individuals served to identify those for whom physical pain assessment is indicated. -NOTE: PSR tracer identified this as a need - SA	
PCP	On intake, updated every 90 days.	On admission with CCA	On admission with CCA		N/A	N/A	N/A	N/A	At admission and updates every 6 months, with new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	At admission and with any new plans completed every 364 days	On Admission	State requirement - initially, then annually (or if the needs change) CT1.03.01.01 EP 1 - The organization develops a plan for care, treatment, or services that includes the needs, strengths, preferences, and goals of the individual served. CT1.03.01.04 EP 4 - The organization reevaluates and, when necessary, revises the	

PHQ-5 [PHQ-5 is used for 11-17 years of age]	At intake (CCA and monthly thereafter or next session whichever comes first)	On Admission	On Admission: PHQ-9A - Adolescent		Completed at time of crisis assessment.	Completed during initial psych eval for everyone. For individuals with diagnosis of Major Depression or dysthymia, begin on the initial individual therapy session and if they score D- 9 reassess in 6 months. If they score D-27, reassess at next visit*.	N/A	Completed during initial assessment (CCA) for everyone. For individuals with diagnosis of Major Depression or dysthymia, begin on the initial individual therapy session and if they score D- 9 reassess in 6 months. If they score D-27, reassess at next visit*.	N/A	Completed during initial assessment for everyone. For individuals scoring 0-9 reassess every 6 months, or individuals scoring 10 or more reassess in one month	Completed during initial assessment for everyone. For individuals scoring 0-9 reassess every 6 months, or individuals scoring 10 or more reassess in one month	N/A	N/A	N/A	N/A	N/A	N/A	CT5.02.01.03 - Screenings/assessments are completed per policy & timeframe defined per policy	
PSC 17	At CCA and optional thereafter (Minor's age 6-17)	N/A	On admission		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	CT5.02.01.03 - Screenings/assessments are completed per policy & timeframe defined per policy	
Psych Evds	At beginning of services and updates as indicated or when returning services after individual discharged	On Admission (within 24 hours of admission)	On Admission (within 24 hours of admission)		N/A	At beginning of services and updates as indicated or when returning services after individual discharged	N/A	BHUC eval completed	at admission and every three years if needed	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	At request of student with parents permission at request of parent with student's consent
PSS-3 (suicide screener)	N/A	N/A	N/A		N/A	Completed upon each visit; risk assessment as indicated	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	Physical exam requirements during screening - CT5.02.01.05; CT5.02.01.06; CT5.02.01.07
Risk Assessment (Suicide)	At intake and next contact if moderate or higher risk level identified at intake.	On admission and per shift	On admission and per shift		Completed at time of crisis assessment.	On admission and at every visit	At admission as part of CCA. Completed for all individuals in opposition to Moderate or Higher Risk identified in intake sheet	During BHUC eval	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	At CCA and whenever ideations are reported	On admission and monthly	CT5.02.01.01 - 3. The screening procedure determines the need for immediate intervention to protect the individual served or others. NPSC 15.01.01.01 EP 2: Screen all individuals served for suicidal ideation using a validated screening tool.	
SDOH	At first therapy appt & every 90 days	On admission	N/A		N/A	At first nurse visit & every 6 months	At first therapy appt & every 6 months	at admission	At intake and with every CCA. For Patients MCO- reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	At intake and reassessed every 6 months	N/A	external referrals in TSC7 (housing, food, domestic abuse, employment, child care)	
Treatment Plan	First therapy session and updated every 90 days.	see PCP	see PCP		N/A	N/A	First therapy session and updated every 90 days (or more frequently based on life changes or CCA addendum)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	date requirement - initial and within first 30 days, then annually thereafter (or if the needs change) CT5.03.01.03 EP 1 - The organization develops a plan for care, treatment, or services that reflects the assessed needs, strengths, preferences, and goals of the individual served	
Triage Risk Assessment	N/A	24 hour acute assessment at first point of contact (could be phone or F2F)			N/A	At admission and for walk- ins without appointments	At admission and for walk- ins without appointments	At triage for all individuals	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	date requirement - readiness to change related standard
URICA	At intake (CCA and if SUD Dr given) & every 90 days	N/A	N/A		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	readiness to change related standard
Other documentation																			
Advance Directives																			CT5.04.01.01 - The organization documents whether the adult has a psychiatric date requirement - ask as part of crisis plan
Consent	Theresa and Lanika working on separate document to clarify expectations and frequency for all consents																		date requirement - prior to start of service. Technically good until person resides Consent to treat on an annual basis - could be achieved through signature on PCP/treatment plan
Consent to Photo																			Goodwill on admission by patients in enrollment documents
ROI																			Goodwill on admission and as needed as providers or family members are added to treatment goals



## *Performance Improvement Plan*

**Monarch**

***Fiscal Year 2022-2023***

Revised: 7/18/2022

## Executive Summary

Monarch is committed to the provision of services that maximize the quality of life for each person supported. Monarch believes that a comprehensive performance improvement plan meets our ongoing commitment to achieve system wide best practices to improve outcomes and quality care. Our aim is to ensure that care and services are provided in a safe, effective, person-centered environment. This plan will help provide a consistent process for improving quality of care, increasing satisfaction, and improving safety of the people we support. Performance Improvement (PI) activities and projects will expand across all departments/services and respond to the needs of persons receiving services, staff, and the community.

PI focuses on high-risk, high-volume, systemic trends, and required regulatory issues. Outcomes and processes are identified and measured. The PI process is company-wide and includes a system of information management that analyzes aggregate and comparative data. Using data to analyze performance helps Monarch to identify meaningful improvement goals and to evaluate the effectiveness of improvements.

### **Purpose and Scope**

The purpose of this plan is to outline the planned, systematic, organization-wide approach to quality assessment and continual performance improvement at Monarch. The plan is created annually and approved by the Performance Improvement Committee. Each year the committee approves Performance Improvement projects and goals and tracks the progress of workgroups. These results are routinely communicated back to staff at all levels of the organization as the projects progress.

### **Mission**

Monarch provides hope, promotes wellness, and empowers individuals and families impacted by mental illness, substance use disorders, intellectual and developmental disabilities, and traumatic brain injury.

### **Vision**

Monarch envisions a world where all people can achieve their unique potential.

### **Values**

**Integrity:** We value ethical and transparent behavior. We believe in honest and open communication that fosters trust and ensures we are accountable to each other and the people we support.

**Compassion:** We believe in treating all people with basic human kindness, understanding that Monarch is a stronger organization when people are caring and compassionate toward each other.

**Respect:** We value diversity in all its forms and work to ensure the inclusion of all people. We respect the rights and value the unique contributions of each individual.

**Excellence:** We are committed to providing exceptional customer service and mission-driven care in a safe, healthy, and respectful environment.

**Courage:** We believe there is strength in having the courage to try and fail and in asking for help when assistance is needed. We value the ownership of mistakes and support the change and growth that can result.

**Innovation:** We value learning, changing, and charting the course for better behavioral health care for all. We commit to guiding operational performance through data driven leadership.

### Company Organization

#### **Board of Directors and Executive Leadership Team**

The commitment to continuous improvement is the goal of every staff and board member at Monarch. The Board of Directors will support and guide the company through directional planning and establishment of the organization's mission/vision. Executive leadership will help achieve this mission/vision through the development of strategic planning. This guidance will help lead and prioritize PI activities.

Executive and Senior leadership will participate in planning, coordinating, and communicating PI initiatives/results and overall efforts to continuously improve quality of care. Improvement initiatives and data are shared with employees via intranet, company newsletters and staff meetings. Committee meeting minutes and Monarch's annual PI plan is available for employees to access on SharePoint for review. All employees will be responsible for the ongoing and continuous assessment of personal outcomes for those served. Employees are responsible for continuous monitoring of their service delivery processes and communicating ideas/recommendations for improvements.

#### **Performance Improvement Department**

The PI Department is led by the Vice President of PI who reports to the Executive Vice President/ Chief Administrative Officer. The PI Department provides a systematic approach to ensuring quality of care and measurement of performance outcomes. Its focus includes improving services through evaluating, monitoring, and analyzing data pertaining to the areas of high-risk, high-frequency and high-cost.

The PI Department encompasses the areas of Clinical Risk Management, Safety, Infection Control, Health Information, Clinical Audits, Quality Management, and company-wide PI. In addition, the department monitors compliance with Joint Commission on Accreditation of Healthcare Organizations (TJC) standards and coordinates TJC surveys and education processes.

The Vice President of PI and Director of PI are responsible for monitoring framework to evaluate the effectiveness of service delivery, identify service gaps/improvement areas, and plans of action that ensure continuity and quality of care.

### Performance Improvement (PI) Goals and Objectives

The PI department assists Monarch in meeting performance outcome goals, accreditation, and contract requirements. The goals listed below support a culture of continuous quality improvement.

- To increase the value of services by improving quality and effectiveness in delivery of outcomes in a cost-effective manner.
- To design effective processes to meet the needs of people served and to remain consistent with the company's mission, vision, goals, and plan.
- To collect data that allows problem identification, monitors stability of existing processes, and identifies opportunities/changes that lead to and sustain improvement. This could include, for example,

readmission rates, kept follow-up aftercare appointments, NC TOPPS compliance and identified PI activity outcomes.

- To provide holistic and culturally competent services that focus on the complete needs, dreams, and goals of each individual person.
- To maintain compliance with contractual obligations, national accreditation standards, and state-federal laws and performance expectations.
- To aggregate and analyze data to identify changes needed for improvement of performance and decrease errors.
- To maintain collaboration and communication across Monarch and foster a culture focused on performance improvement.
- To facilitate coordination of care between Monarch and other health care providers and to ensure comprehensive care.
- To ensure treatment and support provided is based on evidence-based, effective practices that minimize risk to those receiving services.

## **Continuous Quality Improvement**

Monarch's PI Committee and leadership help to identify opportunities for improvement. This is accomplished through continuously monitoring, analyzing, and improving workflows/procedures. Quality Assessment is accomplished by ongoing performance management, internal audits/ peer reviews, satisfaction surveys, stakeholder feedback, data analysis and employee input.

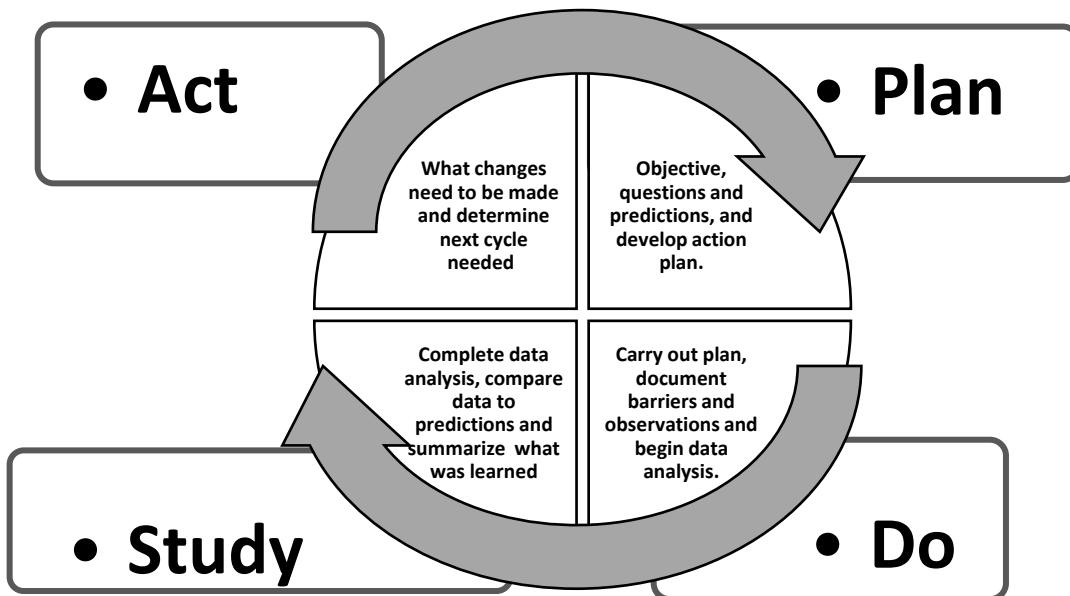
The following internal documents support our continuous improvement efforts and are in SharePoint or Tableau server:

1. Satisfaction Survey Results
2. Complaint-Grievance Data
3. Performance Improvement Plan
4. Credentialing and Staff Training
5. PI Committee Meeting Minutes and Charter
6. Dashboards and Reports
7. Peer Review/ Audits of Medical Records
8. Incident Reports
9. Monarch's Strategic Plan
10. Sub-Committee's meeting minutes and charter

When performance data does not meet expectations or goals, PI activities may be implemented. Each activity follows PI principles to identify the root cause/problem, develop actions to address the cause, monitor for improvements, and sustain the improvement. PI activity needs are identified by any committee in the PIC structure, ELT, or by the Director of PI. The Director of PI will work with the team as needed to identify problems, set goals, establish targeted improvements, assist with data collection and recommend additional interventions.

Monarch utilizes a Plan-Do-Study-Act (PDSA) model for continuous quality improvement. This is supported under the Institute for Healthcare Improvement Model for Improvement (MFI). MFI focuses on three questions

to set the aim or organizational goal, establish measures, and select changes. It incorporates Plan-Do-Study-Act (PDSA) cycles to test changes on a small scale.



## Staff Training and Development

Monarch believes strong training is the foundation of our ability to deliver services that improve people's lives. Providing the proper infrastructure to support a robust training program for staff and the people we support is paramount. It is Monarch's policy and goal to ensure each individual employee receives the training needed for quality service provision and personal professional growth that meets the requirements of any regulatory body. Curriculum is developed based on the continued analysis of needs and additional training sessions may be requested at any time.

The Director of Organizational Development, or designee, will develop a training plan, at least annually, to ensure that enough training opportunities are available to meet the needs of employees, supervisors, and regulatory bodies. The required training for each position/service will be evaluated at the initiation of a new position/ service, with any changes in training requirements by outside regulatory agencies and a minimum of every three years. All staff are required to demonstrate required competencies to hold his/her position. Competencies must be reviewed and completed within 60-90 days of hire. Competencies are documented in the individual staff member file in the electronic learning management system.

## Performance Improvement Committee (PIC)

PIC will review and analyze ongoing data, and work with the Vice President of PI and Director of PI in the development of the company's annual performance improvement plan. The Director of PI will chair the PIC and the Vice President of PI will be the assigned alternate. The Director will be responsible for reporting activities and the Vice President will make PI recommendations to the Executive Leadership Team. Minutes will be maintained of each meeting to include a minimum of areas reviewed, discussion, recommendations, goals and target dates.

The Director of PI will work with operations and the quality data analyst to track routine performance improvement activities and results and provide recommendations for system improvements. This includes PI project identification, tracking progress and reporting.

The PIC is responsible for:

- Identification, review and approval of PI projects
- Establishment of Evidence-Based Practices (EBP) input/process indicators; and improvement activities.
- Review of monitoring/data results and reporting to evaluate the status achieved toward the indicator/outcome established.
- Development of improvement projects or actions that ensure continual progress on goals.
- Making recommendations to improve company structure, processes, or quality control systems.
- Documentation of all functions.
- Establishment of Quality Focused Teams to implement or evaluate processes.
- Taking all applicable information to assigned service areas and completion of review/improvement actions at a local level.
- Review and designation of MCO submissions of project plans

In addition, indicators that are outlined in the PI plan that directly relate to service delivery will be assessed per the outlined schedule. Information obtained from assessment will be reviewed with each service division's (BH & LTSS) executive team. These leadership teams will share information throughout their services and work to identify opportunities for continual improvement. The Vice President of PI will be responsible for supervision of this PI process, and report findings and follow up as a committee co-chair to the PIC.

The PIC will meet a minimum of four (4) times during the fiscal year. Committee members will be recommended by Executive Leadership Team and members, with final approval made by committee members.

Membership in the Performance Improvement Committee will include representatives from many areas of the agency including Performance Improvement, Quality Management, Nursing, Medical, Information Technology, Human Resources, Finance, Maintenance, Accreditation, and Administration.

Changes will be made, as needed, to accurately reflect all people supported and services provided. PI goals are supported by the PI Workplan and PIC which outlines specific actions to be taken, timelines, and assigned responsibility.

### Performance Management and Reporting

The program focus for FY 2022-2023 is based on feedback and assessment by the PI Committee and Executive Leadership Team. Assessment results are utilized to establish indicator and outcome measurement priorities as well as improvement focuses for the organization. Indicators are measurable objective statements related to process and outcomes of treatment. The indicators are used to target the review of outcomes and checked on a regular basis.

Monarch's assessment is comprised of:

- review of previous and future PI goals and data analysis;

- an increased understanding of barriers to performance through focus groups and departmental outreach;
- review of the organization's mission, vision, and values;
- review of the organization's strategic plan;
- review of the ELT's operational plan and priorities;
- internal and external customer satisfaction and feedback;
- evaluation of processes utilized; and
- performance metric results.

PI activities are reviewed by the PI Committee. The PI program is responsible for analyzing each goal and activity per the outlined schedule and developing reporting for presentation of findings. Analysis and reporting will always contain a current and retrospective review of performance for comparison. Analysis will also include, as appropriate, a site/service-based perspective to an aggregate level.

- Findings that are not consistent with the organization's goals and expectations will be considered for PI performance improvement activities, and interventions put in place as needed.
- Indicators will be monitored and reported back to the committee.
- Each department, along with the PI Department will be responsible for reviewing reports, findings, and recommendations with the ELT, and committees within the PIC structure.
- Information reviewed is used to determine potential needs for quality improvement, policy creation and revisions, workflow process changes and workgroup meetings.
- All PI Committee meeting minutes, the PI Plan and reports attached will be posted in SharePoint or on the Tableau Server Dashboard for review.

## **Sentinel Events**

Monarch seeks to proactively identify high-risk processes which could result in an adverse or sentinel event. This identification and priorities are outline in Monarch's Quality Management/ Compliance plan and monitored by the Quality Management Department.

In the event of a sentinel event or near miss as defined in policy, the organization will:

- Ensure the event is reported to all applicable external and internal parties;
- Conduct a root cause analysis of the event; and
- Implement process changes identified in the root analysis to reduce the risk of recurrence.

## **Disaster Planning**

Monarch has implemented disaster recovery and emergency operation plans to outline the process and procedures necessary to support the effective and efficient restoration of critical business operations in the event of a disaster. The intent of the plan is to minimize business disruption and negative impacts with people supported, employees, vendors and the public. Disaster recovery plans are available on SharePoint and shared with staff. Each department is responsible for maintaining and executing disaster procedures pertinent to each program/location.

Disaster Planning is reviewed on hire and annually as part of the orientation and education process. Plan priorities include:

- Personal safety and welfare of Monarch employees and clientele
- Incident command system guidelines and procedures
- Restoration of core business processes and IT systems
- Emergency operations
- Recovery of vital medical and financial records

### Confidentiality

Subject to applicable federal, state, and local laws/regulations, PI records, data, and knowledge collected shall be confidential and all persons collecting such data will preserve its confidentiality. Data shall only be accessible to those participating in the PI department/ committee or to an accrediting/licensing agency responsible for insuring the existence of an ongoing and effective PI program.

### FY 2022-2023 Proposed Performance Improvement Goals/ Activities

Performance goals address issues critical to people receiving services, staff and Monarch's ability to serve the community. The priority of these goals is determined by the Executive Leadership Team and PI Committee.

The selection of PI goals utilizes the following criteria:

- The goal's relationship to Monarch's mission, vision, values, and strategic plan
- Focus on improving a person's supported experience and treatment outcome
- Building an integrated care delivery system that focuses on the whole person
- Identifying areas of improvement or targeted populations that are:
  - high-risk
  - high-volume
  - systemic trends
  - related to satisfaction
  - related to health and safety
  - related to appropriateness of admission and continued stay
  - related to risk management, and/or
  - destabilizing quality controls/assurance

PI activities may change over time as our priorities and strategies change. Data collection will be based on the availability of resources, data collection and needs of the company. Requirements for data collection imposed by funding sources and legal/regulatory agencies will also be included, when appropriate. All PI activities or projects will include an initial baseline value, creation of a goal measured in the same units and data performance that would be compared against the baseline for marked improvement.

Monarch has identified five specific PI activity areas for FY 2022-2023. With each of the projects below, we will seek to address each aspect of the quadruple aim of healthcare: improved patient outcomes, improved patient experience, lowered cost of healthcare, and provider satisfaction.

The areas below were approved for PI projects in FY 2022-2023:

- Staff Engagement

- Technology Use in LTSS Group Homes
- TMACT Scores for ACTT Programs
- Brand awareness
- Company Management Systems and Processes

Beginning in FY 2022-2023, we plan to launch our Care Management program statewide. In an effort to provide high quality care management services, we will implement a variety of HEDIS clinical quality measures and continue to develop strategies to improve our performance in the following areas:

- Follow-up After Hospitalization for Mental Illness
- Diabetes Screening for People with Schizophrenia or Bipolar Disorder who are using Antipsychotic Medications
- Metabolic Monitoring for Children and Adolescents on Antipsychotics
- Child Wellness Visits
  - Child and Adolescent Well-Care Visit
  - Well-Child Visits in the First 30 Months of Life
- Medical Assistance with Smoking and Tobacco Use Cessation
- Flu Vaccinations for Adults
- Screening for Depression and Follow-up Plan (Children, Adolescents, Adults)

## **Quality Culture and Beyond**

Monarch will continue to work towards a quality culture this year based on continuous improvement, data driven outcomes and increased transparency of targeted improvement efforts.

### **Contact:**

Daniel Daughtridge, MS LMFT  
Director of Performance Improvement  
[Daniel.Daughtridge@monarchnc.org](mailto:Daniel.Daughtridge@monarchnc.org)

Monarch Corporate Headquarters  
350 Pee Dee Avenue  
Albemarle, NC 28001

# Monarch: A Leader in Behavioral Healthcare in North Carolina

Cabarrus County Regional Behavioral Health Center

Monarch



Dr. Peggy Terhune, Ph.D., MBA, OTR/L  
President and Chief Executive Officer  
[Peggy.Terhune@monarchnc.org](mailto:Peggy.Terhune@monarchnc.org) (704)986-1520  
Presented To: Cabarrus County Board of Commissioners  
June 5, 2023

# Overview

**Monarch - Who We Are**

**Cabarrus County Behavioral Health Center**

**Cost Model**

**Q&A**

# Meet Monarch

## Who We Are

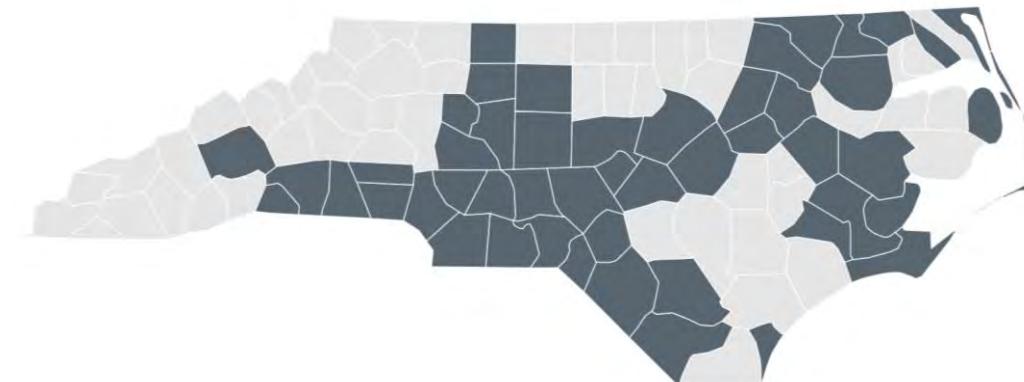
Established in 1958, Monarch is a leading provider of behavioral health services in North Carolina, serving more than 31,000 people annually.

Monarch has received The Gold Seal of Approval® from The Joint Commission, indicating the alignment with the highest quality standards in



## Where We Are

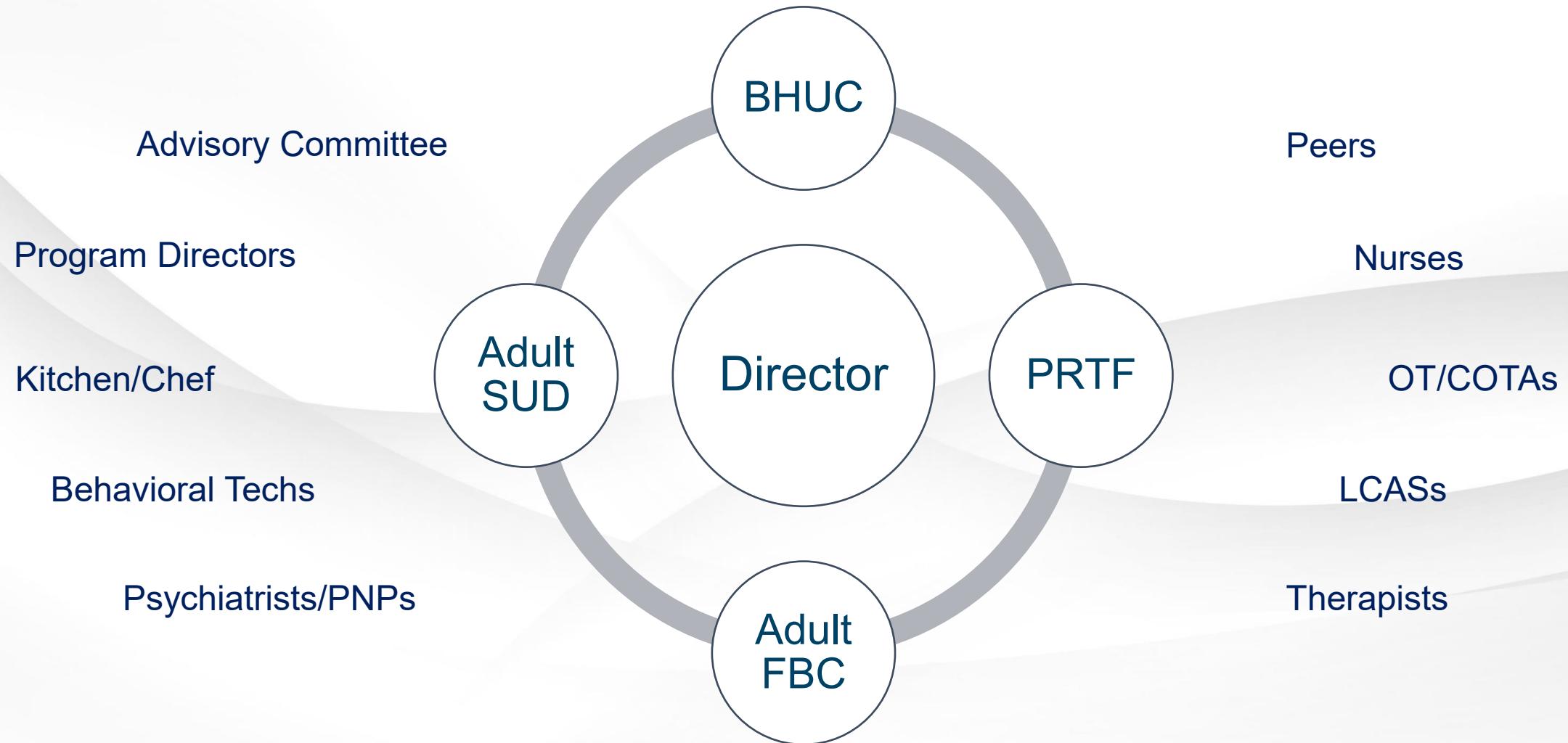
Monarch provides innovative, life-changing services at more than 186 locations in 49 North Carolina counties. We serve people from 95 of North Carolina's 100 counties.



# Vision and Values



# Cabarrus County Regional Behavioral Health Center



# The BHUC Experience



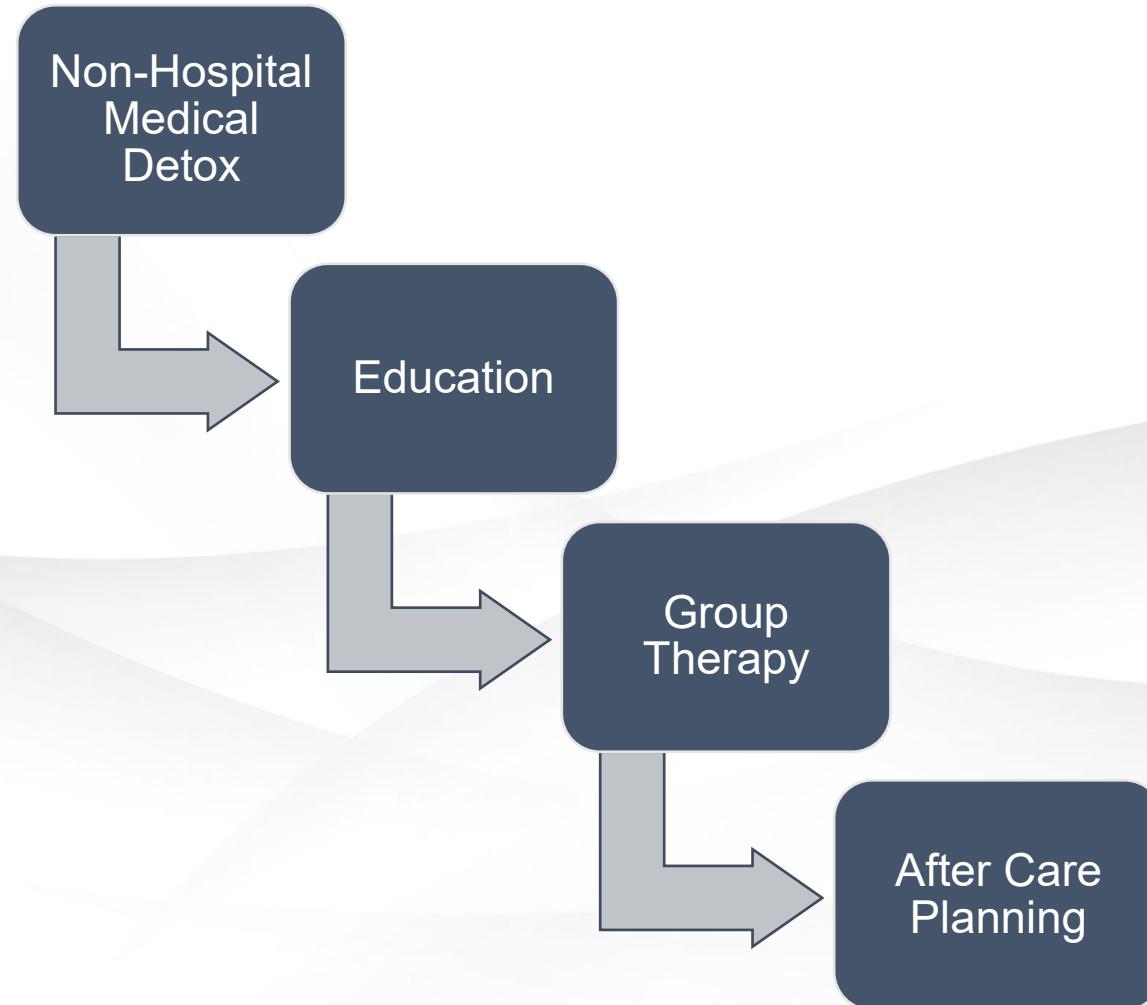
# A Defining Moment - PRTF

- Therapy
  - Individual, Group
  - Family
- Education
  - Certified Teachers (EC, Subject Matter)
  - Cognia, Nationally Accredited Curriculum
- Recreation
  - Focus: Building Self-Esteem with “Small Wins”
- Milieu Management
  - Staff work as a team and integrate treatment

# A Step Toward Treatment - Adult FBC



# A Path to Recovery - Adult SUD



# Consolidated Financial Projection

## Summary

Revenue	PRTF	BHUC	FBC	SUD	Total
<b>Total Revenue</b>	\$ 5,329,584	\$ 4,374,374	\$ 1,195,740	\$ 835,399	\$ 11,735,097
Expenses					
Personnel	\$ 3,433,147	\$ 2,600,837	\$ 1,492,046	\$ 1,565,608	\$ 9,091,637
Other	\$ 1,177,250	\$ 606,026	\$ 424,967	\$ 432,323	\$ 2,640,565
<b>Total Expenses</b>	<b>\$ 4,610,397</b>	<b>\$ 3,206,863</b>	<b>\$ 1,917,012</b>	<b>\$ 1,997,931</b>	<b>\$ 11,732,202</b>
<b>Net Surplus(Deficit)</b>	<b>\$ 719,187</b>	<b>\$ 1,167,512</b>	<b>\$ (721,272)</b>	<b>\$ (1,162,532)</b>	<b>\$ 2,895</b>

# BHUC Financial Projection

## Summary

### Revenue

Total Revenue \$ 4,374,374

### Expenses

Personnel \$ 2,600,837

Other \$ 606,026

**Total Expenses** \$ 3,206,863

**Net Surplus(Deficit)** \$ 1,167,512

## Staffing Full Time Equivalent

Indirect 4.00

Direct 24.25

Total 28.25

# PRTF Financial Projection

## Summary

### Revenue

**Total Revenue** \$ 5,329,584

### Expenses

Personnel \$ 3,433,147

Other \$ 1,177,250

**Total Expenses** \$ 4,610,397

**Net Surplus(Deficit)** \$ 719,187

### Staffing Full Time Equivalent

Indirect 4.0

Direct 50.0

Total 54.0

# FBC Financial Projection

## Revenue

**Total Revenue** \$ 1,195,740

## Expenses

Personnel	\$ 1,492,046
Other	\$ 424,967
<b>Total Expenses</b>	<b>\$ 1,917,012</b>

**Net Surplus(Deficit)** **\$ (721,272)**

## Staffing Full Time Equivalent

Indirect	1.5
Direct	<u>16.5</u>
<b>Total</b>	<b>18.0</b>

# SUD Financial Projection

## Summary

### Revenue

**Total Revenue**      \$      835,399

### Expenses

Personnel      \$      1,565,608

Other      \$      432,323

**Total Expenses**      \$      1,997,931

**Net Surplus(Deficit)**      \$      **(1,162,532)**

## Staffing Full Time Equivalent

Indirect      1.5

Direct      17.5

Total      19.0



# Q & A

With Dr. Terhune

Monarch



# THANK YOU!

MonarchNC.org | (866) 272-7826

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

BOC - Appointments to Boards and Committees

**BRIEF SUMMARY:**

The following appointment to Boards and Committees are recommended for June:

Appointments - Board of Equalization and Review

Keith Troutman and Helen McInnis currently serve as members and William Ferriss currently serves as an alternate member of the Cabarrus County Board of Equalization and Review. Each have terms expiring June 30, 2023. Each have expressed their desire to remain on the Board. Keith Troutman and Helen McInnis have served on the Board since their initial terms in 2011 and 2014 respectively so an exception to the "length of service" provision of the appointment policy will be needed for them.

Representative recommendations are Keith Troutman, Helen McInnis and William Ferriss.

Appointments - Jury Commission

Dianne Berry's term on the Jury Commission ends June 30, 2023. Ms. Berry would like to serve another term. Ms. Berry has served on this Commission since 2017. An exception to the length of service provision of the Appointment Policy will be needed for her.

Representative recommendation is Dianne Berry.

Appointments - Region F Aging Advisory Committee

James Bernacki serves on the Region F Aging Advisory Committee (RFAAC) and his term expires June 30, 2023. It is recommended that Mr. Bernacki be reappointed to the Region F Aging Advisory Committee to serve another term.

Representative recommendation is James Bernacki.

Appointments - Water and Sewer Authority of Cabarrus County

Robert Richie's term on the Water and Sewer Authority of Cabarrus County as an At-large representative ends June 30, 2023. Mr. Ritchie would like to be considered for reappointment. He has served on this board since 2011. If reappointed, an exception to the length of service provision of the Appointment Policy will be needed for him.

Representative recommendation is Robert Ritchie.

Appointments and Removals - Cabarrus County Tourism Authority

The Cabarrus County Tourism Authority has 4 seats that need to be appointed for the term commencing July 1, 2023 and ending on June 30, 2026. The nominating group and their nominees are as follows:

- Cabarrus County - Seat #1 Mike Downs\*~
- Cabarrus County Tourism Authority - Seat #2 Greg Walter\*^
- Cabarrus County Tourism Authority - Seat #10 Steve Steinbacher\*
- Cabarrus Regional Chamber of Commerce - Seat #3 Alison Paladino

\*Reappointment

<sup>^</sup>An exception the residency provision of the Appointment Policy will be needed

~An exception the multiple boards provision of the Appointment Policy will be needed.

Representative recommendations are Mike Downs, Greg Walter, Steve Steinbacher and Alison Paladino.

Appointments and Removals - Centralina Workforce Development Board

The terms on the Centralina Workforce Development Board for Dr. Carol Spalding, Education representative, and Beatriz Rodriguez, Private Sector representative, will end June 30, 2023. Both have asked to step down from their positions on the Board. It is requested to remove their names from the roster. David Hollars, Centralina Workforce Development Board Executive Director, has requested that the Education position on the Board be rotated to a Private Sector position. Per Board bylaws, nominations have been solicited from the Cabarrus Economic Development Commission. Anna Badiru and Chelsea Rigler have been recommended to be appointed to fill the vacant positions. A letter in this regard is included in the agenda. Neither Ms. Badiru nor Ms. Rigler are residents of Cabarrus County. An exception to the residency provision of the Appointment Policy will be needed for them.

Representative recommendations are Anna Badiru and Chelsea Rigler.

Appointments and Removals - Juvenile Crime Prevention Council

Terms for the following JCPC (Juvenile Crime Prevention Council) members end June 30,

2023: Carolyn Carpenter, Heather Mobley, Connie Philbeck, and Judge Christy Wilhelm. At the JCPC's May 17 meeting, the Council voted unanimously to recommend all four be reappointed to serve another term. An exception to the length of service provision of the Appointment Policy will be needed for Ms. Carpenter, Ms. Mobley, and Ms. Philbeck. An exception to the residency provision of the Appointment Policy will be needed for Ms. Mobley.

Additionally, the Council voted unanimously to accept the resignation of LaShay Avery, LME/MCO Regional Director. Ms. Avery plans to resign from Partners Behavioral Health and relocate to Texas.

Representative recommendations are Heather Mobley, Christy Wilhelm, Carolyn Carpenter and Connie Philbeck.

#### Appointments and Removals - Transportation Advisory Board

Terms for the following Transportation Advisory Board members end June 30, 2023: Charles Hendrix, Amy Nance, and James Polk. Mr. Hendrix and Mr. Polk have agreed to serve another term as Citizen Advocate representatives. An exception to the length of service provision of the Appointment Policy will be needed for them. Mr. Polk also serves on the Home and Community Care Block Grant Committee. An exception to the service on multiple boards provision of the Appointment Policy will be needed for him.

Amy Nance is stepping down from the Advisory Board. Letecia Loadholt has agreed to serve as the Human Services DSS representative.

Additionally, EMS Deputy Chief Kara Clarke has agreed to serve as the Cabarrus EMS representative that has been vacant since Michelle Dietrich retired.

Representative recommendations are Charles Hendrix, James Polk, Letecia Loadholt and Kara Clarke.

#### Appointments (Removals) - Youth Commission

The following Youth Commission members have graduated from high school: Owen Lutz (Hickory Ridge); Vishista Chittalooru (Hickory Ridge), Kylie Greenelsh (Mt. Pleasant), Mary Liu (Northwest Cabarrus), and Kayla Anderson (At Large). It is requested to remove their names from the roster.

### **REQUESTED ACTION:**

Provide information.

### **EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Lauren Linker, Clerk to the Board

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

BOC - NACo Voting Credentials - 2023 Annual Conference

**BRIEF SUMMARY:**

The National Association of Counties, NACo, will hold their 2023 Annual Conference in Travis County, Texas on July 21 - 24, 2023. In order to participate in the Association's annual election of officers, a voting delegate must be registered by July 17, 2023 at 5 p.m.

**REQUESTED ACTION:**

Motion to designate a voting delegate to represent Cabarrus County at the NACo Annual Conference in July.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Lauren Linker, Clerk to the Board

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

BOC - Resolution Amending the Cabarrus County Board of Commissioners' 2023 Meeting Schedule

**BRIEF SUMMARY:**

The following resolution changes the date for the July work session from July 3, 2023 to July 10, 2023.

**REQUESTED ACTION:**

Motion to adopt the resolution.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Lauren Linker, Clerk to the Board

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

Resolution



**Resolution Amending the  
Cabarrus County Board of Commissioners'  
2023 Meeting Schedule**

**WHEREAS**, on December 19, 2022, the Cabarrus County Board of Commissioners adopted a meeting schedule for calendar year 2023, which sets forth the dates, times and locations of various official county meetings; and

**WHEREAS**, the Board scheduled the July work session for July 3, 2023; and

**WHEREAS**, the Board is changing the date for the July work session to July 10, 2023.

**NOW, THEREFORE BE IT RESOLVED** that the Cabarrus County Board of Commissioners hereby amends its 2023 Meeting Schedule as follows:

1. The July work session will be held on Monday, July 10, 2023, at 4:00 p.m. in the Multipurpose Room at the Governmental Center in Concord, NC.

**ADOPTED** this 19<sup>th</sup> day of June, 2023.

---

Stephen M. Morris, Chairman  
Cabarrus County Board of Commissioners

ATTEST:

---

Lauren Linker, Clerk to the Board

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

County Manager - Easement for Back Creek Greenway

**BRIEF SUMMARY:**

The proposed easement agreement will allow the Town of Harrisburg to hold an easement on Back Creek. The easement will cross the Hickory Ridge Middle and High School properties. The purpose is to construct a greenway and allow any access and necessary appurtenances to be constructed within the easement.

**REQUESTED ACTION:**

Motion to approve the easement agreement for Back Creek Greenway on Hickory Ridge Middle and High School.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Kelly Sifford, AICP  
Assistant County Manager

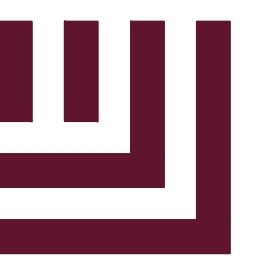
**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Greenway Plans
- Easement Agreement



**MCADAMS**

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Suite 110  
Charlotte, NC 28277  
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fax 919. 361. 2269  
license number: C-0293, C-187  
[www.mcadamsco.com](http://www.mcadamsco.com)

# CAMELLIA GARDENS GREENWAY

3925 STALLINGS ROAD  
TOWN OF HARRISBURG  
NORTH CAROLINA, 28075

## CONSTRUCTION DRAWINGS

PROJECT NUMBER: SHH-18020

DATE: MARCH 24, 2022

RESUBMISSION: JUNE 10, 2022

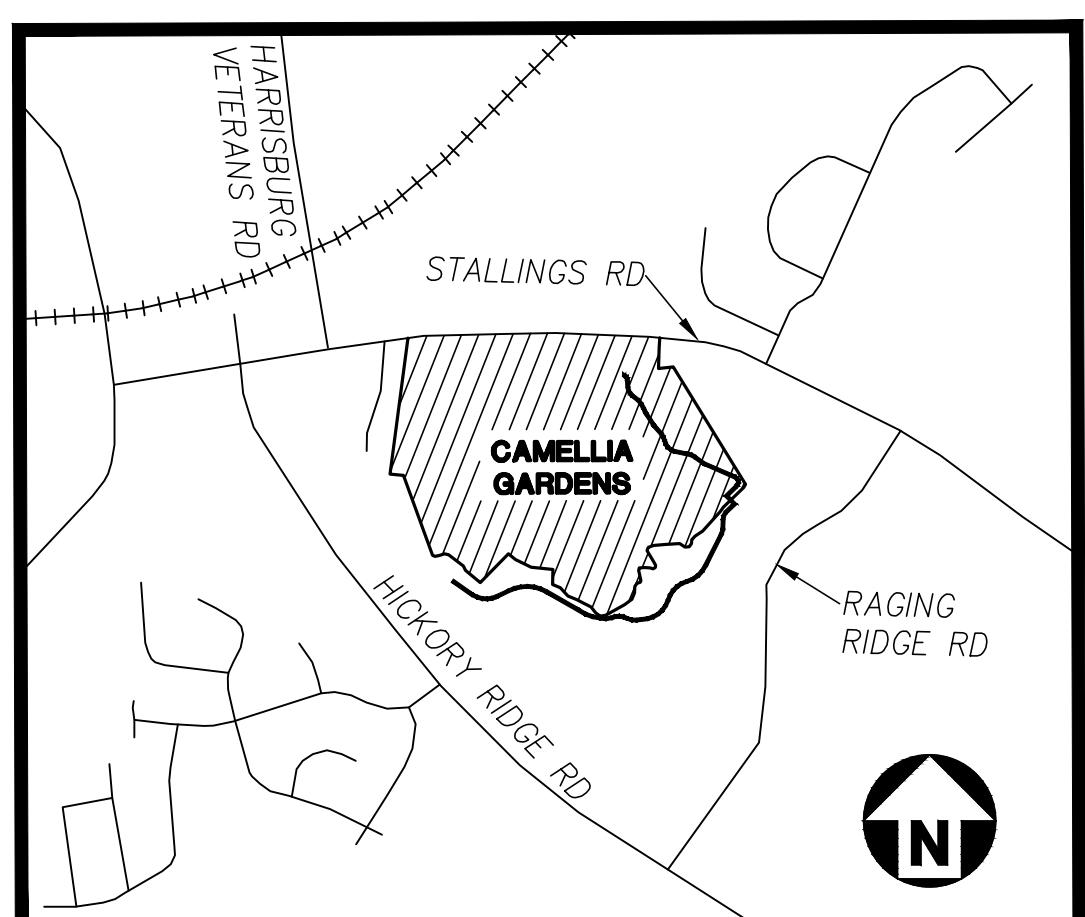
RESUBMISSION: AUGUST 25, 2022

### SHEET INDEX

C5.00	PLAN AND PROFILE - STA. 10+00 THRU STA. 19+50
C5.01	PLAN AND PROFILE - STA. 19+50 THRU STA. 27+00
C5.02	PLAN AND PROFILE - STA. 27+00 THRU STA. 36+00
C5.03	PLAN AND PROFILE - STA. 36+00 THRU STA. 44+00
C5.04	PLAN AND PROFILE - STA. 44+00 THRU STA. 51+71.56
C8.00	GREENWAY DETAILS
C8.01	GREENWAY DETAILS

### GENERAL NOTES:

1. THE PROPOSED GREENWAY WILL BE 4,172 LF UPON COMPLETION.
2. ANY ASPECT OF THE PLANS THAT DOES NOT MEET FEDERAL, STATE, AND LOCAL STANDARDS WILL REQUIRE ADJUSTMENT AND PLAN REVISION DURING THE CONSTRUCTION PHASE. APPROVAL OF THESE PLANS DOES NOT RELEASE DEVELOPER FROM ADHERENCE TO ALL APPLICABLE STANDARDS.
3. ALL PIPE SHALL BE CLASS IV RCP IN ACCORDANCE WITH NCDOT STD 300.01
4. ALL STRETCHES OF ALIGNMENT WITH 0% LONGITUDINAL SLOPE WILL MAINTAIN A 2% CROSS SLOPE.
5. SUBMITTAL DRAWINGS FOR THE BOARDWALK SPANS MUST BE SUBMITTED PRIOR TO ANY CONSTRUCTION ON THE SPANS OCCURRING.



**VICINITY MAP**

N.T.S.

**EMPIRE**  
PROJECT DIRECTORY

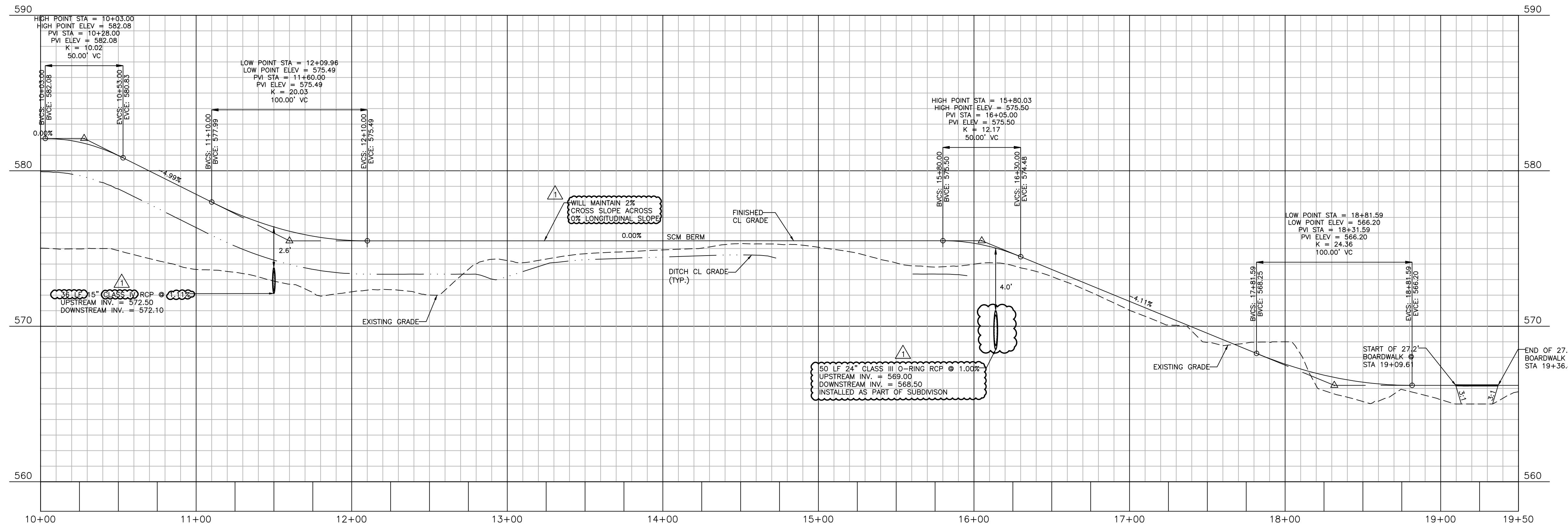
EMPIRE COMMUNITIES  
8008 CORPORATE CENTER DRIVE SUITE 300  
CHARLOTTE, NORTH CAROLINA 28226  
PHONE: 704.602.3307



REVISIONS  
08-25-2022  
046788  
STUART A. WOODARD  
06.10.2022 REV PER TOWN COMMENTS  
08.25.2022 REV PER TOWN COMMENTS

**CONSTRUCTION DRAWINGS FOR:**  
CAMELLIA GARDENS GREENWAY  
TOWN OF HARRISBURG  
NORTH CAROLINA, 28075  
PROJECT NUMBER: SHH-18020

FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



**GRADING LEGEND**

- FLARED END SECTION
- STORM DRAINAGE
- MAJOR CONTOUR
- MINOR CONTOUR
- EXISTING MAJOR CONTOUR
- EXISTING MINOR CONTOUR
- EASEMENT LINE

**EROSION CONTROL LEGEND**

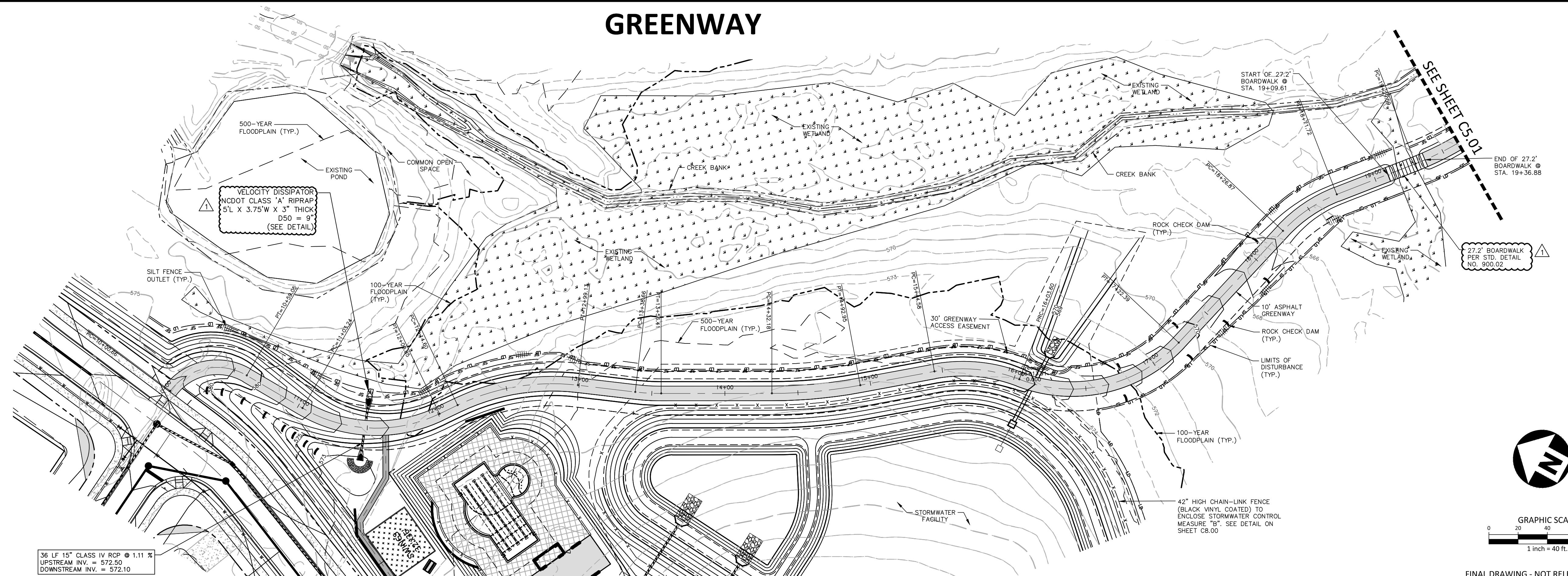
- SILT FENCE OUTLET
- FILTER BERM
- CHECK DAM
- SILT FENCE
- LIMITS OF DISTURBANCE

**SITE LEGEND**

- CENTERLINE
- STREAM CREEKLINE
- FLOODWAY
- 100-YEAR FLOODPLAIN
- 500-YEAR FLOODPLAIN
- CREEK BANK
- ASPHALT GREENWAY
- WETLAND AREA
- BOARDWALK/BRIDGE

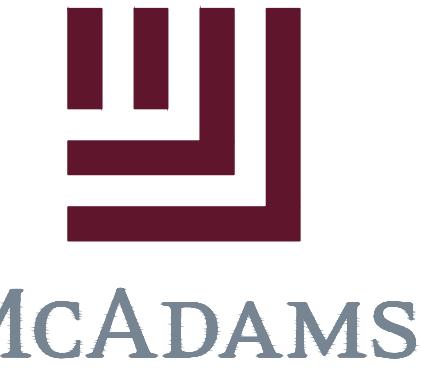
Y:\Projects\SHH18020\18020\Land\Construction Drawings\Sheet 04\Construction Drawings\Sheet 04\Construction Drawings\Sheet 04.dwg 6/10/2022 9:56:01 AM, Brandon Kent

## GREENWAY



GRAPHIC SCALE  
0 20 40 60 80  
1 inch = 40 ft.

FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION

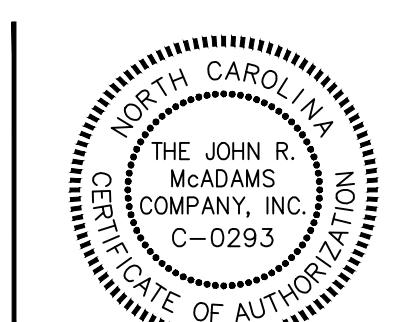


The John R. McAdams Company, Inc.  
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[www.mcadamsco.com](http://www.mcadamsco.com)

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PHONE: 704.602.3307

**EMPIRE**

**REVISIONS**  
NO. 06.10.2022 DATE 06.10.2022  
1 REVISONS PER TOWN 1ST REVIEW

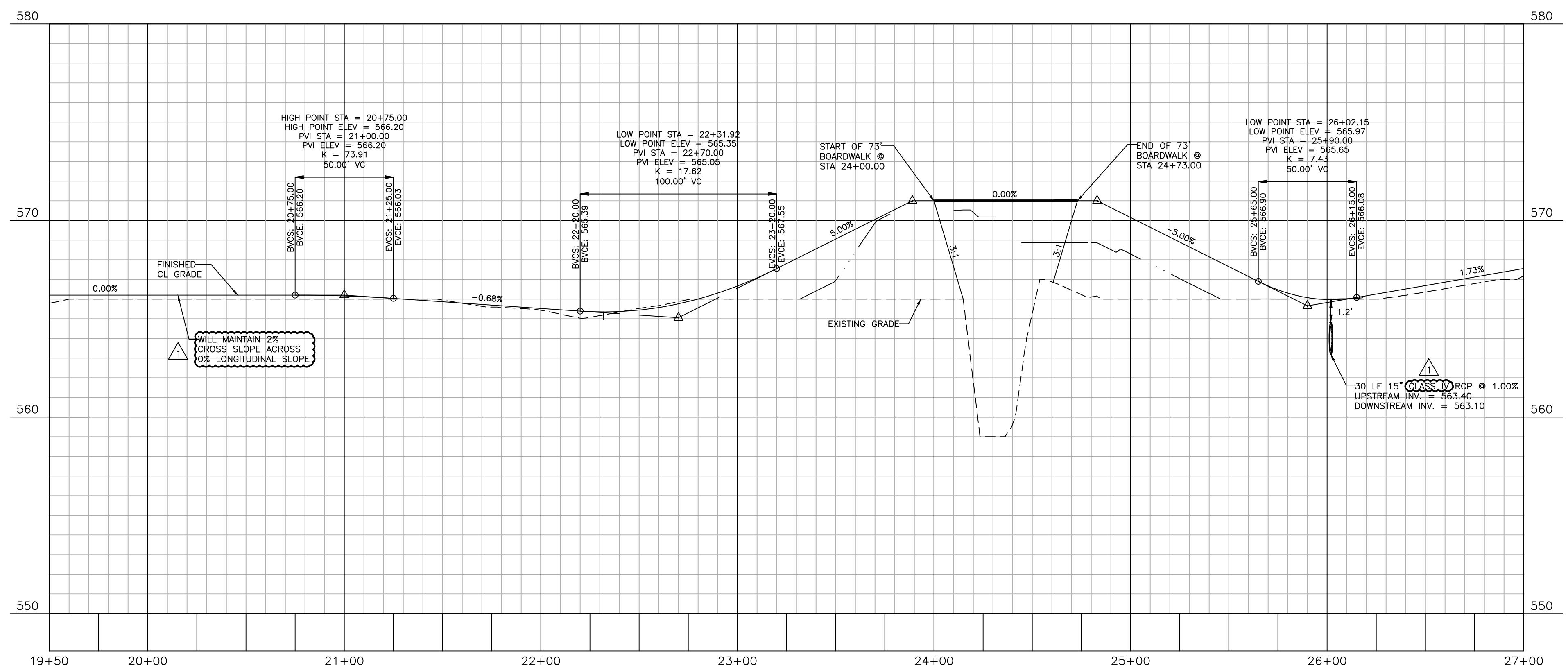


## CAMELLIA GARDENS GREENWAY CONSTRUCTION DRAWINGS 3925 STALLINGS ROAD TOWN OF HARRISBURG, NORTH CAROLINA, 28075

**PLAN INFORMATION**  
PROJECT NO. SHH-18020  
FILENAME SHH18020-P4-Greenway  
CHECKED BY SAW  
DRAWN BY BPK  
SCALE 1"=40'/1'=4'  
DATE 03.24.2022

**PLAN AND PROFILE**  
CAMELLIA GARDENS GREENWAY  
STA. 10+00 THRU STA. 19+50

**C5.00**



#### GRADING LEGEND

- FLARED END SECTION
- STORM DRAINAGE
- 250 MAJOR CONTOUR
- 252 MINOR CONTOUR
- 250 EXISTING MAJOR CONTOUR
- 252 EXISTING MINOR CONTOUR
- EASEMENT LINE

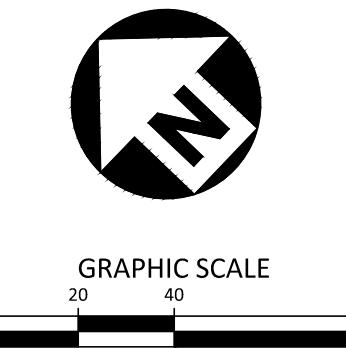
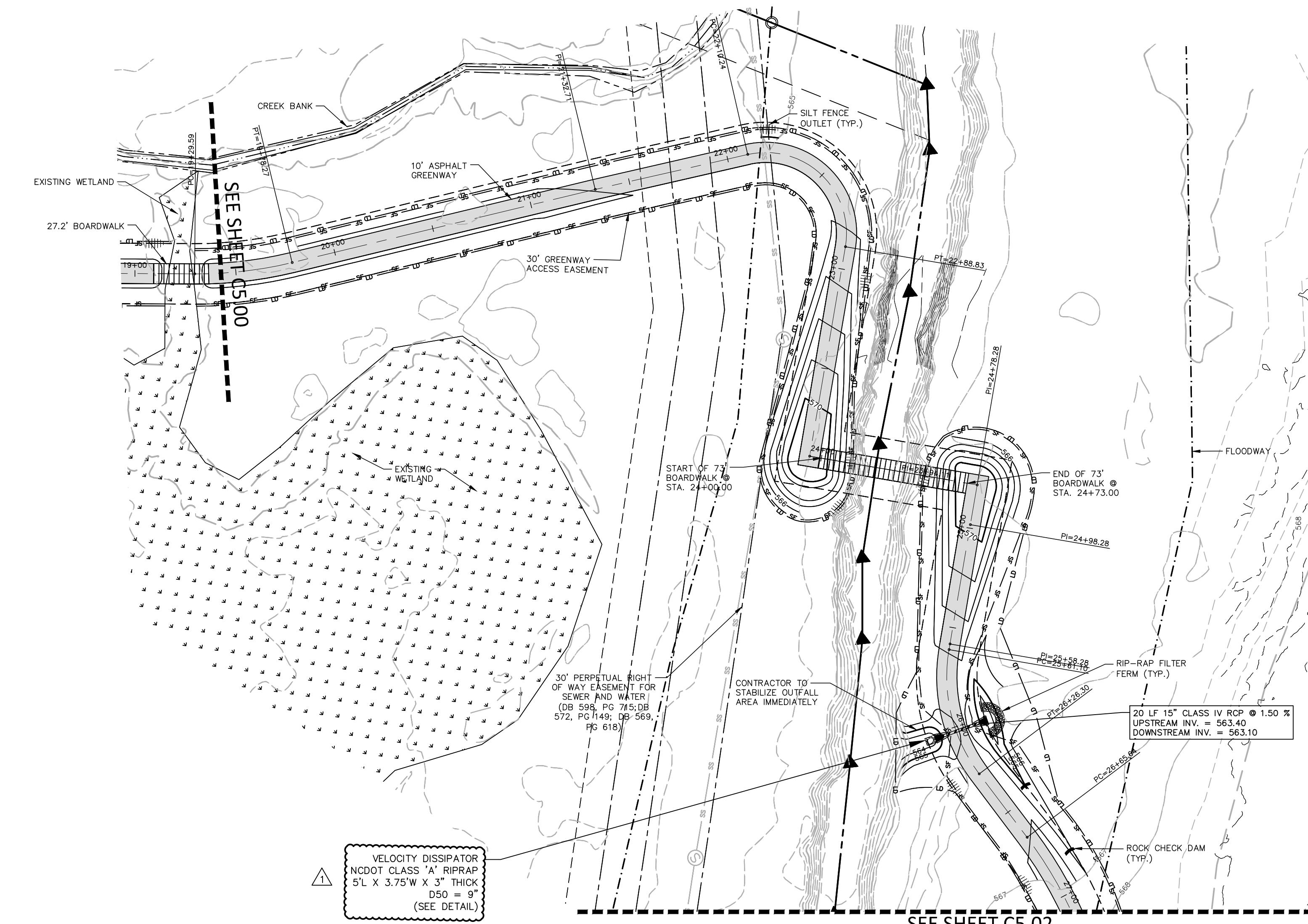
#### EROSION CONTROL LEGEND

- SILT FENCE OUTLET
- FILTER BERM
- CHECK DAM
- SF SF SF SILT FENCE
- LD LD LIMITS OF DISTURBANCE

#### SITE LEGEND

- CENTERLINE
- STREAM CREEKLINE
- FLOODWAY
- 100-YEAR FLOODPLAIN
- 500-YEAR FLOODPLAIN
- CREEK BANK
- ASPHALT GREENWAY
- WETLAND AREA
- BOARDWALK/BRIDGE

## GREENWAY



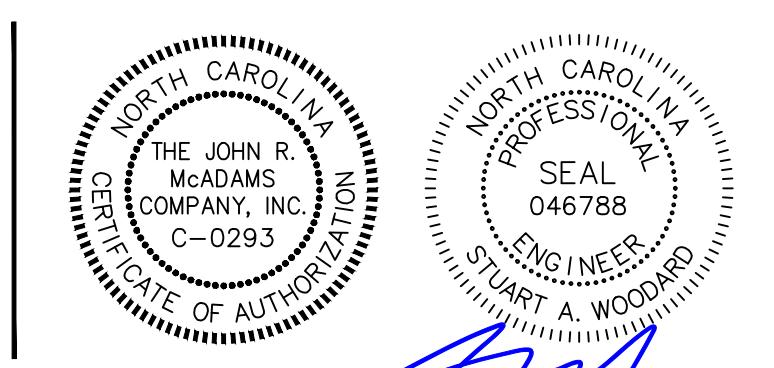
FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



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PHONE: 704.602.3307  
**EMPIRE**

**REVISIONS**  
NO. DATE REVISIONS PER TOWN 1ST REVIEW  
1 06.10.2022

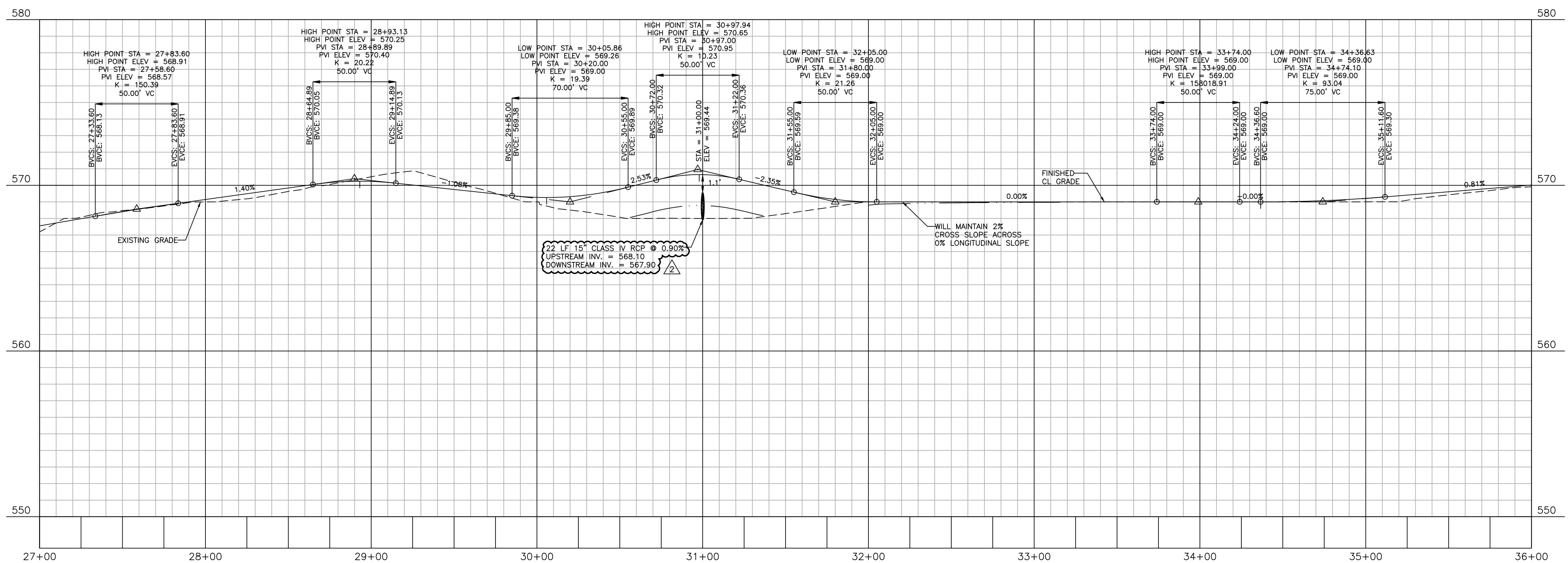


## CAMELLIA GARDENS GREENWAY CONSTRUCTION DRAWINGS 3925 STALLINGS ROAD TOWN OF HARRISBURG, NORTH CAROLINA, 28075

**PLAN INFORMATION**  
PROJECT NO. SHH-18020  
FILENAME SHH18020-P4-Greenway  
CHECKED BY SAW  
DRAWN BY BPK  
SCALE 1"=40'/1'=4'  
DATE 03.24.2022

**PLAN AND PROFILE**  
CAMELLIA GARDENS GREENWAY  
STA. 19+50 THRU STA. 27+00

**C5.01**



# GREENWAY

## GRADING LEGEND

	FLARED END SECTION
	STORM DRAINAGE
	MAJOR CONTOUR
	MINOR CONTOUR
	EXISTING MAJOR CONTOUR
	EXISTING MINOR CONTOUR

#### EROSION CONTROL LEGEND

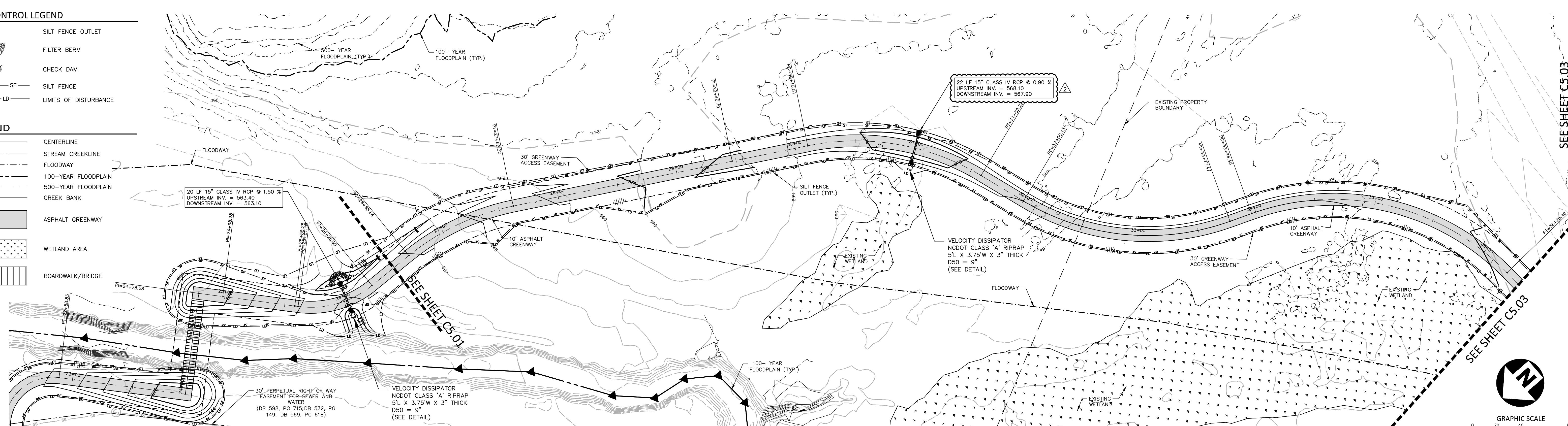
**EROSION CONTROL LEGEND**

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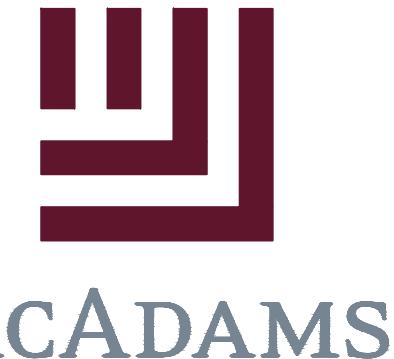
	SILT FENCE OUTLET
	FILTER BERM
	CHECK DAM
— SF — SF — SF —	SILT FENCE
— LD — LD —	LIMITS OF DISTURBANCE

## SITE LEGEND

	CENTERLINE
	STREAM CREEKLINE
	FLOODWAY
	100-YEAR FLOODPLAIN
	500-YEAR FLOODPLAIN
	CREEK BANK
	ASPHALT GREENWAY
	WETLAND AREA
	BOARDWALK/BRIDGE



FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



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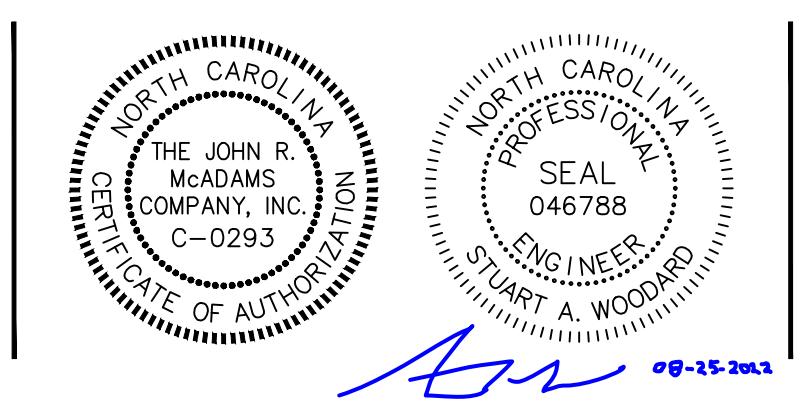
**CLIENT**  
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8008 CORPORATE CENTER DRIVE SUITE 300  
CHARLOTTE, NORTH CAROLINA 28226  
PHONE: 704.602.3307

# EMPIRE

Page 161

# REVISIONS

NO.	DATE	REVISIONS PER
1	06. 10. 2022	REVISIONS PER
2	08. 25. 2022	REVISIONS PER



**CAMELLIA GARDENS GREENWAY  
CONSTRUCTION DRAWINGS  
3925 STALLINGS ROAD  
TOWN OF HARRISBURG, NORTH CAROLINA, 28075**

## PLAN INFORMATION

PROJECT NO. SHH-18020  
FILENAME SHH18020-P4-Greenway  
CHECKED BY SAW  
DRAWN BY BPK  
CALE 1"=40'/1"=4'  
DATE 03. 24. 2022

# PLAN AND PROFILE

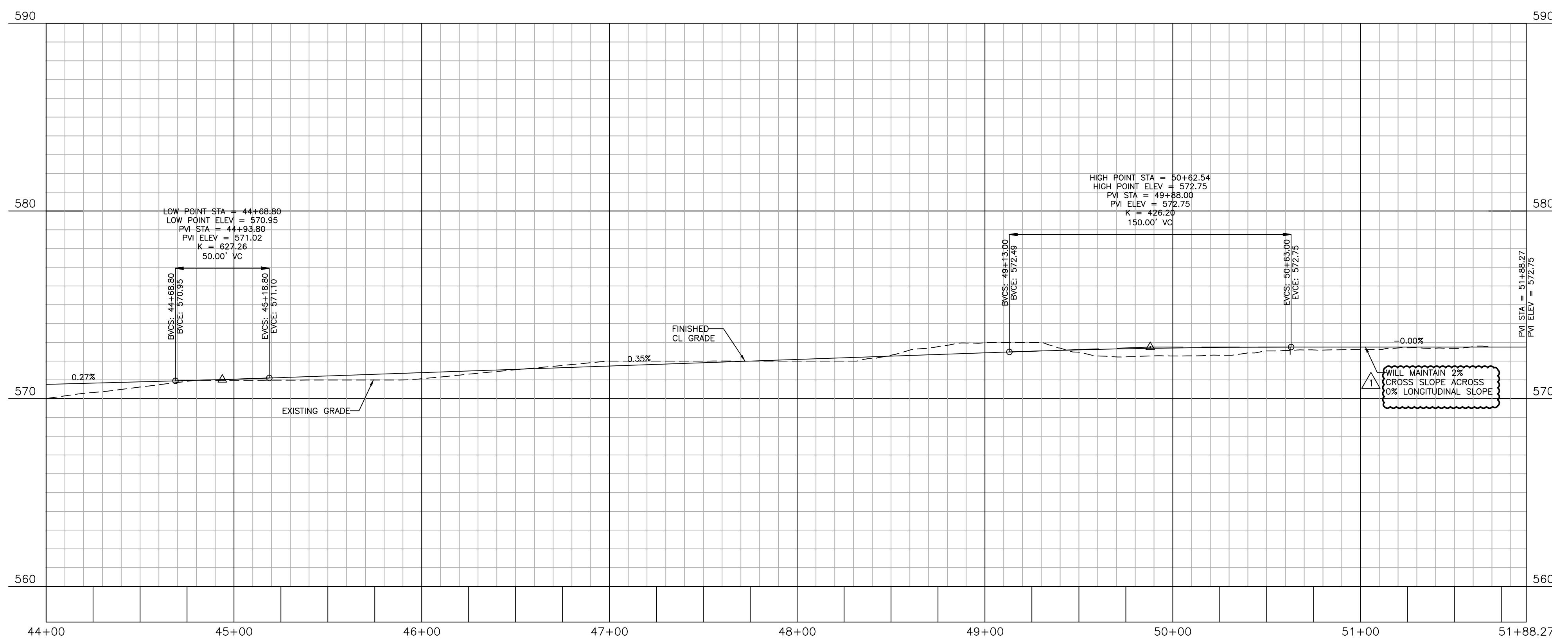
## CAMELLIA GARDENS GREENWAY

### STA. 27+00 THRU STA. 36+00

2025 RELEASE UNDER E.O. 14176

**C5.02**





#### GRADING LEGEND

- Flared End Section
- Storm Drainage
- 250 Major Contour
- 252 Minor Contour
- Existing Major Contour
- Existing Minor Contour
- Easement Line

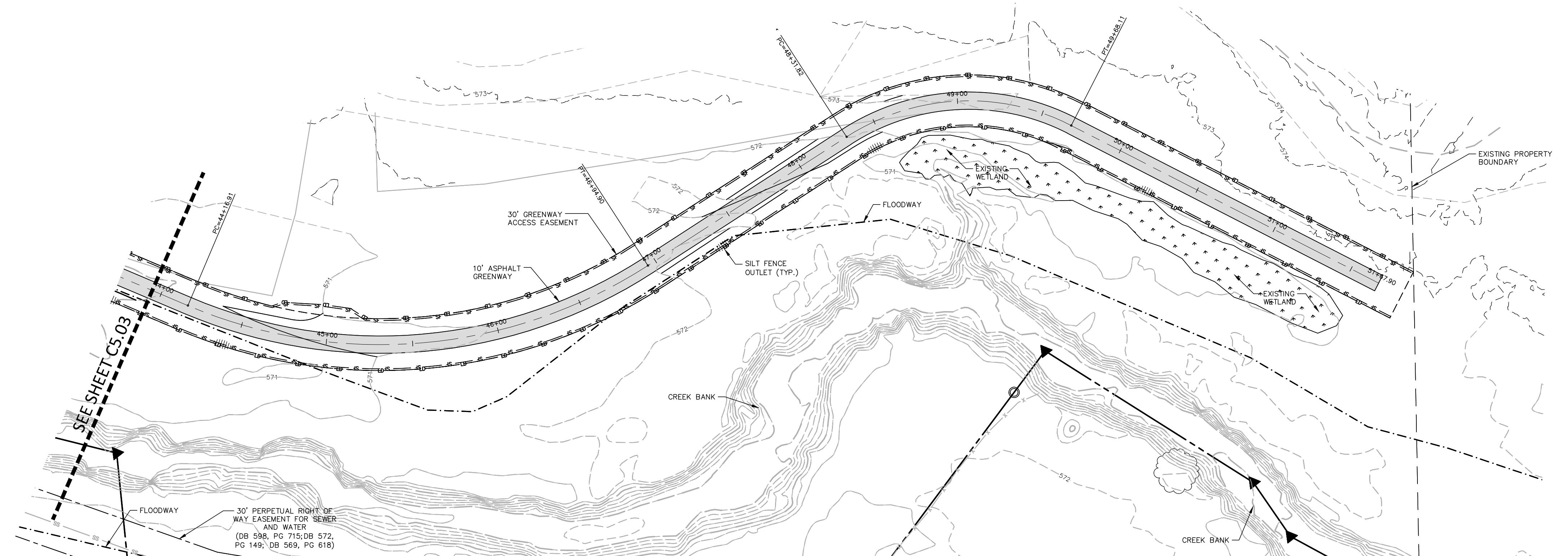
#### EROSION CONTROL LEGEND

- Silt Fence Outlet
- Filter Berm
- Check Dam
- SF SF SF Silt Fence
- LD LD Limits of Disturbance

#### SITE LEGEND

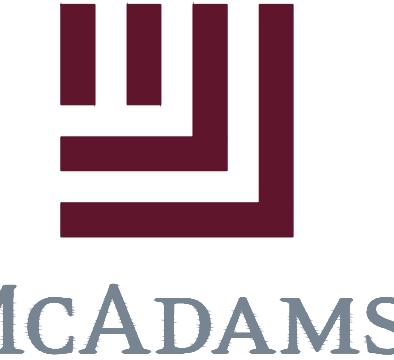
- Centerline
- Stream Creekline
- Floodway
- 100-Year Floodplain
- 500-Year Floodplain
- Creek Bank
- Asphalt Greenway
- Wetland Area
- Boardwalk/Bridge

## GREENWAY



GRAPHIC SCALE  
0 20 40 60 80  
1 inch = 40 ft.

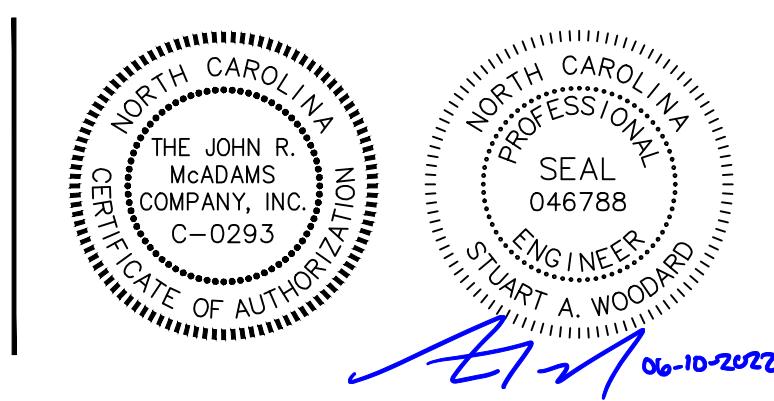
FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



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PHONE: 704.602.3307  
**EMPIRE**

REVISIONS  
NO. DATE  
1 06.10.2022 REVISIONS PER TOWN 1ST REVIEW

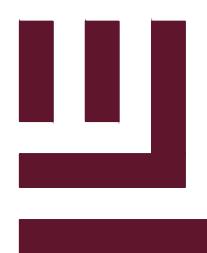


## CAMELLIA GARDENS GREENWAY CONSTRUCTION DRAWINGS 3925 STALLINGS ROAD TOWN OF HARRISBURG, NORTH CAROLINA, 28075

PLAN INFORMATION  
PROJECT NO. SHH-18020  
FILENAME SHH18020-P4-Greenway  
CHECKED BY SAW  
DRAWN BY BPK  
SCALE 1"=40'1"=4'  
DATE 03.24.2022

PLAN AND PROFILE  
CAMELLIA GARDENS GREENWAY  
STA. 44+00 THRU STA. 51+71.56

**C5.04**



**McADAMS**

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PHONE: 704.602.3307

**EMPIRE**

**CAMELLIA GARDENS GREENWAY**  
CONSTRUCTION DRAWINGS  
3925 STALLINGS ROAD  
HARRISBURG, NORTH CAROLINA, 28075



**REVISIONS**  
NO. DATE  
1 06.10.2022 REV PER TOWN COMMENTS

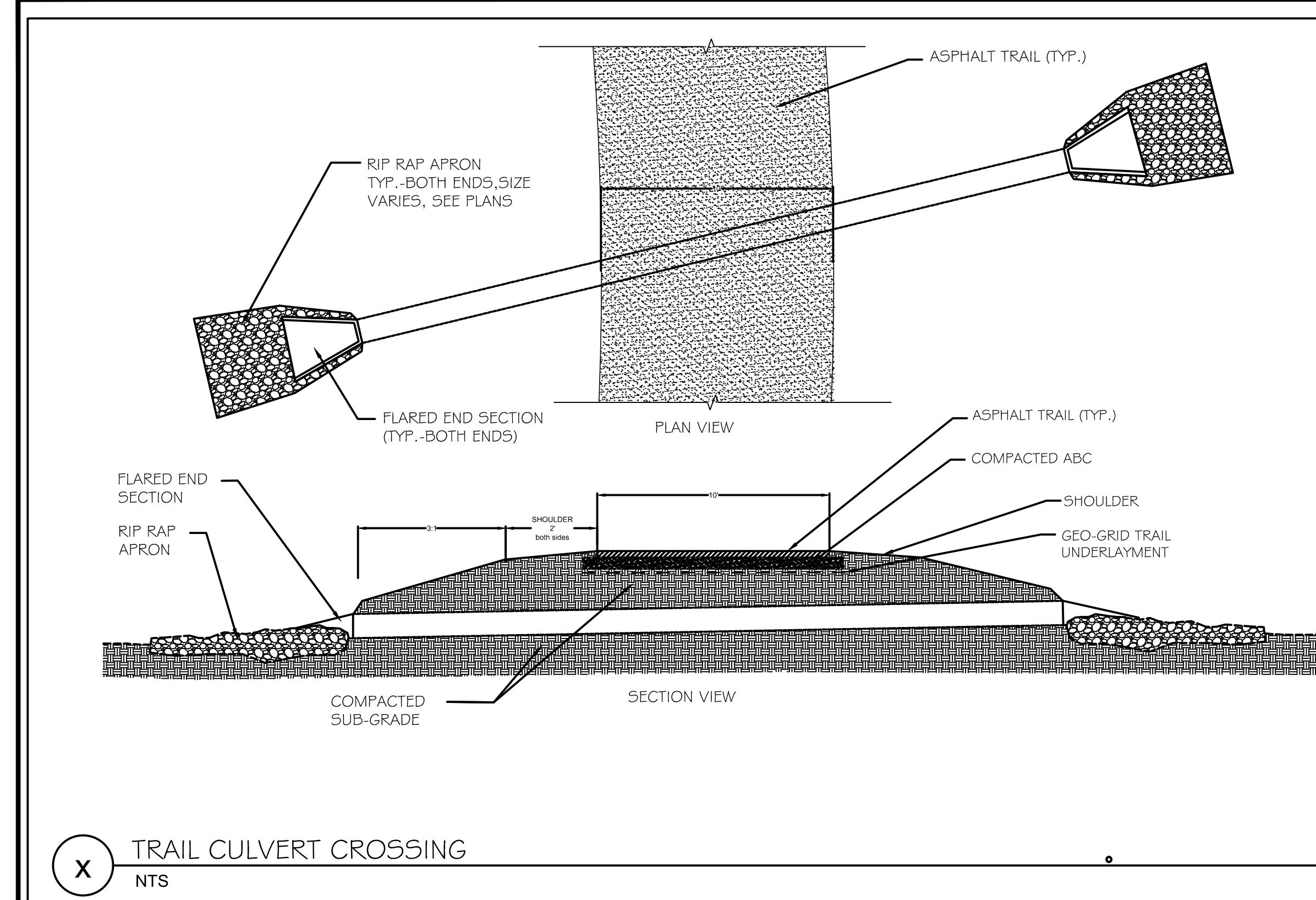
**PLAN INFORMATION**

PROJECT NO. SHH-18020  
FILENAME SHH18020-D1-Greenway  
CHECKED BY SAW  
DRAWN BY BPK  
SCALE N/A  
DATE 03.24.2022

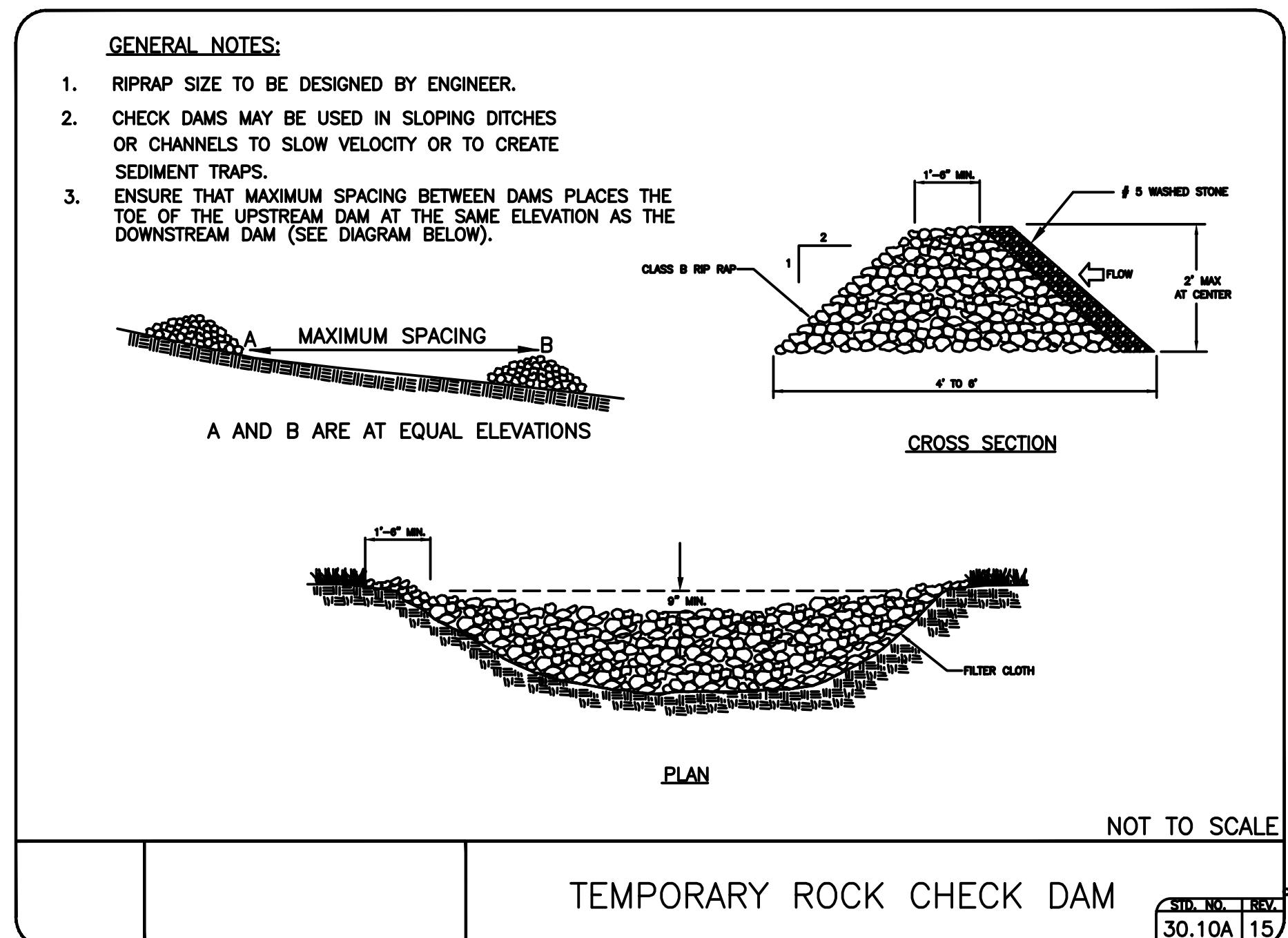
**SHEET**

**GREENWAY DETAILS**

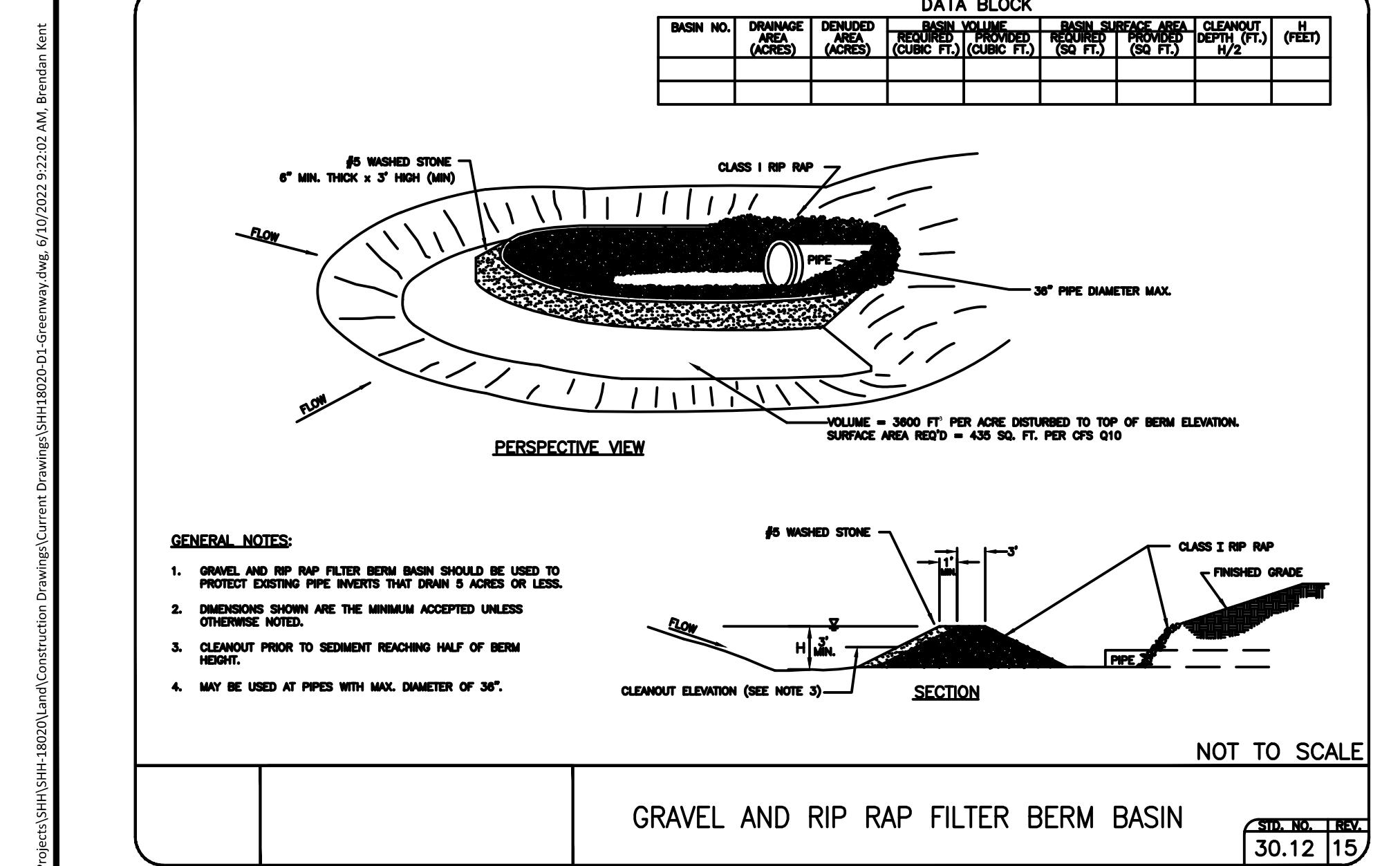
**C8.00**



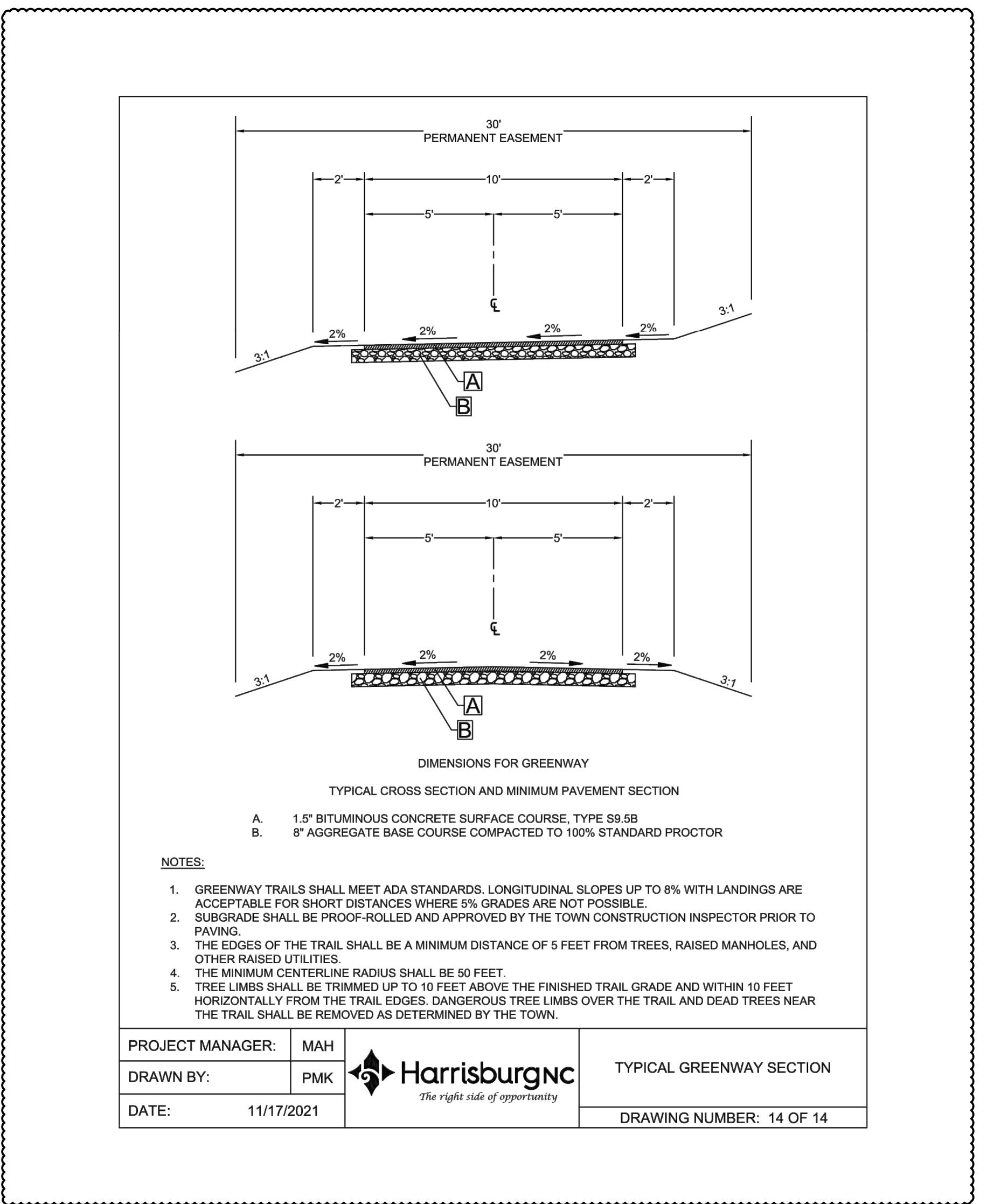
TRAIL CULVERT CROSSING  
NTS



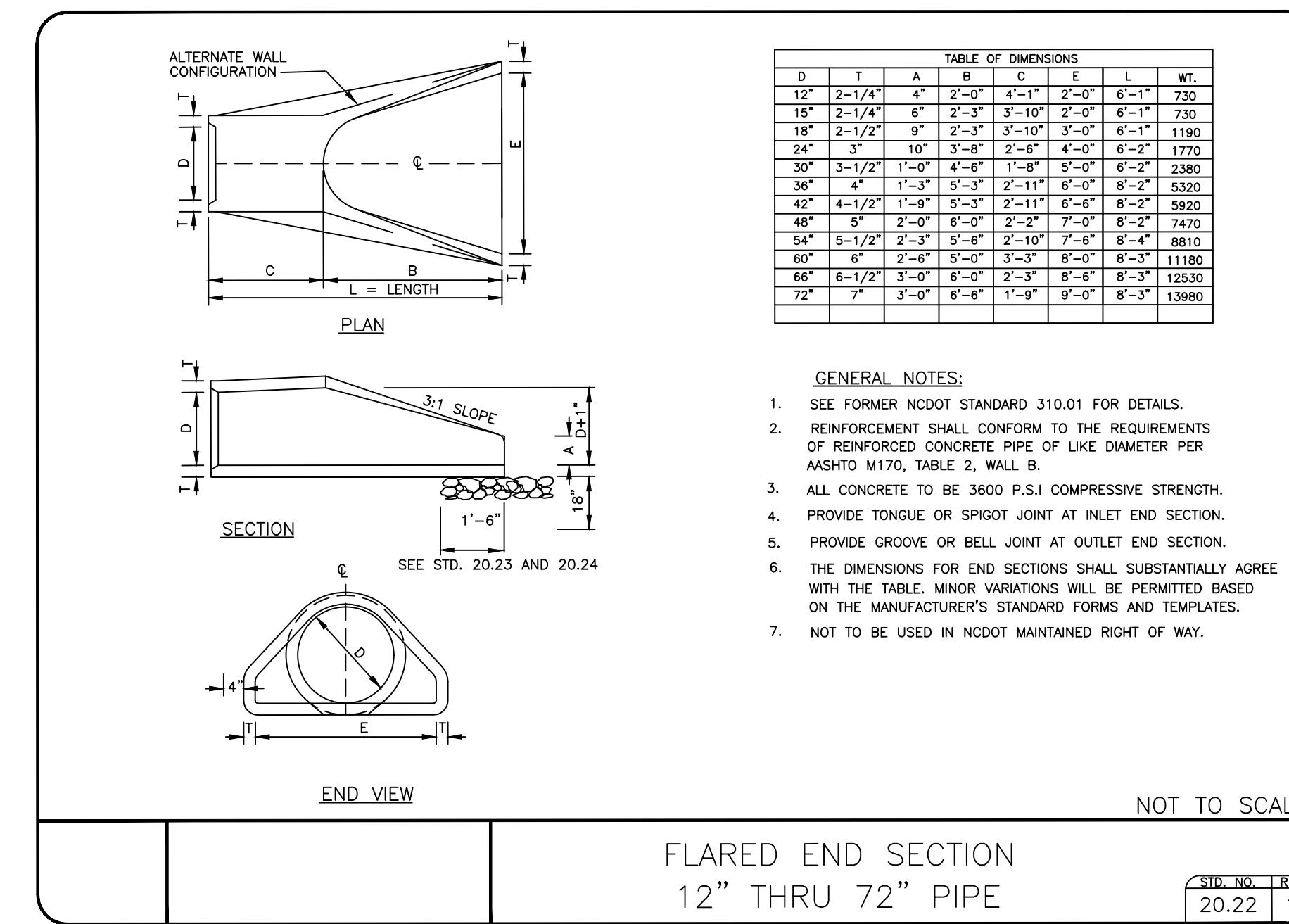
TEMPORARY ROCK CHECK DAM



NOT TO SCALE

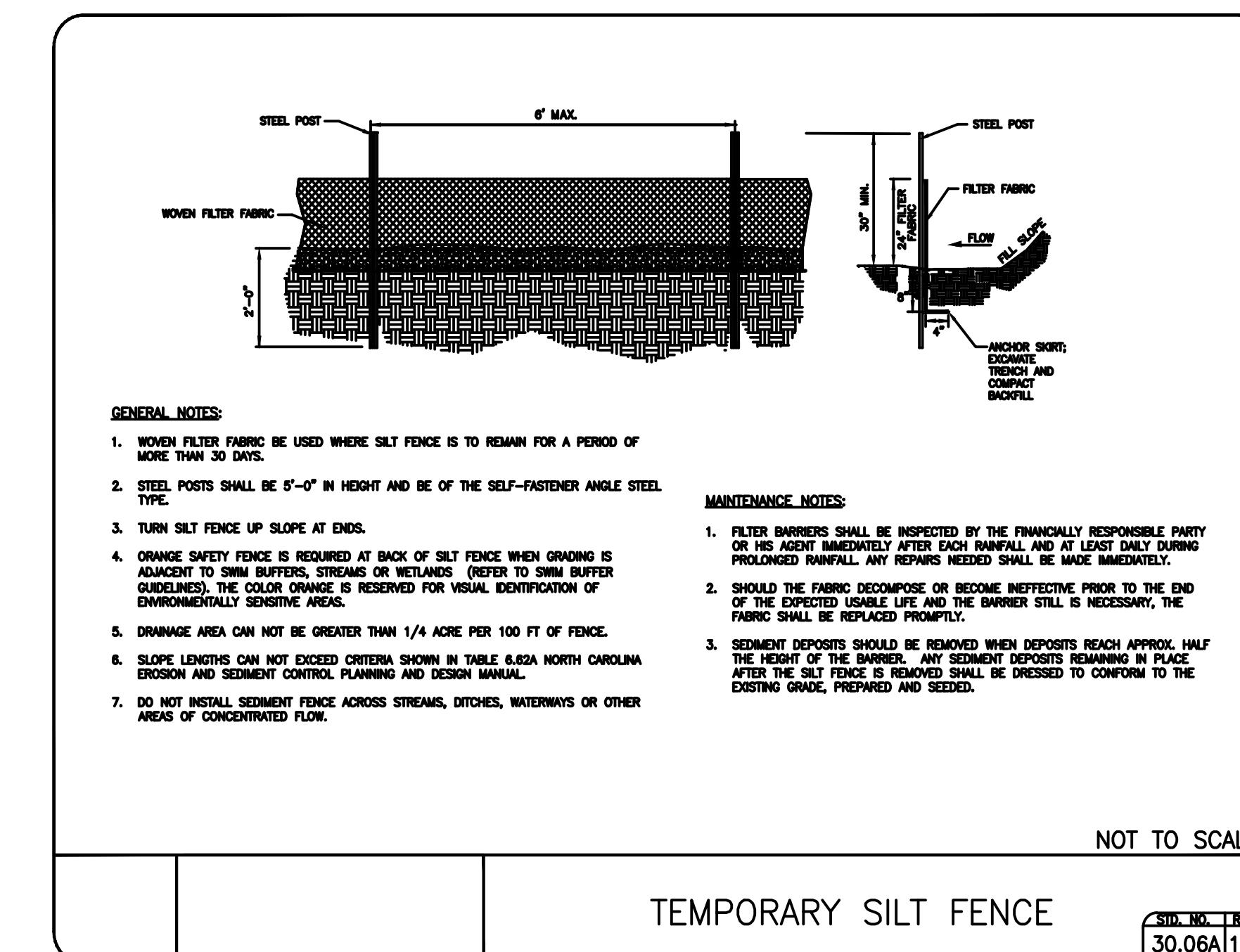


TYPICAL CROSS SECTION AND MINIMUM PAVEMENT SECTION  
NOTES:  
1. GREENWAY TRAILS SHALL MEET ADA STANDARDS. LONGITUDINAL SLOPES UP TO 8% WITH LANDINGS ARE ACCEPTABLE FOR SHORT DISTANCES WHERE 5% GRADES ARE NOT POSSIBLE.  
2. SUBGRADE SHALL BE PROOF-ROLLED AND APPROVED BY THE TOWN CONSTRUCTION INSPECTOR PRIOR TO PAVING.  
3. THE EDGES OF THE TRAIL SHALL BE A MINIMUM DISTANCE OF 5 FEET FROM TREES, RAISED MANHOLES, AND OTHER RAISED UTILITIES.  
4. THE MINIMUM CENTERLINE RADIUS SHALL BE 50 FEET.  
5. TREE LIMBS SHALL BE TRIMMED UP TO 10 FEET ABOVE THE FINISHED TRAIL GRADE AND WITHIN 10 FEET HORIZONTALLY FROM THE TRAIL EDGES. DANGEROUS TREE LIMBS OVER THE TRAIL AND DEAD TREES NEAR THE TRAIL SHALL BE REMOVED AS DETERMINED BY THE TOWN.  
PROJECT MANAGER: MAH DRAWN BY: PMK HarrisburgNC The right side of opportunity TYPICAL GREENWAY SECTION  
DATE: 11/17/2021 DRAWING NUMBER: 14 OF 14



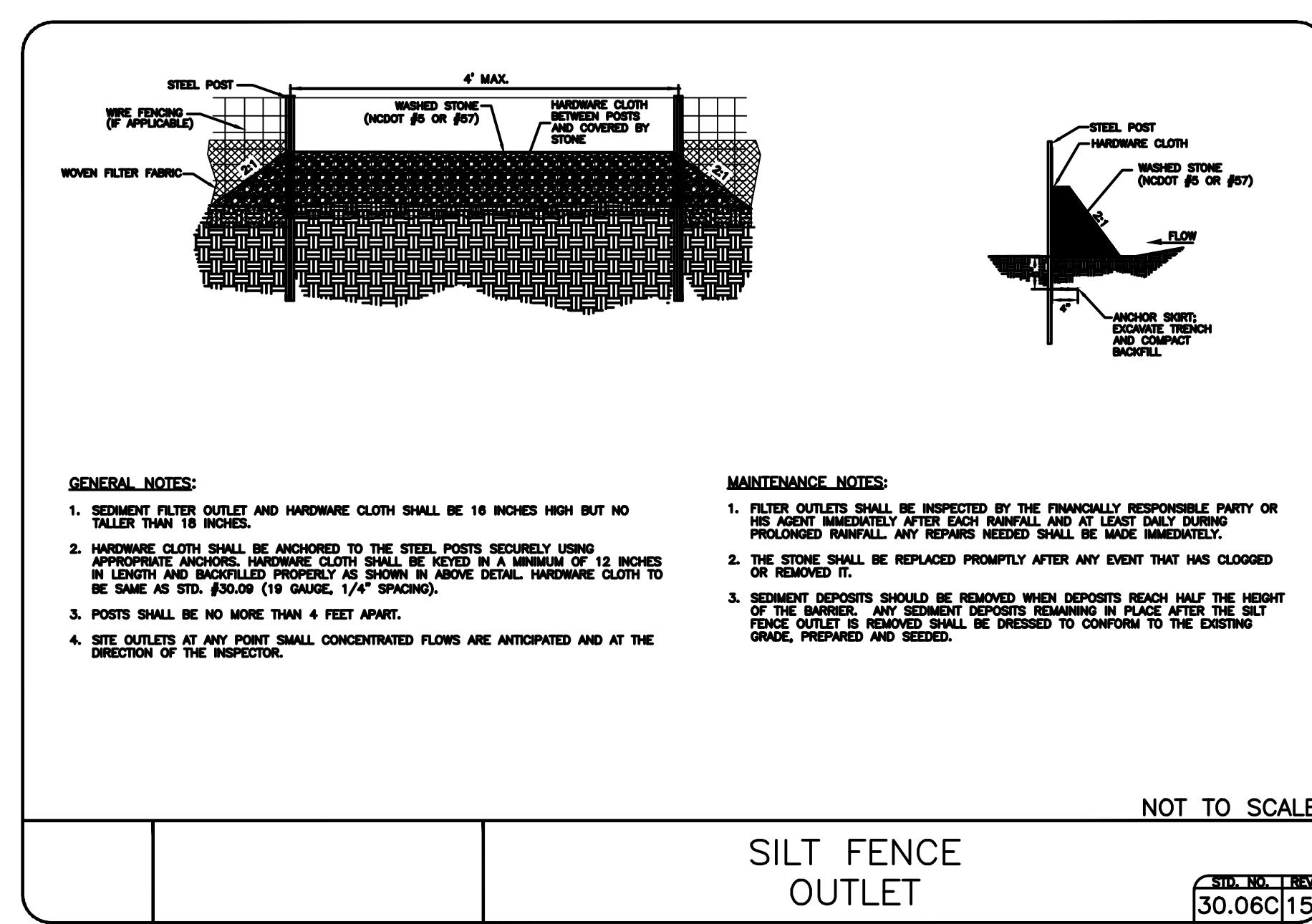
FLARED END SECTION  
12" THRU 72" PIPE

STD. NO. REV.  
20.22 1



TEMPORARY SILT FENCE

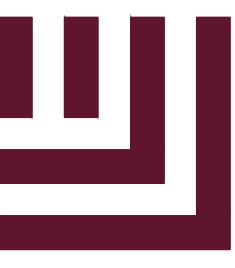
STD. NO. REV.  
30.06A 15



SILT FENCE  
OUTLET

STD. NO. REV.  
30.06C 15

FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



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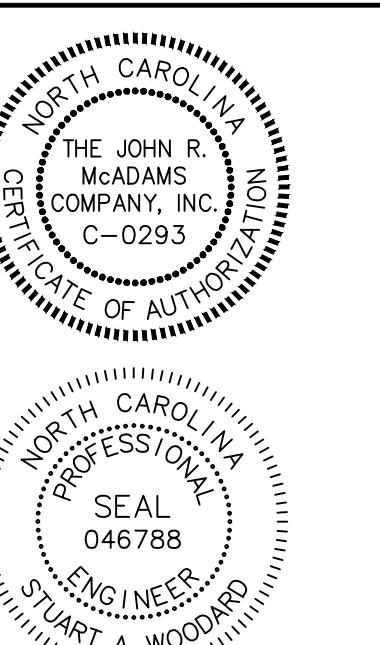
www.mcadamsco.com

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CHARLOTTE, NORTH CAROLINA 28226  
PHONE: 704.602.3307

EMPIRE

CAMELLIA GARDENS GREENWAY  
CONSTRUCTION DRAWINGS  
3925 STALLINGS ROAD  
HARRISBURG, NORTH CAROLINA, 28075



REVISIONS  
06-16-2022

NO. DATE

1 06.10.2022 REV PER TOWN COMMENTS

PLAN INFORMATION

PROJECT NO. SHH-18020

FILENAME SHH18020-D1-Greenway

CHECKED BY SAW

DRAWN BY BPK

SCALE N/A

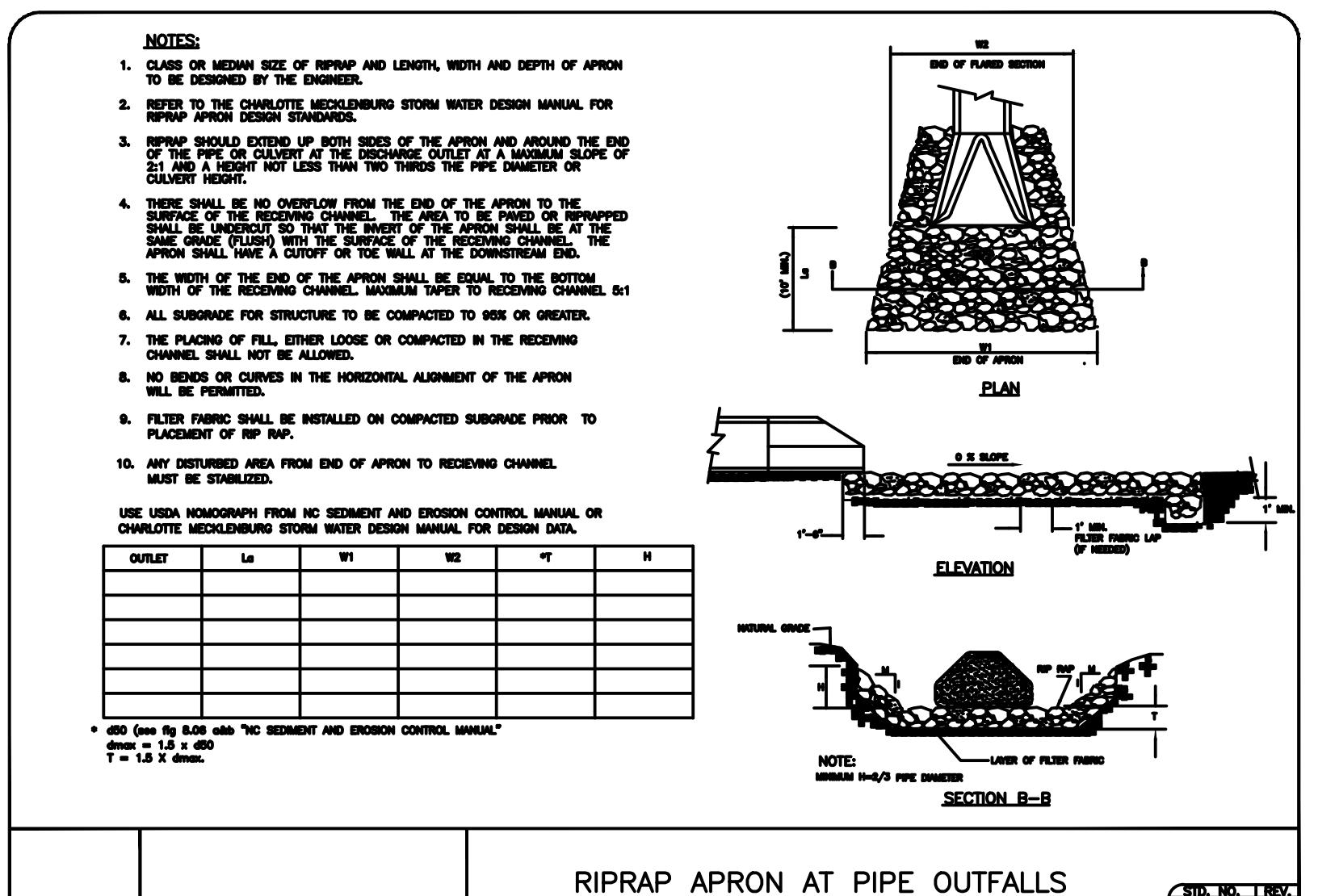
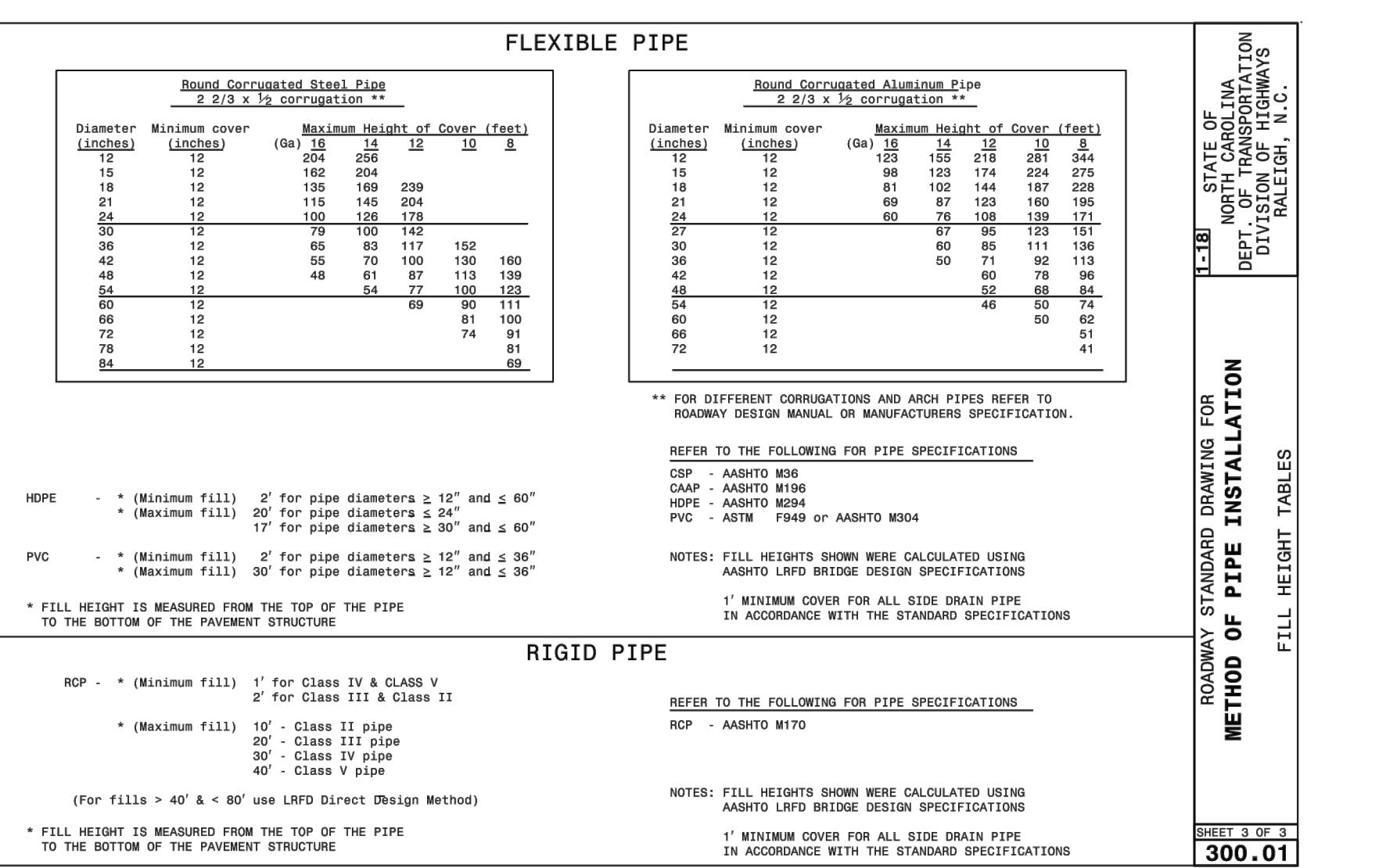
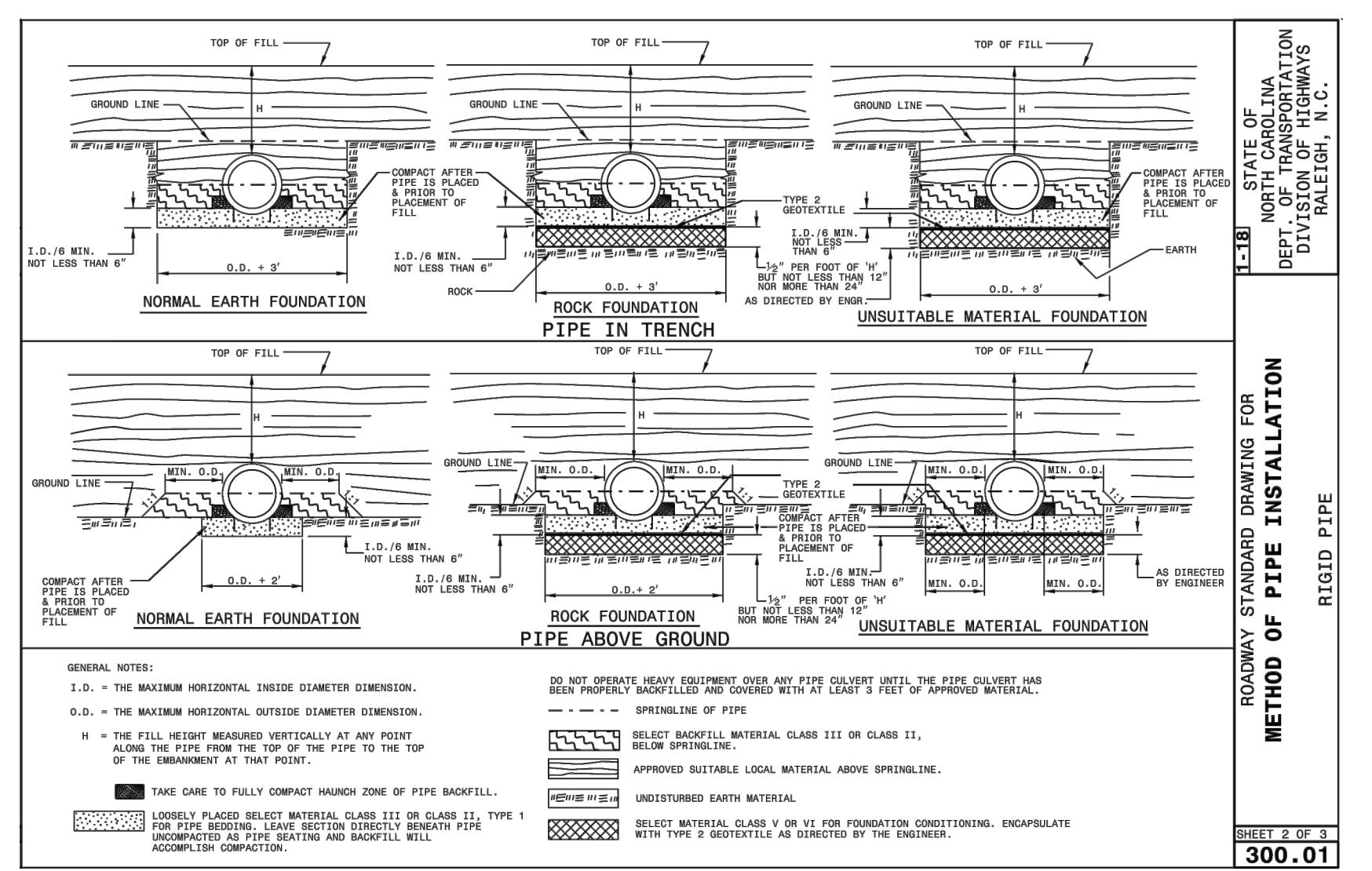
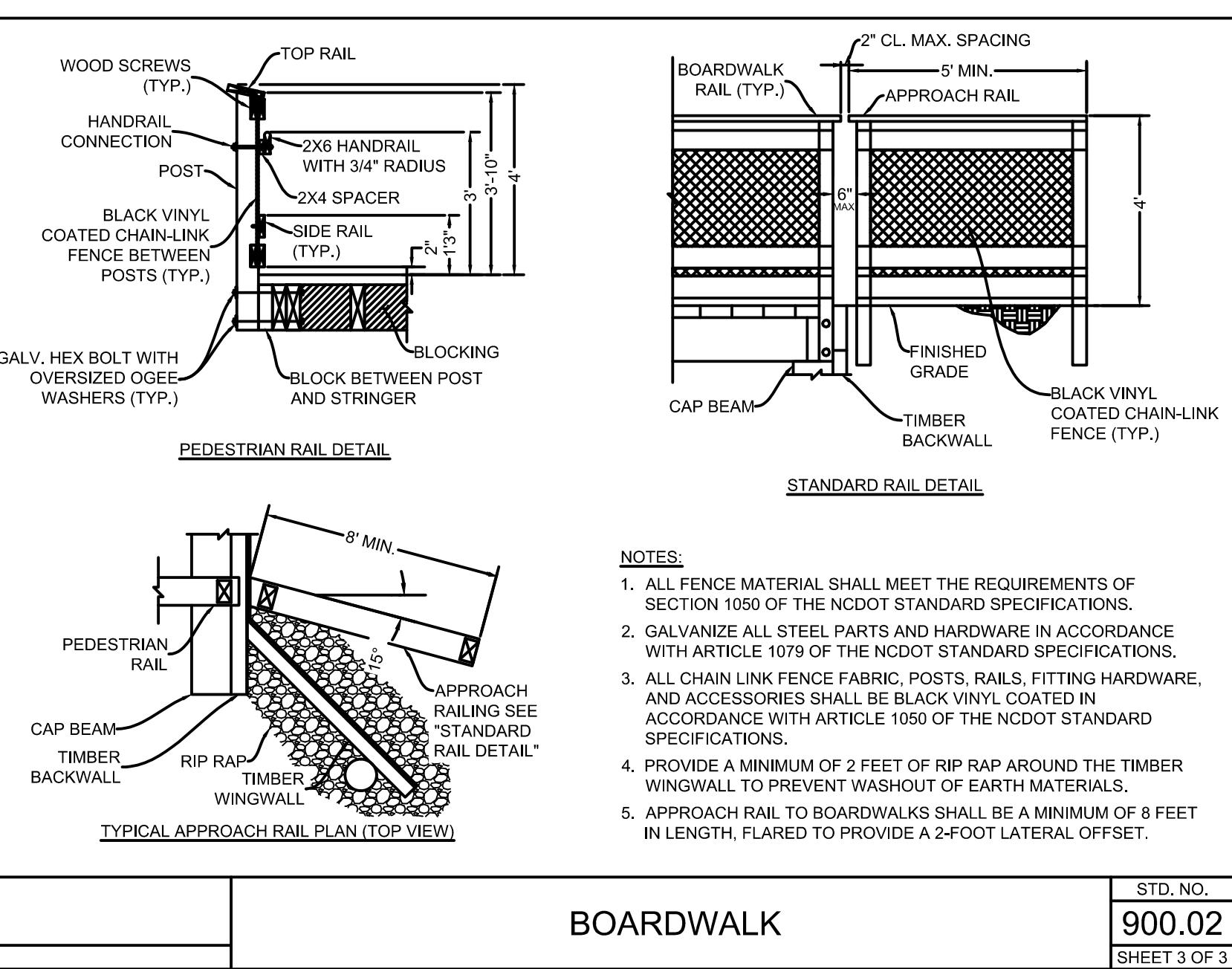
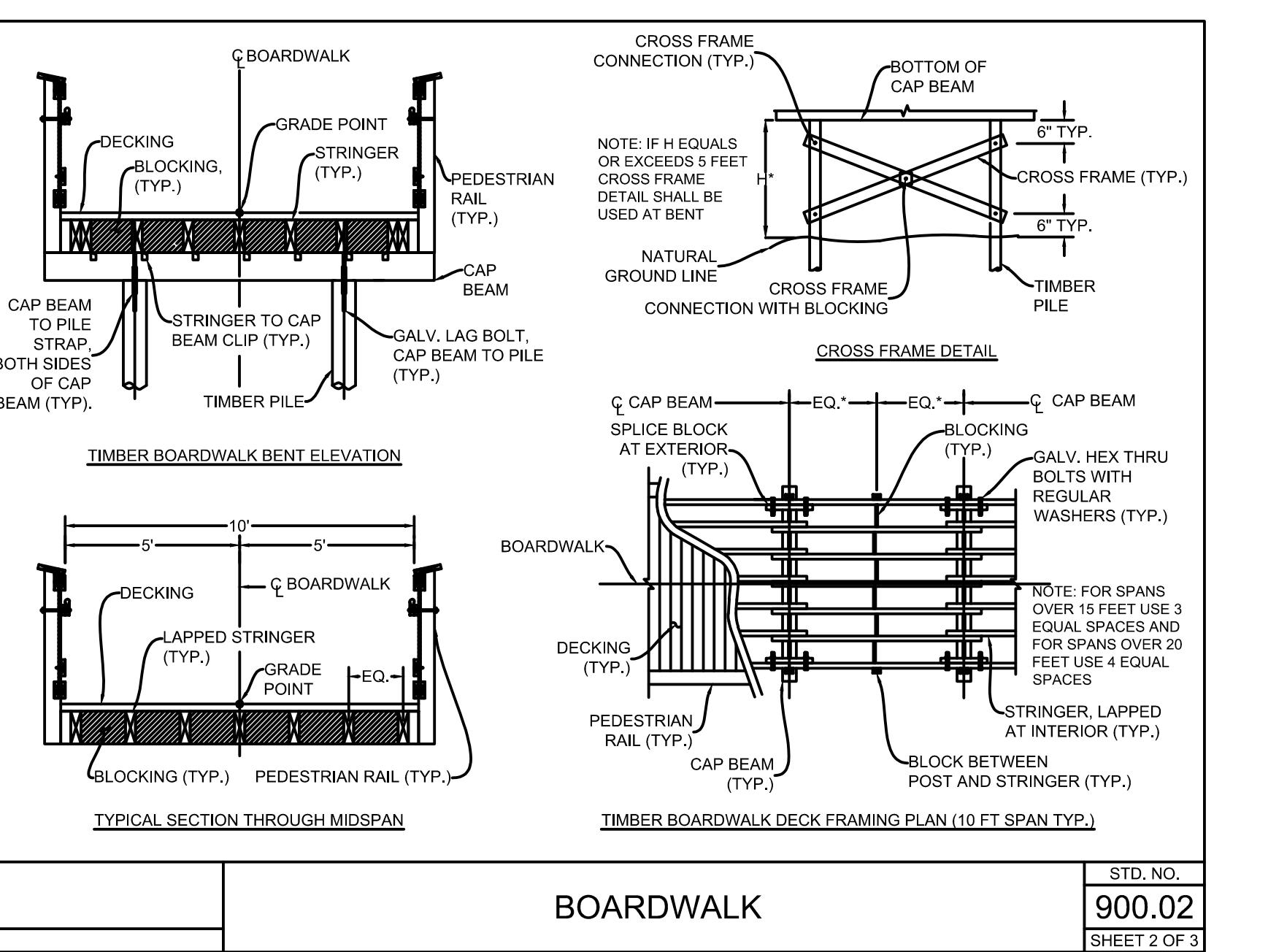
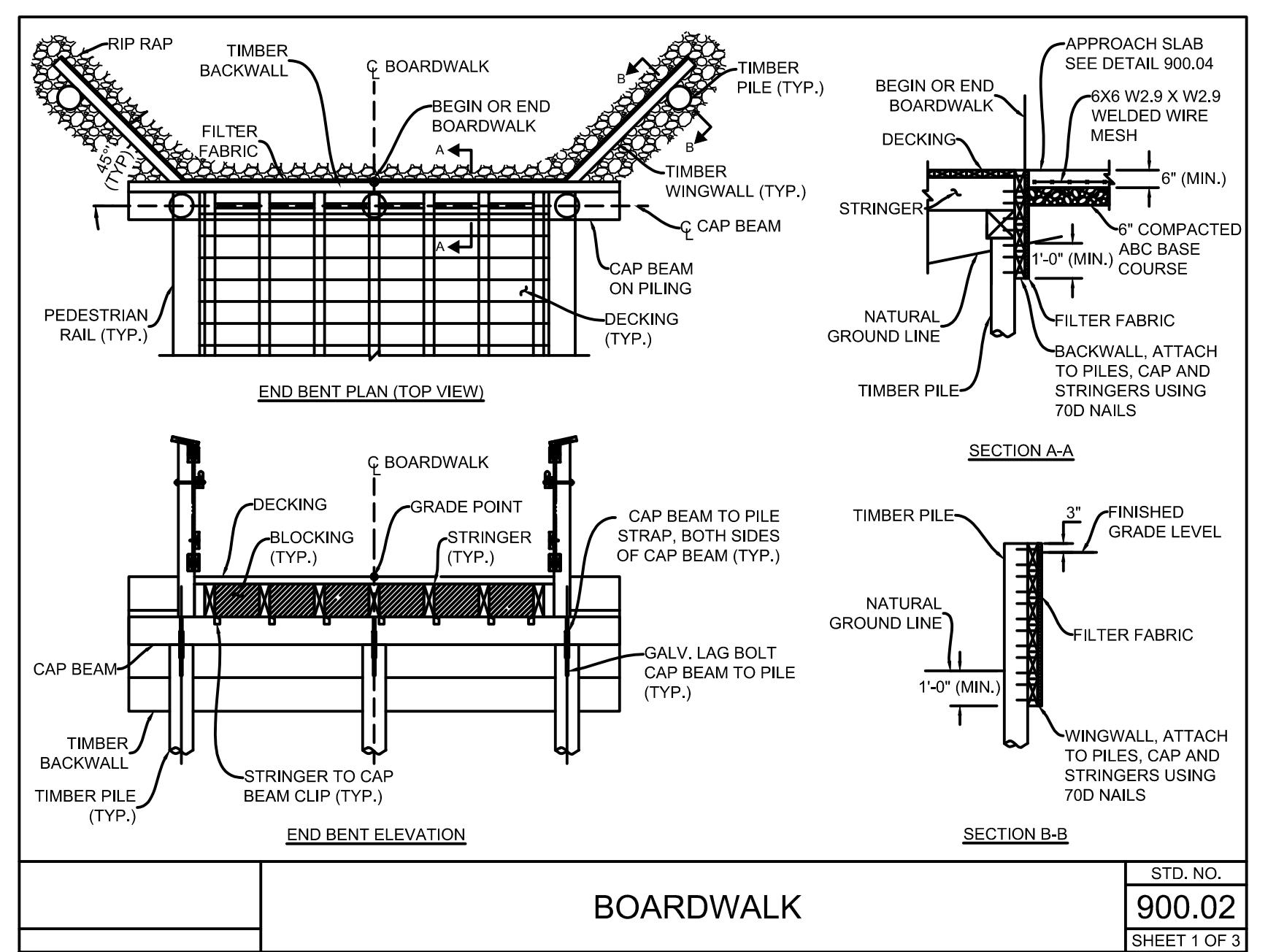
DATE 03.24.2022

SHEET

GREENWAY DETAILS

C8.01

FINAL DRAWING - NOT RELEASED FOR CONSTRUCTION



Drawn by: Richard M. Koch  
Mail to: Town of Harrisburg  
Post Office Box 100  
Harrisburg, NC 28075

STATE OF NORTH CAROLINA

BACK CREEK  
GREENWAY EASEMENT

COUNTY OF CABARRUS

This RIGHT OF WAY and GREENWAY EASEMENT is made and entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2023, by and between CABARRUS COUNTY BOARD OF EDUCATION and CABARRUS COUNTY (collectively "GRANTOR"), and the TOWN OF HARRISBURG, North Carolina, a North Carolina municipal corporation (the "TOWN").

FOR AND IN CONSIDERATION of One Dollar (\$1.00) and other good and valuable consideration in hand paid by TOWN to GRANTOR, the receipt of which is hereby acknowledged, GRANTOR does hereby give, grant and convey to TOWN, its successors and assigns, a perpetual Easement for a greenway, 30 feet in width, across the GRANTOR'S property, known as Hickory Ridge Middle School and High School, as contained in PINs 5507828255, 5517015236, 5517213800 and 5517228820, and as shown in the description of BACK CREEK GREENWAY for the TOWN prepared by The John R. McAdams Company, which document is attached as Exhibit A and incorporated by reference. This easement permits the TOWN to go in and upon such real property of GRANTOR for the purposes described below.

GRANTOR further grants and conveys to TOWN the right to construct, maintain and operate in, upon and through such premises a greenway, including all necessary appurtenances, together with the right at all times of ingress, egress and regress, and the right of entry upon such premises for the purposes of inspecting such facilities, making repairs or alterations, and/or clearing obstructions that may, in the opinion of the TOWN, endanger or interfere with the proper maintenance and operation of the same.

TO HAVE AND TO HOLD the aforesaid Easement unto the TOWN, its successors and assigns forever.

The GRANTOR, for GRANTOR and GRANTOR'S successors and assigns, covenants with the TOWN, its successors and assigns, that the GRANTOR is seized of the premises in fee simple, that such premises are free from all encumbrances, that GRANTOR has good right and lawful authority to convey the same; and that GRANTOR will warrant and defend the premises unto the TOWN, its successors and assigns, against the lawful claims of all persons.

IN WITNESS, GRANTOR has executed and sealed this document the day and year first written.

GRANTOR:

CABARRUS COUNTY BOARD OF EDUCATION

BY: \_\_\_\_\_  
CHAIR

CABARRUS COUNTY

BY: \_\_\_\_\_  
CHAIR, BOARD OF COMMISSIONERS

STATE OF NORTH CAROLINA  
COUNTY OF CABARRUS

I, \_\_\_\_\_, a notary public in and for said County and State, do hereby certify that \_\_\_\_\_, Chair of the Cabarrus County Board of Education, personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Notary Public

STATE OF NORTH CAROLINA  
COUNTY OF CABARRUS

I, \_\_\_\_\_, a notary public in and for said County and State, do hereby certify that \_\_\_\_\_, Chair of the Board of Commissioners of Cabarrus County, personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

WITNESS my hand and notarial seal, this \_\_\_\_\_ day of \_\_\_\_\_, 2023.

\_\_\_\_\_  
Notary Public

STATE OF NORTH CAROLINA  
CABARRUS COUNTY

The foregoing certificate(s) of \_\_\_\_\_  
Notary Public of Cabarrus County, is/are certified to be correct according to law. Filed for registration on the \_\_\_\_\_ day of \_\_\_\_\_, 2023, at \_\_\_\_\_ o'clock \_\_\_\_\_ M, and duly recorded in the office of the Register of Deeds of Cabarrus County, North Carolina.

Register of Deeds  
Cabarrus County  
BY: \_\_\_\_\_

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

---

**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

County Manager - Fiscal Year 2023 Funding Re-appropriations

**BRIEF SUMMARY:**

Funds budgeted in the prior fiscal year (FY23) need to be carried over to fiscal year (FY24) for use. These funds were not used in FY23 for a variety of reasons. Carrying over these funds from FY23 to FY24, through an appropriation of fund balance or revenue for reimbursement grants, is required to complete purchases as planned.

**REQUESTED ACTION:**

Motion to amend the Fiscal Year 2023-2024 Budget Ordinance to allow the carry-over of unspent funds as outlined on the attached re-appropriation list from the 2022-2023 Budget Ordinance and authorize the County Budget Director to prepare the associated Budget Amendment.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Rosh Khatri, Budget Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Re-appropriation Request Fy23 to FY24
- Budget Amendment

Department	Project/Grant	Account Information Org-Object-Proj FY23 GL Codes	Account Information Org-Object-Proj FY24 GL Codes	Account Description	Amount	Justification (including impact if funding is not carried forward)
<b>GENERAL GOVERNMENT</b>						
ITS	ERP Upgrade project	00191810-9570	00191810-9570	Services Contracts	\$ 2,000,000.00	This project is still developing. Funding was recently allocated.
Non-Departmental	Referral & Sign-On Bonus Funds	00191910-9124	00191910-9124	Sign On/Referral Bonuses	\$ 300,000.00	Re-appropriate Referral and Sign-On Bonus funds approved by BOC 5-15-2023
					\$ 2,300,000.00	
<b>PUBLIC SAFETY</b>						
Animal Shelter	Donations for Animal Care	00162145-6805	00192145-9628	Donation Expenditures	\$ 13,000.00	These donations are being utilized to treat wounded and/or abandoned animals which do not met the parameters for treatment by the County Animal Shelter; this amount will likely be \$ 15,000 to \$ 16,000 by Year End
Animal Shelter	Donations for Animal Care	00192145-9605	00192145-9628	Donation Expenditures	\$ 15,450.00	These are the remainder from the Discretionary Donation Funds transferred into Consultants from Donations in a prior year. These donations are being utilized to treat wounded and/or abandoned animals which do not met the parameters for treatment by the County Animal Shelter
Animal Control	Upfits for A/C Vehicles	00192140-9863	00192140-9863	Motor Vehicles	\$ 35,021.00	Upfits for A/C Vehicles ordered but not yet delivered.
Sheriff	Upfits for Sheriff's Vehicles	00192110-9863	00192110-9863	Motor Vehicles	\$ 316,981.15	Upfits for Sheriff's Vehicles ordered but not yet delivered.
Sheriff	Sheriff's Vehicles for SROS (REDUCED 5/23/2023)	00192110-9863	00192110-9863	Motor Vehicles	\$ 24,430.00	Vehicles for 2 SROS, EXPENSE for UPFITS.
Sheriff	Patrol Suite Cubicles	00192110-9860	00192110-9860	Equipment & Furniture	\$ 142,000.00	
Sheriff	BOMB TRUCK	00192110-9860-BOMB	00192110-9860-BOMB	Bomb Equipment	\$ 18,638.70	These funds are required to finish outfitting the Bomb Truck when it is delivered.
SHERIFF	HUMAN TRAFFICKING	00162110-6255-HTRAF	00162110-6255-HTRAF	NC DEPT OF PUBLIC SAFETY	(\$841,067.00)	TO BUDGET THE BALANCE OF HUMAN TRAFFICKING GRANT FUNDS RECEIVED AND NOT SPENT. GRANT FUNDS WERE RECEIVED IN ADVANCE AND REVENUE WILL BE RECOGNIZED
SHERIFF	HUMAN TRAFFICKING	00192110-9101-HTRAF	00192110-9101-HTRAF	Sal & Wags	\$ 513,463.00	TO BUDGET BALANCE OF HUMAN TRAFFICKING GRANT EXPENDITURES
SHERIFF	HUMAN TRAFFICKING	00192110-9201-HTRAF	00192110-9201-HTRAF	SS	\$ 31,957.00	THIS IS A FIVE YEAR GRANT AND EXPENDITURES WERE NOT BUDGETED AS
SHERIFF	HUMAN TRAFFICKING	00192110-9202-HTRAF	00192110-9202-HTRAF	Medicare	\$ 7,472.00	PART OF FY 2024 BUDGET
SHERIFF	HUMAN TRAFFICKING	00192110-9205-HTRAF	00192110-9205-HTRAF	GH Ins	\$ 103,357.00	THERE IS NOT A COUNTY MATCH AND UNSPENT FUNDS WILL BE BUDGETED
SHERIFF	HUMAN TRAFFICKING	00192110-9206-HTRAF	00192110-9206-HTRAF	Vision	\$ 241.00	FISCAL YEAR
SHERIFF	HUMAN TRAFFICKING	00192110-9207-HTRAF	00192110-9207-HTRAF	Life Ins	\$ 324.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9210-HTRAF	00192110-9210-HTRAF	Retirement	\$ 81,255.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9230-HTRAF	00192110-9230-HTRAF	Work Comp	\$ 10,863.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9235-HTRAF	00192110-9235-HTRAF	Def C 401k	\$ 25,672.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9340-HTRAF	00192110-9340-HTRAF	Uniforms	\$ 8,402.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9342-HTRAF	00192110-9342-HTRAF	Minor Tech	-	
SHERIFF	HUMAN TRAFFICKING	00192110-9420-HTRAF	00192110-9420-HTRAF	Cell Phone	\$ 2,000.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9610-HTRAF	00192110-9610-HTRAF	Travel&Edc	\$ 16,977.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9640-HTRAF	00192110-9640-HTRAF	Ins & Bond	\$ 11,520.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9862-HTRAF	00192110-9862-HTRAF	Technology	\$ 24,088.00	
SHERIFF	HUMAN TRAFFICKING	00192110-9863-HTRAF	00192110-9863-HTRAF	Motor Vehi	\$ 3,476.00	
EMS		00192730-9863	00192730-9863	MOTOR VEHICLES	\$ 70,000.00	Ambulances have a very long lead time since Co-vid. Purchase Orders will need to be rolled over for FY24 along with these funds which cover tag, taxes and any other cost associated with getting the vehicle ready for use.

Department	Project/Grant	Account Information Org-Object-Proj FY23 GL Codes	Account Information Org-Object-Proj FY24 GL Codes	Account Description	Amount	Justification (including impact if funding is not carried forward)
Emergency Management	Ongoing projects	00192710-9431	00192710-9431	McGuire	\$ 8,662.86	Funds provided by Duke Energy to support support training and the purchase of equipment and supplies for the congregate reception center as detailed in the McGuire Nuclear Station Plan. Historically this account is re-appropriated each year as funds are not awarded on the county's fiscal year schedule.
Emergency Management	Ongoing projects	00192710-9482	00192710-9482	Emergency Management Performance Grant	\$ 3,682.94	Grant funds provided to be spent on allowable equipment as listed in the Authorized Equipment List (AEL) under the terms of the EMPG. Historically this account is re-appropriated each year as funds are not awarded on the county's fiscal year schedule.
Emergency Management	LEPC Lunch and Learn	00192710-9636	00192710-9636-TIER2	Tier II Grant	\$ 1,000.00	Period of performance on this grant is from January 1, 2023 to January 31, 2024. Funds will need to be re-appropriated in order to fund the lunch and learn meetings for the LEPC during 2023.
Emergency Management	Prime mover	00192710-9395-DPR7	00192710-9395-DPR7	Homeland Security DPR-7 grant	\$ 65,000.00	Period of performance on this grant is from September 1, 2022 to February 28, 2025. Funds will need to be re-appropriated to finance purchase of a prime mover.
Courts	Building Rental	00192210-9401-BM	00192210-9401-BM	Building and Equipment ental	\$ 14,295.00	Leasing Warehouse at Gibson Mill for the state and county furniture from the courthouse as we transition from the 1975 to the 2023 courthouse
					\$ 728,161.65	
<b>ECONOMIC AND PHYSICAL DEVELOPMENT</b>						
Planning	School Capacity Planning Modeling Project	00193230-9605	00193230-9605	Consultants	\$ 20,000.00	Phase one of project in progress and will not be complete prior to end of fiscal year. Modeling update can not occur until phase one of project is completed by outside agency.
Community Development	Duke Energy Helping Homes Fund	00193250-9493-DECHS	00193250-9493-DECHS	Health & Safety materials & contract labor	\$ 26,696.00	Funds for this program are allocated on a calendar year basis and are available through December 31st, 2023.
Community Development	Duke Energy Helping Homes Fund	00193250-9493-DECHV	00193250-9493-DECHV	HVAC & Appliance materials & contract labor	\$ 13,265.00	Funds for this program are allocated on a calendar year basis and are available through December 31st, 2023.
Community Development	BCBS Healthy Homes Initiative	00193250-9493-BCBS	00193250-9493-BCBS	Health & Safety materials & contract labor	\$ 7,000.00	Funds for this program are allocated on a calendar year basis and are available through December 31st, 2023.
Soil & Water	Fencing for dock at Clarke Creek for safety when easement property opens to public at city park opening.	00193270-9445	00193270-9445	Purchased services	\$ 10,000.00	We have not gotten access to the property through the new city park or neighboring property.
<b>ECONOMIC AND PHYSICAL DEVELOPMENT TOTAL</b>					\$ 76,961.00	
<b>HUMAN SERVICES</b>						
DHS/Children's Services	Special Needs Kids	00195630-9332	00195630-9332	enhance Adoption Svs program	\$ 251,247.00	These funds are awarded annually and counties are allowed to carry over funds from year to year until spent. Balance @05.05.2023 = \$252,746.58 - \$1,500 = \$251,247
DHS/Children's Services	Triple P funds	00195630-94003	00195630-94003	Triple P Funding	\$ 3,514.63	The positive parenting program provides parenting education/intervention and the funds are carried over until spent.
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00195660-944501-CHOR	00195660-944501-CHOR	CCOG ARPA funding	\$ 75,000.00	In Home services - Grant contract runs from 07/2022 thru 09/2024
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00165660-630101-CHOR	00165660-630101-CHOR	ARPA - Chore Services	\$ (75,000.00)	100% reimbursement through ARMS system for In Home services
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00195660-986001-DTEC	00195660-986001-DTEC	ARPA Equipment funding	\$ 25,000.00	In home services to address social isolation - Grant contract runs from 07/2022 thru 09/2024
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00165660-630101-DTEC	00165660-630101-DTEC	ARPA - Digital Technology Svs	\$ (25,000.00)	100% reimbursement through ARMS system for In Home services
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00165660-630101-VPD	00165660-630101-VPD	ARPA - Volunteer prgm development	\$ (20,000.00)	Volunteer svs - 100% reimbursement through ARMS system for In Home services
DHS/Aging Services	DHS/Aging Services - grant 7/22 thru 9/24	00165660-630101-DTRN	00165660-630101-DTRN	ARPA - Digital Training and programming	\$ (45,000.00)	technology/training - 100% reimbursement through ARMS system for In Home services
Transportation	TRANSPORTATION 5311 GRANT - 22-CT-042	00165240-6312-0488	00165240-6312-0488	5311 CAPITAL GRANT	\$ (98,743.00)	Remaining Federal and State grant revenues not reimbursed in FY 2023 and not budgeted in FY 2024
Transportation	TRANSPORTATION 5311 GRANT - 22-CT-042	00195240-9831-0488	00195240-9831-0488	5311 CAPITAL GRANT	\$ 109,714.00	Remaining Federal, State and Local share of 5311 capital grant funds not spent in FY 23 and not budgeted in FY 2024
Transportation	TRANSPORTATION 5311 GRANT - 23-XX-042	00165240-6312-0488	00165240-6312-0488	5311 CAPITAL GRANT	\$ (504,612.00)	Remaining Federal and State grant revenues not reimbursed in FY 2023 and not budgeted in FY 2024

Department	Project/Grant	Account Information Org-Object-Proj FY23 GL Codes	Account Information Org-Object-Proj FY24 GL Codes	Account Description	Amount	Justification (including impact if funding is not carried forward)
Transportation	TRANSPORTATION 5311 GRANT - 23-XX-042	00195240-9831-0488	00195240-9831-0488	5311 CAPITAL GRANT	\$ 560,680.00	Remaining Federal, State and Local share of 5311 capital grant funds not spent in FY 23 and not budgeted in FY 2024
Cooperative Extension	4-H Cannon Grant	00195410-9356 4HCAN	00195410-9356 4HCAN	Program Supplies	\$ 2,300.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9104 4HCAN	00195410-9104 4HCAN	Temporary Employees	\$ 3,500.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9201 4HCAN	00195410-9201 4HCAN	Social Security	\$ 200.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9202 4HCAN	00195410-9202 4HCAN	Medicare	\$ 195.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9230 4HCAN	00195410-9230 4HCAN	Worker's Comp	\$ 247.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9610 4HCAN	00195410-9610 4HCAN	Travel	\$ 675.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Cooperative Extension	4-H Cannon Grant	00195410-9640 4HCAN	00195410-9640 4HCAN	Insurance & Bonds	\$ 215.00	Grant cycle runs through October. Funds need to be re-appropriated to continue the programs supported by the grant.
Other Human Services	OPIOID FUNDING MATCH FROM VITAL STARATEGIES	00165910-6259-VITAL	00165910-6259-VITAL	GLOBAL GRANT PROGRAM	\$ (70,000.00)	GRANT FUNDS - \$70,000 AWARDED ANNUALLY FOR THREE YEARS. FY24 IS YEAR 2 OF 3. GRANT FUNDS ARE USED TO SUPPLEMENT COUNTY'S COMMITMENT TO ALLOCATE FUNDS FROM OPIOID LITIGATION SETTLEMENTS TOWARD NALOXONE DISTRIBUTION AND SYRINGE SERVICE PROGRAM
Other Human Services	OPIOID FUNDING EXPENDITURES	00195910-9705-VITAL	00195910-9705-VITAL	PUBLIC HEALTH AUTHORITY	\$ 70,000.00	GRANT EXPENDITURES - FUNDS ALLOCATED TO CHA TOWARD NALOXONE DISTRIBUTION AND SYRINGE SERVICE PROGRAM.
DHS	Emergency Assistance	00195615-9461-232-1	00195615-9461-232-1	AFDC Emergency Assistance	\$ 78,872.12	Would like to carry forward the remaining balance. Funds were not used in full due to PHE waivers being in place, along with ERAP and LIHWAP which helped offset County costs.
<b>HUMAN SERVICES TOTAL</b>					<b>\$ 343,004.75</b>	
<b>CULTURE AND RECREATION</b>						
Active Living & Parks	Fish Stocking After Dam Repair	00198140-9357 FLP	00198140-9357 FLP	Park Operation Supplies	\$ 21,000.00	Restocking of Frank Liske Park lake after regulated dam repairs. Delay of repairs, lower water level and higher temperatures has placed a need to stock the lake in the Fall/Winter of FY24.
Active Living & Parks		00198140-9605	00198140-9605	Consultant	\$ 202,500.00	Department received funding at the April BOC regular meeting to update the Comprehensive Master Plan. These funds will not be encumbered in a contract prior to the end of the FY.
<b>CULTURE AND RECREATION TOTAL</b>					<b>\$ 223,500.00</b>	
<b>OVERALL GRAND TOTAL</b>						<b>\$ 3,671,627.40</b>

## Budget Revision/Amendment Request

Date:  Amount:

Dept. Head:  Department:

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

Funds budgeted in fiscal year 23 need to be carried over to fiscal year 24 for use. These funds were not used in FY23 for a variety of reasons. Carrying- over these funds from FY23 to FY24, through an appropriation of fund balance or revenue for reimbursement grants, is required to complete purchases as planned.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
001	9	1810-9570	Services Contracts	\$ -	\$ 2,000,000.00		\$ 2,000,000.00
001	6	1810-6901	Fund Balance Appropriated	\$ -	\$ 2,000,000.00		\$ 2,000,000.00
001	9	1910-9124	Sign On/ Referral Bonus	\$ -	\$ 300,000.00		\$ 300,000.00
001	6	1910-6901	Fund Balance Appropriated	\$ -	\$ 300,000.00		\$ 300,000.00
001	9	2145-9628	Donations Expenditures	\$ -	\$ 28,450.00		\$ 28,450.00
001	6	2145-6901	Fund Balance Appropriated	\$ -	\$ 28,450.00		\$ 28,450.00
001	9	2140-9863	Motor Vehicles	\$ 119,500.00	\$ 35,021.00		\$ 154,521.00
001	6	2140-6901	Fund Balance Appropriated	\$ -	\$ 35,021.00		\$ 35,021.00
001	9	2110-9863	Motor Vehicles	\$ 1,543,150.00	\$ 416,981.15		\$ 1,960,131.15
001	9	2110-9860	Equipment & Furniture	\$ 58,000.00	\$ 142,000.00		\$ 200,000.00
001	9	2110-9860-BOMB	Bomb Equipment	\$ -	\$ 18,638.70		\$ 18,638.70
001	6	2110-6901	Fund Balance Appropriated	\$ -	\$ 577,619.85		\$ 577,619.85
001	9	2110-9101-HTRAF	Salaries & Wages	\$ -	\$ 513,463.00		\$ 513,463.00
001	9	2110-9201-HTRAF	Social Security	\$ -	\$ 31,957.00		\$ 31,957.00
001	9	2110-9202-HTRAF	Medicare	\$ -	\$ 7,472.00		\$ 7,472.00
001	9	2110-9205-HTRAF	Group Hospital Insurance	\$ -	\$ 103,357.00		\$ 103,357.00
001	9	2110-9206-HTRAF	Vision	\$ -	\$ 241.00		\$ 241.00
001	9	2110-9207-HTRAF	Life Insurance	\$ -	\$ 324.00		\$ 324.00

001	9	2110-9210-HTRAF	Retirement	\$ -	\$ 81,255.00		\$ 81,255.00
001	9	2110-9230-HTRAF	Workers Compensation	\$ -	\$ 10,863.00		\$ 10,863.00
001	9	2110-9235-HTRAF	Deferred Compensation 401k	\$ -	\$ 25,672.00		\$ 25,672.00
001	9	2110-9340-HTRAF	Uniforms	\$ -	\$ 8,402.00		\$ 8,402.00
001	9	2110-9420-HTRAF	Cell Phones	\$ -	\$ 2,000.00		\$ 2,000.00
001	9	2110-9610-HTRAF	Travel and Education	\$ -	\$ 16,977.00		\$ 16,977.00
001	9	2110-9640-HTRAF	Insurance & Bonds	\$ -	\$ 11,520.00		\$ 11,520.00
001	9	2110-9862-HTRAF	Technology	\$ -	\$ 24,088.00		\$ 24,088.00
001	9	2110-9863-HTRAF	Motor Vehicles	\$ -	\$ 3,476.00		\$ 3,476.00
001	6	2110-6255-HTRAF	NC DEPT OF PUBLIC SAFETY	\$ -	\$ 841,067.00		\$ 841,067.00
001	9	2210-9401-BM	Building and Equipment Rental	\$ -	\$ 14,295.00		\$ 14,295.00
001	9	2210-6901	Fund Balance Appropriated	\$ -	\$ 14,295.00		\$ 14,295.00
001	9	2730-9863	Motor Vehicles	\$ 504,000.00	\$ 70,000.00		\$ 574,000.00
001	9	2730-6901	Fund Balance Appropriated	\$ -	\$ 70,000.00		\$ 70,000.00
001	9	2710-9431	McGuire	\$ 10,000.00	\$ 8,662.86		\$ 18,662.86
001	9	2710-9842	Emergency Management Performance Grant	\$ 12,500.00	\$ 3,682.94		\$ 16,182.94
001	9	2710-9636-TIER2	Tier II Grant	\$ -	\$ 1,000.00		\$ 1,000.00
001	9	2710-9395-DPR7	Homeland Security DPR-7 Grant	\$ -	\$ 65,000.00		\$ 65,000.00
001	6	2710-6901	Fund Balance Appropriated	\$ -	\$ 78,345.80		\$ 78,345.80
001	9	3230-9605	Consultants	\$ 45,500.00	\$ 20,000.00		\$ 65,500.00
001	6	3230-6901	Fund Balance Appropriated	\$ -	\$ 20,000.00		\$ 20,000.00
001	9	3250-9493-DECHS	Health & Safety Materials and Contract Labor	\$ -	\$ 26,696.00		\$ 26,696.00
001	9	3250-9493-DECHV	HVAC & Appliance Materials and Contract Labor	\$ -	\$ 13,265.00		\$ 13,265.00
001	9	3250-9493-BCBS	Health & Safety Materials and Contract Labor	\$ -	\$ 7,000.00		\$ 7,000.00
001	6	3250-6901	Fund Balance Appropriated	\$ -	\$ 46,961.00		\$ 46,961.00

001	9	3270-9445	Purchased Services	\$ 5,000.00	\$ 10,000.00		\$ 15,000.00
001	6	3270-6901	Fund Balance Appropriated	\$ -	\$ 10,000.00		\$ 10,000.00
001	9	5630-9332	Special Needs Kids	\$ -	\$ 251,247.00		\$ 251,247.00
001	9	5630-94003	Triple P Funding	\$ 3,515.00	\$ 3,514.63		\$ 7,029.63
001	6	5630-6901	Fund Balance Appropriated	\$ -	\$ 254,761.63		\$ 254,761.63
001	9	5660-944501-CHOR	CCOG ARPA Funding	\$ -	\$ 75,000.00		\$ 75,000.00
001	6	5660-630101-CHOR	ARPA - Chore Services	\$ -	\$ 75,000.00		\$ 75,000.00
001	9	5660-986001-DTEC	ARPA Equipment Funding	\$ -	\$ 25,000.00		\$ 25,000.00
001	6	5660-630101-DTEC	ARPA - Digital Technology Services	\$ -	\$ 25,000.00		\$ 25,000.00
001	6	5660-630101-VPD	ARPA - Volunteer Program Development	\$ -	\$ 20,000.00		\$ 20,000.00
001	6	5660-630101-DTRN	ARPA - Digital Training and Programming	\$ -	\$ 45,000.00		\$ 45,000.00
001	6	5240-6312-0488	5311 Capital Grant	\$ -	\$ 603,355.00		\$ 603,355.00
001	9	5240-9831-0488	5311 Capital Grant	\$ -	\$ 670,394.00		\$ 670,394.00
001	6	1910-6901	Fund Balance Appropriated	\$ -	\$ 2,039.00		\$ 2,039.00
001	9	5410-9356-4HCAN	Program Supplies	\$ -	\$ 2,300.00		\$ 2,300.00
001	9	5410-9104-4HCAN	Temporary Employees	\$ -	\$ 3,500.00		\$ 3,500.00
001	9	5410-9201-4HCAN	Social Security	\$ -	\$ 200.00		\$ 200.00
001	9	5410-9202-4HCAN	Medicare	\$ -	\$ 195.00		\$ 195.00
001	9	5410-9230-4HCAN	Workers Compensation	\$ -	\$ 247.00		\$ 247.00
001	9	5410-9610-4HCAN	Travel and Education	\$ -	\$ 675.00		\$ 675.00
001	9	5410-9640-4HCAN	Insurance & Bonds	\$ -	\$ 215.00		\$ 215.00
001	6	5410-6901	Fund Balance Appropriated	\$ -	\$ 7,332.00		\$ 7,332.00
001	6	5910-6259-VITAL	Global Grant Program	\$ -	\$ 70,000.00		\$ 70,000.00
001	9	5910-9705-VITAL	Public Health Authority	\$ -	\$ 70,000.00		\$ 70,000.00
001	9	5615-9461-232-1	AFDC Emergency Assistance	\$ -	\$ 78,872.12		\$ 78,872.12

001	6	5615-6901	Fund Balance Appropriated	\$ -	\$ 78,872.12		\$ 78,872.12
001	9	8140-9357-FLP	Park Operation Supplies	\$ 20,800.00	\$ 21,000.00		\$ 41,800.00
001	9	8140-9605	Consultants	\$ -	\$ 202,500.00		\$ 202,500.00
001	6	8140-6901	Fund Balance Appropriated	\$ -	\$ 223,500.00		\$ 223,500.00

**Total \$ -**

**Budget Officer**

Approved  
 Denied

**County Manager**

Approved  
 Denied

**Board of Commissioners**

Approved  
 Denied

*Signature*

*Date*

*Signature*

*Date*

*Signature*

*Date*

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

County Manager - Resolution Redesignating the Site of the Cabarrus County Courthouse

**BRIEF SUMMARY:**

Pursuant to N.C.G.S. §153A-169, the Board of Commissioners may adopt by resolution any regulations concerning the use of County property and may redesignate the site of any county building, including the courthouse, with proper notice. The County published notice of its intent to redesignate the site of the courthouse on its internet site on May 8th, 2023.

**REQUESTED ACTION:**

Motion to suspend the Rules of Procedure.

Motion to adopt the resolution to redesignate the site of the Cabarrus County Courthouse.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Mike Downs, County Manager

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Resolution
- Public Notice



## **RESOLUTION REDESIGNATING THE SITE OF THE CABARRUS COUNTY COURTHOUSE**

**WHEREAS**, pursuant to N.C.G.S. §153A-169, the Board of Commissioners shall supervise the maintenance, repair, and use of all County property; and

**WHEREAS**, the Cabarrus County Courthouse is currently located at 77 Union St S, Concord, North Carolina 28025; and

**WHEREAS**, Cabarrus County recently constructed a new courthouse located at 61 Union St. S, Concord, North Carolina 28025, which is planned to open to the public on June 19, 2023; and

**WHEREAS**, pursuant to N.C.G.S. §153A-169, the Board of Commissioners may adopt by resolution any regulations concerning the use of County property and may redesignate the site of any county building, including the courthouse, with proper notice as set out therein; and

**WHEREAS**, the County published notice of its intent to redesignate the site of the courthouse on its internet site on May 8, 2023.

**NOW, THEREFORE**, be it and it is hereby resolved that:

1. The Cabarrus County Board of Commissioners provided proper notice of its intent to redesignate the site of the Cabarrus County Courthouse as required in N.C.G.S. §153A-169.

2. The site of the Cabarrus County Courthouse shall be redesignated as the property located at 61 Union St S, Concord, North Carolina 28025.

3. This redesignation shall become effective on June 5, 2023.

Adopted this the 5<sup>th</sup> day of June 2023.

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Stephen M. Morris, Chairman  
Cabarrus County Board of Commissioners

Attest:

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Clerk to the Board



PUBLICATION OF NOTICE  
CONCERNING THE REDESIGNATION  
OF THE SITE OF THE CABARRUS COUNTY COURTHOUSE

The Cabarrus County Board of Commissioners intend to redesignate the site of the Cabarrus County Courthouse on June 5, 2023, at 4:00 PM in the Multi-Purpose Room, 65 Church Street S, Concord, North Carolina, at their regularly scheduled work session meeting. A copy of the proposed resolution is available for public inspection in the office of the County Manager at 65 Church Street S, Concord, North Carolina.

Lauren Linker  
Clerk to the Board of Commissioners  
Cabarrus County, North Carolina

Posted May 8, 2023

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

DHS - FY24 Home and Community Care Block Grant Funding Plan

**BRIEF SUMMARY:**

The FY24 Home and Community Care Block Grant (HCCBG) funding plan is attached for review and approval by the Board of Commissioners. The plan has been prepared, reviewed, and approved by the HCCBG Advisory Committee. The Department of Human Services serves as the lead agency for the Home and Community Care Block Grant. The lead agency's primary role is to organize the committee, develop the funding plan for the grant, and seek approval from the Board of Commissioners for the funding plan.

The Home and Community Care Block Grant serves citizens ages 60 and older and promotes health and well-being services for qualified recipients. The grant is administered by the N.C. Division of Aging and Adult Services (DAAS). The grant provides local flexibility in that the advisory committee and the Board of Commissioners can set priorities for services that the grant will fund.

**REQUESTED ACTION:**

Motion to approve the FY24 Home and Community Care Block Grant funding plan as submitted by the Home and Community Care Block Grant advisory committee.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Anthony Hodges, Adult and Aging Services Program Administrator

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Budget Amendment Ambulance Fees and EMS | MC billing service fees

**BRIEF SUMMARY:**

Emergency Management Services (EMS) uses EMS Management and Consultants (EMSMC) an ambulance billing services company for medical billing and collection services. EMS pays EMSMC on a monthly basis 8.36% of net collections and \$11.50 per claim for NC Medicaid Managed Care claims. Average net collections for this fiscal year are higher than expected. Therefore, a budget amendment is needed to increase revenues for the increase in collections and expenditures for fees associated with billing and collections of claims.

**REQUESTED ACTION:**

Motion to approve the budget amendment to increase revenues for ambulance fees and expenditures for billing and collection services.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

James Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Budget Amendment

## Budget Revision/Amendment Request

Date:

Amount:

Dept. Head:

Department:

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

**Emergency Management Services (EMS) uses EMS Management and Consultants (EMSMC) an ambulance billing services company for medical billing and collection services. EMS pays EMSMC on a monthly basis 8.36% of net collections and \$11.50 per claim for NC Medicaid Managed Care claims. Average net collections for this fiscal year are higher than expected. This budget amendment increases revenues for the increase in collections and expenditures for the fees associated with billing and collections of claims.**

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
001	6	2730-6613	AMBULANCE FEES	6,700,000.00	50,000.00	-	6,750,000.00
001	6	2730-6613-IFAC	AMBULANCE FESS -INTER-FACILITY	240,000.00	50,000.00	-	290,000.00
001	9	2730-9445	PURCHASED SERVICES	617,812.00	100,000.00	-	717,812.00

### Budget Officer

Approved  
 Denied

### County Manager

Approved  
 Denied

### Board of Commissioners

Approved  
 Denied

*Signature* \_\_\_\_\_

*Signature* \_\_\_\_\_

*Signature* \_\_\_\_\_

*Date* \_\_\_\_\_

*Date* \_\_\_\_\_

*Date* \_\_\_\_\_

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Cabarrus County Schools Health Sciences Institute

**BRIEF SUMMARY:**

The Cabarrus Health Science Institute (CHSI) will be the 3rd Early College Program within the district. The program started in the 2022/2023 school calendar year is a temporary facility for the first 2 years. This project will provide the CHSI Program a permanent home intentionally built beside the existing Cabarrus College of Health Science that is a part of the Atrium Partnership with Cabarrus County Schools.

Due to the program and number of students served, a permanent facility is needed. The work required for temporary spaces in the existing facility for FY24 as well as design and development work for a permanent site to open in the 24/25 school calendar year needs to begin this year.

**REQUESTED ACTION:**

Motion to approve the budget amendment to fund renovations and design and development of the new Cabarrus Health Science Institution Campus and approve the Schools Capital Project Fund budget ordinance.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

James Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

## **COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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### **ATTACHMENTS:**

- Budget Amendment
- Project Ordinance

### Budget Revision/Amendment Request

Date:

Amount:

Dept. Head:

Department:

Internal Transfer Within Department

Transfer Between Departments/Funds

TRUE Supplemental Request

To Budget Renovations and New Modular Campus for the Cabarrus Health Science Institution. Budget from Community Investment Fund fund balance.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
390	6	7210-6932-CHSI	Contribution from CIF	-	2,000,000		2,000,000
390	9	7210-9821-CHSI	Building and Renovations	-	2,000,000		2,000,000
100	6	0000-6901	Fund Balance Appropriations	19,179,436	2,000,000		21,179,436
100	9	0000-9708	Contribution to Capital Project Fund	32,511,612	2,000,000		34,511,612

**Budget Officer**

Approved  
 Denied

\_\_\_\_\_  
Signature

**County Manager**

Approved  
 Denied

\_\_\_\_\_  
Signature

**Board of Commissioners**

Approved  
 Denied

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

# CABARRUS COUNTY SCHOOL CAPITAL PROJECTS BUDGET ORDINANCE

**BE IT ORDAINED** by the Board of Commissioners of Cabarrus County, North Carolina that, Pursuant to Section 13.2 of Chapter 159 of the General Statutes of North Carolina, the following capital project ordinance is hereby adopted:

## Section I.

- A. The project authorized is for the construction and renovations of School Facilities. Details of the project are listed in section C. of this Project Ordinance.
- B. The officers of this unit are hereby directed to proceed with this capital project within the terms of the Generally Accepted Accounting Principles (GAAP) and the budget contained herein.

It is estimated that the following revenues will be available to complete capital projects as listed.

Contribution from General Fund/CIF	\$ 43,054,810
Contribution from Capital Projects Fund	9,383,614
Debt Proceeds 2020 Draw Note	46,620,222
Debt Proceeds 2022 Draw Note	55,711,930
Debt Proceeds 2024 Draw Note	73,466,750
Contribution from Capital Reserve Fund	693,429
Contribution from Convention & Visitors Bureau	1,550,000
NC Department of Transportation	1,950,000
 <b>TOTAL REVENUES</b>	 <b>\$232,430,755</b>

- C. The following appropriations are made as listed.

CCS Mobile Unit Renovation	\$ 3,300,000
R. Brown McAllister Replacement	48,356,750
Roberta Road Middle School	56,604,300
CCS New High School	9,508,821
CCS Southeast High School – Land purchase	1,816,320
Contribution to Capital Reserve	5,001,114
Early College Mobile Units	2,337,000
Mondo Track – JM Robinson High School	1,550,000
Deferred Maintenance Cabarrus County Schools	25,463,416
Deferred Maintenance Kannapolis City School	5,640,034
Deferred Maintenance Rowan Cabarrus Community College	3,468,000
Mary Frances Wall Renovations	11,000,000
Central Cabarrus High School HVAC	9,000,000
Concord High School HVAC	9,000,000
Opportunity School	7,000,000
Hickory Ridge High School Roof	2,550,000
Cox Mill Elementary School Roof	2,500,000
Wolf Meadow Elementary School Roof	2,000,000
Fred L. Wilson Elementary School Addition	12,000,000
Forest Park Elementary School HVAC	7,000,000
RCCC South Campus HVAC	5,335,000
Cabarrus Health Science Institution	2,000,000

<b>TOTAL EXPENDITURES</b>	<b>\$232,430,755</b>
<b>GRAND TOTAL – REVENUES</b>	<b>\$232,430,755</b>
<b>GRAND TOTAL – EXPENDITURES</b>	<b>\$232,430,755</b>

Section II.

- A. Special appropriations to non-profit organizations shall be distributed after the execution of an agreement which ensures that all County funds are used for statutorily permissible public purposes.
- B. The County Manager or designee is hereby authorized to transfer appropriations within or between funds, or modify revenue and expenditure projections as contained herein under the following conditions:
  - 1. The Manager may transfer amounts between objects of expenditure and revenues within a function without limitation.
  - 2. The County Manager may transfer amounts up to \$500,000 between functions of the same fund.
  - 3. The County Manager may transfer amounts between contingency funds which are set aside for a specific project for budgetary shortfalls or upon the appropriate approval of a change order.
  - 4. The County Manager is authorized to transfer funds from the General Fund or Capital Reserve Fund to the appropriate fund for projects approved within the Capital Improvement Plan for the current fiscal year.
  - 5. Upon notification of funding increases or decreases to existing grants or revenues, or the award of grants or revenues, the Manager or designee may adjust budgets to match, including grants that require a County match for which funds are available.
  - 6. The Manager or designee may adjust debt financing from estimated projections to actual funds received.
  - 7. The County Manager may enter into and execute change orders or amendments to construction contracts in amounts less than \$90,000 when the appropriate annual budget or capital project ordinance contains sufficient appropriated but unencumbered funds.
  - 8. The County Manager may award and execute contracts which are not required to be bid or which G.S. 143-131 allows to be let on informal bids so long as the annual budget or appropriate capital project ordinance contains sufficient appropriated but unencumbered funds for such purposes.
  - 9. The County Manager may execute contracts with outside agencies to properly document budgeted appropriations to such agencies where G.S. 153 A-248(b), 259, 449 and any similar statutes require such contracts.
  - 10. The County Manager may reject formal bids when deemed appropriate and in the best interest of Cabarrus County pursuant to G.S. 143-129(a).
  - 11. The County Manager may reduce revenue projections consistent with prevailing economic conditions, and also reduce expenditures correspondingly.

Section III.

This ordinance and the budget documents shall be the basis of the financial plan for the County of Cabarrus.

- a. The Finance Director is hereby directed to maintain within the Capital Project Fund sufficient detailed accounting records to satisfy the requirements of the law.
- b. The Finance Director is directed to report, at the request of the Board, on the financial status of each project element in Section I and on the total revenues received or claimed.
- c. Copies of this capital project ordinance shall be furnished to the Clerk to the governing Board, and to the Finance Director for direction in carrying out this project.
- d. At the completion of a construction project, all unrestricted excess funds are transferred to the General Fund, Community Investment Fund or other Capital Project Fund and the portion of the Capital Project associated with the project is closed.

Adopted this 5<sup>th</sup> day of June 2023.

CABARRUS COUNTY BOARD OF COMMISSIONERS

BY: \_\_\_\_\_  
Stephen M. Morris, Chairman

ATTEST:

\_\_\_\_\_  
Clerk to the Board

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Capital Improvement Plan ("CIP") Funded Projects in the FY2024 General Fund Budget

**BRIEF SUMMARY:**

The County's CIP projects that were approved as part of the FY 2024 budget process are included as an attachment. The projects will be recorded and tracked in the County's Capital Project Fund and the School's Capital Project Fund. The projects are being funded by a contribution from the General Fund, the Community Investment Fund and future FY 2024 Debt. The County Capital Project Fund and the School Capital Project Fund project ordinances, the related budget amendment and applicable reimbursement resolutions are included with this agenda item.

**REQUESTED ACTION:**

Motion to adopt the project ordinances for the County Capital Project Fund and the School Capital Project Fund, related budget amendment and applicable reimbursement resolutions.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

James Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- ❑ Budget Amendment
- ❑ FY24 PAYGO / CIP Project List
- ❑ Reimbursement Resolution
- ❑ Budget Ordinance - FD 380
- ❑ Budget Ordinance - FD 390

### Budget Revision/Amendment Request

Date:

Amount:

Dept. Head:

Department:

Internal Transfer Within Department

Transfer Between Departments/Funds

**Supplemental Request**  
TRUE

To Budget Landfill Compactor purchase, School Capital Projects, Deferred Maintenance Projects and County Capital Projects with available cash (Paygo Projects), Contribution from General Fund and FY 2024 Debt Proceeds. Projects have already been approved by Board of Commissioners.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
270	6	4610-6932	Contribution from CIF		-	935,000	935,000
270	9	4610-9860-2221	Equipment and Vehicles		-	935,000	935,000
100	6	0000-6901	Fund Balance Appropriations		-	935,000	935,000
100	9	0000-971015	Contribution to Landfill		-	935,000	935,000
			<b>Purchase New Compactor for Landfill</b>				
390	6	7210-6932-DM24	Contribution from CIF		-	5,800,000	5,800,000
390	6	7230-6932-DM24	Contribution from CIF		-	1,500,000	1,500,000
390	9	7210 9501 DM24	Building and Grounds Maintenance		-	5,800,000	5,800,000
390	9	7230 9501 DM24	Building and Grounds Maintenance		-	1,500,000	1,500,000
100	6	0000-6901	Fund Balance Appropriations	935,000	7,300,000		8,235,000
100	9	0000-9708	Contribution to Capital Project Fund		-	7,300,000	7,300,000
			<b>Budget Paygo Maintenance Project for the Schools</b>				
380	6	5610-6932-HSC	Contribution from CIF		2,000,000		2,000,000
380	9	5610-9606-HSC	Engineering		2,000,000		2,000,000
			<b>Budget New Human Services Facility</b>				
380	6	8140-6932-FLP	Contribution from CIF		1,100,000		1,100,000
380	9	8140-9830-FLP	Other Improvements		1,100,000		1,100,000
			<b>Budget Additional funds for mini-golf and park office</b>				
380	6	2110-6932-DM	Contribution from CIF		1,000,000		1,000,000
380	9	2110-9860-DM	Equipment & Furniture		1,000,000		1,000,000
			<b>Budget Chiller at Sheriff's Admin Building</b>				
100	6	0000-6901	Fund Balance Appropriations	8,235,000	4,100,000		12,335,000

100	9	0000-9708	Contribution to Capital Project Fund	7,300,000	4,100,000		11,400,000
			<b>Budget County Paygo Projects Funded by CIF</b>				
380	6	1952-6932-DM	Contribution From CIF		700,000		700,000
380	6	2110-6932-DM	Contribution From CIF		500,000		500,000
380	6	1940-6932-DM	Contribution From CIF		1,300,000		1,300,000
380	9	1952-9501-DM	Building and Ground Maintenance - DM		700,000		700,000
380	9	2110-9501-DM	Building and Ground Maintenance - DM		500,000		500,000
380	9	1940-9501-DM	Building and Ground Maintenance - DM		1,300,000		1,300,000
100	6	9120-6902	Contribution from General Fund		2,500,000		2,500,000
100	9	0000-9708	Contribution to Capital Project Fund		2,500,000		2,500,000
			<b>Budget County's Deferred Maintenance Projects</b>				
380	6	5610-6927-HSC	Proceeds from 2024 Draw Program	-	60,115,000		60,115,000
380	9	5610-9820-HSC	Construction		60,115,000		60,115,000
			<b>Budget Human Services Facility</b>				
380	6	2710-6927-PSTC	Proceeds from 2024 Draw Program	-	35,000,000		35,000,000
380	9	2710-9820-PSTC	Construction	-	35,000,000		35,000,000
			<b>Budget Public Safety Training Facility</b>				
390	6	7230-6927-FLW	Proceeds from 2024 Draw Program	-	12,000,000		12,000,000
390	9	7230-9820-FLW	Construction	-	12,000,000		12,000,000
			<b>Budget Fred L. Wilson Elementary School Addition</b>				
390	6	7230-6927-FPEAC	Proceeds from 2024 Draw Program	-	7,000,000		7,000,000
390	9	7230-9821-FPEAC	Building and Renovations	-	7,000,000		7,000,000
			<b>Budget Forest Park Elementary School HVAC</b>				
390	6	7240-6927-SCAC	Proceeds from 2024 Draw Program	-	5,335,000		5,335,000
390	9	7240-9821-SCAC	Building and Renovations	-	5,335,000		5,335,000
			<b>Budget HVAC Replacement RCCC South Campus</b>				
390	6	7210-6927-MFWRV	Proceeds from 2024 Draw Program	-	11,000,000		11,000,000
390	9	7210-9830-MFWRV	Other Improvements	-	11,000,000	-	11,000,000
			<b>Budget Mary Frances Wall Renovations</b>				
390	6	7210-6927-CCAC	Proceeds from 2024 Draw Program	-	9,000,000		9,000,000

390	9	7210-9821-CCAC	Building and Renovations	-	9,000,000		9,000,000
			<b>Budget Central Cabarrus H.S. HVAC Replacement</b>				
390	6	7210-6927-CHVAC	Proceeds from 2024 Draw Program	-	9,000,000	-	9,000,000
390	9	7210-9821-CHVAC	Building and Renovations	-	9,000,000		9,000,000
			<b>Budget Concord H.S. HVAC Replacement</b>				-
390	6	7210-6927-OPPOR	Proceeds from 2024 Draw Program	-	7,000,000		7,000,000
390	9	7210-9820-OPPOR	Construction	-	7,000,000		7,000,000
			<b>Budget for Opportunity School</b>				
390	6	7210-6927-HRROF	Proceeds from 2024 Draw Program	-	2,550,000		2,550,000
390	9	7210-9830-HRROF	Other Improvements	-	2,550,000		2,550,000
			<b>Budget Hickory Ridge H.S. Roof Replacement</b>				
390	6	7210-6927-CMROF	Proceeds from 2024 Draw Program	-	2,500,000		2,500,000
390	9	7210-9830-CMROF	Other Improvements	-	2,500,000		2,500,000
			<b>Budget Cox Mill E.S. Roof Replacement</b>				
390	6	7210-6927-WMROF	Proceeds from 2024 Draw Program	-	2,000,000		2,000,000
390	9	7210-9830-WMROF	Other Improvements	-	2,000,000		2,000,000
			<b>Budget Wolf Meadow E.S. Roof Replacement</b>				

Budget Officer

Approved  
 Denied

Signature

Date

County Manager

Approved  
 Denied

Signature

Date

Board of Commissioners

Approved  
 Denied

Signature

Date

## Fiscal Year 2024 PayGo, and Capital Projects

### Fiscal Year 2024 PayGo Projects and County Deferred Maintenance Projects (funded by Community Investment Fund fund balance)

- Cabarrus County Schools
  - \$5.8MM – Cabarrus County Schools Deferred Maintenance
- Kannapolis City Schools
  - \$1.5MM – Kannapolis City Schools Deferred Maintenance
- Cabarrus County
  - \$2.0MM – Human Services Facility
  - \$1.1MM – Additional funding for Frank Liske Park Mini-Golf and Office Project
  - \$1.0MM – Replace Chiller at Sheriff's Administration Building
  - \$0.9MM – Compactor at Landfill
  - \$2.5MM – Deferred Maintenance

### Fiscal Year 2024 Capital Projects (funded by 2024 Draw Program)

- Cabarrus County Schools
  - \$11.0MM - Mary Frances Wall Renovations
  - \$9.0MM – Central Cabarrus High School HVAC
  - \$9.0MM – Concord High School HVAC
  - \$7.0MM – Opportunity School
  - \$2.55MM – Hickory Ridge High School Roof
  - \$2.5MM – Cox Mill Elementary School Roof
  - \$2.0MM – Wolf Meadow Elementary School Roof
- Kannapolis City Schools
  - \$12.0MM – Fred L. Wilson Elementary School Addition
  - \$7.0MM Forest Park Elementary School HVAC
- Rowan Cabarrus Community College
  - \$5.335MM - South Campus HVAC
- Cabarrus County
  - \$60.115MM – Human Services Facility
  - \$35.0MM – Public Safety Training Facility

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Central Cabarrus High School HVAC Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Central Cabarrus High School HVAC Replacement is expected to be \$9,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Central Cabarrus High School HVAC Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

I DO HEREBY FURTHER CERTIFY that the schedule of regular meetings of said Board of Commissioners has been on file in my office pursuant to North Carolina General Statutes §143-318.12 as of a date not less than seven (7) days before said meeting.

WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

---

Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Concord High School HVAC Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Concord High School HVAC Replacement is expected to be \$9,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Concord High School HVAC Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

I DO HEREBY FURTHER CERTIFY that the schedule of regular meetings of said Board of Commissioners has been on file in my office pursuant to North Carolina General Statutes §143-318.12 as of a date not less than seven (7) days before said meeting.

WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

---

Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Cox Mill Elementary School Roof Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Cox Mill Elementary School Roof Replacement is expected to be \$2,500,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Cox Mill Elementary School Roof Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

I DO HEREBY FURTHER CERTIFY that the schedule of regular meetings of said Board of Commissioners has been on file in my office pursuant to North Carolina General Statutes §143-318.12 as of a date not less than seven (7) days before said meeting.

WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Forest Park Elementary School HVAC Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Forest Park Elementary School HVAC Replacement is expected to be \$7,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Forest Park Elementary School HVAC Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Fred L. Wilson Elementary School Addition").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Fred L. Wilson Elementary School Addition is expected to be \$12,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Fred L. Wilson Elementary School Addition was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Hickory Ridge High School Roof Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Hickory Ridge High School Roof Replacement is expected to be \$2,550,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Hickory Ridge High School Roof Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Human Services Facility").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Human Services Facility is expected to be \$60,115,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Human Services Facility was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Mary Frances Wall Renovation").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Mary Frances Wall Renovation is expected to be \$11,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Mary Frances Wall Renovation was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Opportunity School").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Opportunity School is expected to be \$7,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Opportunity School was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Public Safety Training Facility").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Public Safety Training Facility is expected to be \$35,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Public Safety Training Facility was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

BE IT RESOLVED by the Board of Commissioners of Cabarrus County:

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(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Rowan Cabarrus Community College "RCCC" South Campus HVAC Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the RCCC South Campus HVAC Replacement is expected to be \$5,335,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the RCCC South Campus HVAC Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

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WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

RESOLUTION DECLARING OFFICIAL INTENT TO REIMBURSE  
EXPENDITURES WITH PROCEEDS OF DEBT PURSUANT TO UNITED STATES  
DEPARTMENT OF TREASURY REGULATIONS

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1. The Board hereby finds, determines and declares as follows:

(a) Treasury Regulations Section 1.150-2 (the "Regulations"), promulgated by the United States Department of Treasury on June 18, 1993, prescribes certain specific procedures applicable to certain obligations issued by the County after June 30, 1993, including, without limitation, a requirement that the County timely declare its official intent to reimburse certain expenditures with the proceeds of debt to be issued thereafter by the County.

(b) The County has advanced and/or will advance its own funds to pay certain capital costs (the "Original Expenditures") associated with financing, in whole or in part, (i) the design, acquisition, construction, installation and equipping of a new public park facility, including the acquisition of necessary land, easements and rights-of-way, (ii) site development, (iii) any and all related utilities relocation and (iv) various real and/or personal property improvements related to any of the foregoing (collectively, the "Wolf Meadow Elementary School Roof Replacement").

(c) The funds heretofore advanced or to be advanced by the County to pay the Original Expenditures are or will be available only on a temporary basis, and do not consist of funds that were otherwise earmarked or intended to be used by the County to permanently finance the Original Expenditures.

(d) As of the date hereof, the County reasonably expects that it will reimburse itself for such Original Expenditures with the proceeds of debt to be incurred by the County, and the maximum principal amount of debt to be incurred with respect to the Wolf Meadow Elementary School Roof Replacement is expected to be \$2,000,000.

(e) All Original Expenditures to be reimbursed by the County were paid no more than 60 days prior to or will be paid on or after the date of, this declaration of official intent. The County understands that such reimbursement must occur not later than 18 months after the later of (i) the date the Original Expenditure was paid; or (ii) the date the Wolf Meadow Elementary School Roof Replacement was placed in service or abandoned, but in no event more than 3 years after the Original Expenditure was paid.

2. This resolution shall take effect immediately.

I, Lauren Linker, Clerk to the Board of Commissioners for the County of Cabarrus, North Carolina, DO HEREBY CERTIFY that the foregoing is a true copy of so much of the proceedings of said Board of Commissioners at a regular meeting held on June 19, 2023, as relates in any way to the passage of the resolutions hereinabove referenced, and that said proceedings are recorded in Minute Book No. [ ] of the minutes of said Board of Commissioners, beginning at page \_\_\_ and ending at page \_\_\_.

I DO HEREBY FURTHER CERTIFY that the schedule of regular meetings of said Board of Commissioners has been on file in my office pursuant to North Carolina General Statutes §143-318.12 as of a date not less than seven (7) days before said meeting.

WITNESS my hand and the corporate seal of said County, this 19th day of June 2023.

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Clerk to the Board of Commissioners  
for the County of Cabarrus, North Carolina

[SEAL]

# CABARRUS COUNTY COUNTY CAPITAL PROJECTS BUDGET ORDINANCE

**BE IT ORDAINED** by the Board of Commissioners of Cabarrus County, North Carolina that, Pursuant to Section 13.2 of Chapter 159 of the General Statutes of North Carolina, the following capital project ordinance is hereby adopted:

## Section I.

- A. The project authorized is for the construction and renovations of County Facilities. Details of the project are listed in section C. of this Project Ordinance.
- B. The officers of this unit are hereby directed to proceed with this capital project within the terms of the Generally Accepted Accounting Principles (GAAP) and the budget contained herein.

It is estimated that the following revenues will be available to complete capital projects as listed.

Debt Proceeds 2020 Draw Note	\$ 60,904,154
Debt Proceeds 2022 Draw Note	103,458,267
Debt Proceeds 2024 Debt Program	129,269,664
Debt Proceeds 2026 Debt Program	10,500,000
Contributions from Capital Projects Fund	24,696,943
Contribution from General Fund	40,091,315
Contribution from Capital Reserve Fund	2,728,681
Contribution from Internal Service Fund	1,065,426
Contribution from Community Investment Fund	22,993,328
State Allocation	40,700,000
PARTF Grant	500,000
<b>TOTAL REVENUES</b>	<b>\$436,907,778</b>

- C. The following appropriations are made as listed.

Courthouse Site Enabling Construction & Renovation	\$ 146,545,280
Exterior Repairs to Multiple Buildings	326,174
Contribution to Capital Reserve (Reimb for Skylight Project)	2,085,000
West Cabarrus High School Artificial Turf Fields	2,566,810
Frank Liske Barn Replacement	7,033,845
Legal / Closing Expenses	952,508
Emergency Equipment Warehouse/ ITS Location	15,867,999
Fiber Infrastructure Improvement	799,000
Sheriff Training & Firing Range Renovations	2,200,000
Human Services HVAC	180,000
Frank Liske Park ADA Renovations	1,450,000
Frank Liske Park Playground Replacement	203,600
Camp Spencer Vending & Archery Building	536,998
West Cabarrus Library & Senior Center	30,400,000
Deferred Maintenance Projects	11,871,450
EMS Headquarters	21,007,999
Mt. Pleasant Library / ALC / Foil Park Project	26,500,000
Northeast Area Land	4,729,117
Mental Health Facility	35,597,554
Other Improvements Unallocated	1,632,642
Enterprise Physical Security Project (ITS)	807,000

Concord Senior Center Overflow Parking Lot	550,000
Contribution to the General Fund	47,500
Frank Liske Park Softball Complex Utilities	410,000
Rob Wallace Park	1,533,504
Animal Shelter Expansion	275,000
Frank Liske Park Stormwater Project	570,803
Northeast Cabarrus Radio Tower Project	2,439,172
Milestone Building	8,150,000
Fire Services Building	370,000
Frank Liske Park Tennis Court	280,000
Frank Liske Park Multiple Projects	5,000,000
Government Center Building Repair	450,000
Public Safety Training Center	37,073,823
Human Services Facility	64,365,000
Frank Liske Park Mini-Golf and Office	1,100,000
Chiller Replacement at Sheriff's Admin Office	1,000,000
<b>TOTAL EXPENDITURES</b>	<b>\$436,907,778</b>

<b>GRAND TOTAL – REVENUES</b>	<b>\$436,907,778</b>
<b>GRAND TOTAL – EXPENDITURES</b>	<b>\$436,907,778</b>

## Section II.

- A. Special appropriations to non-profit organizations shall be distributed after the execution of an agreement which ensures that all County funds are used for statutorily permissible public purposes.
- B. The County Manager or designee is hereby authorized to transfer appropriations within or between funds, or modify revenue and expenditure projections as contained herein under the following conditions:
  - 1. Transfers amounts between objects of expenditure and revenues within a function without limitation.
  - 2. Transfer amounts up to \$500,000 between functions of the same fund.
  - 3. Transfer amounts between contingency funds which are set aside for a specific project for budgetary shortfalls or upon the appropriate approval of a change order.
  - 4. Enter and execute change orders or amendments to construction contracts in amounts less than \$90,000 when the appropriate annual budget or capital project ordinance contains sufficient appropriated but unencumbered funds.
  - 5. Award and execute contracts which are not required to be bid or which G.S. 143-131 allows to be let on informal bids so long as the annual budget or appropriate capital project ordinance contains sufficient appropriated but unencumbered funds for such purposes.
  - 6. Execute contracts with outside agencies to properly document budgeted appropriations to such agencies where G.S. 153 A-248(b), 259, 449 and any similar statutes require such contracts.
  - 7. Reject formal bids when deemed appropriate and in the best interest of Cabarrus County pursuant to G.S. 143-129(a).

Section III.

This ordinance and the budget documents shall be the basis of the financial plan for the County of Cabarrus.

- a. The Finance Director is hereby directed to maintain within the Capital Project Fund sufficient detailed accounting records to satisfy the requirements of the law.
- b. The Finance Director is directed to report, at the request of the Board, on the financial status of each project element in Section I and on the total revenues received or claimed.
- c. Copies of this capital project ordinance shall be furnished to the Clerk to the governing Board, and to the Finance Director for direction in carrying out this project.
- d. At the completion of a construction project, all unrestricted excess funds are transferred to the Community Investment Fund and the portion of the Capital Project associated with the project is closed.

Adopted this 19<sup>th</sup> day of June 2023.

CABARRUS COUNTY BOARD OF COMMISSIONERS

BY: \_\_\_\_\_  
Stephen M. Morris, Chairman

ATTEST:

\_\_\_\_\_  
Clerk to the Board

# CABARRUS COUNTY SCHOOL CAPITAL PROJECTS BUDGET ORDINANCE

**BE IT ORDAINED** by the Board of Commissioners of Cabarrus County, North Carolina that, Pursuant to Section 13.2 of Chapter 159 of the General Statutes of North Carolina, the following capital project ordinance is hereby adopted:

## Section I.

- A. The project authorized is for the construction and renovations of School Facilities. Details of the project are listed in section C. of this Project Ordinance.
- B. The officers of this unit are hereby directed to proceed with this capital project within the terms of the Generally Accepted Accounting Principles (GAAP) and the budget contained herein.

It is estimated that the following revenues will be available to complete capital projects as listed.

Contribution from General Fund/CIF	\$ 43,054,810
Contribution from Capital Projects Fund	9,383,614
Debt Proceeds 2020 Draw Note	45,227,096
Debt Proceeds 2022 Draw Note	57,105,056
Debt Proceeds 2024 Draw Note	73,466,750
Contribution from Capital Reserve Fund	693,429
Contribution from Convention & Visitors Bureau	1,550,000
NC Department of Transportation	1,950,000
 <b>TOTAL REVENUES</b>	 <b>\$232,430,755</b>

- C. The following appropriations are made as listed.

CCS Mobile Unit Renovation	\$ 3,300,000
R. Brown McAllister Replacement	48,356,750
Roberta Road Middle School	56,604,300
CCS New High School	9,508,821
CCS Southeast High School – Land purchase	1,816,320
Contribution to Capital Reserve	5,001,114
Early College Mobile Units	2,337,000
Mondo Track – JM Robinson High School	1,550,000
Deferred Maintenance Cabarrus County Schools	25,463,416
Deferred Maintenance Kannapolis City School	5,640,034
Deferred Maintenance Rowan Cabarrus Community College	3,468,000
Mary Frances Wall Renovations	11,000,000
Central Cabarrus High School HVAC	9,000,000
Concord High School HVAC	9,000,000
Opportunity School	7,000,000
Hickory Ridge High School Roof	2,550,000
Cox Mill Elementary School Roof	2,500,000
Wolf Meadow Elementary School Roof	2,000,000
Fred L. Wilson Elementary School Addition	12,000,000
Forest Park Elementary School HVAC	7,000,000
RCCC South Campus HVAC	5,335,000
Cabarrus Health Science Institution	2,000,000

<b>TOTAL EXPENDITURES</b>	<b>\$232,430,755</b>
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<b>GRAND TOTAL – REVENUES</b>	<b>\$232,430,755</b>
<b>GRAND TOTAL – EXPENDITURES</b>	<b>\$232,430,755</b>

Section II.

- A. Special appropriations to non-profit organizations shall be distributed after the execution of an agreement which ensures that all County funds are used for statutorily permissible public purposes.
- B. The County Manager or designee is hereby authorized to transfer appropriations within or between funds, or modify revenue and expenditure projections as contained herein under the following conditions:
  1. The Manager may transfer amounts between objects of expenditure and revenues within a function without limitation.
  2. The County Manager may transfer amounts up to \$500,000 between functions of the same fund.
  3. The County Manager may transfer amounts between contingency funds which are set aside for a specific project for budgetary shortfalls or upon the appropriate approval of a change order.
  4. The County Manager is authorized to transfer funds from the General Fund or Capital Reserve Fund to the appropriate fund for projects approved within the Capital Improvement Plan for the current fiscal year.
  5. Upon notification of funding increases or decreases to existing grants or revenues, or the award of grants or revenues, the Manager or designee may adjust budgets to match, including grants that require a County match for which funds are available.
  6. The Manager or designee may adjust debt financing from estimated projections to actual funds received.
  7. The County Manager may enter into and execute change orders or amendments to construction contracts in amounts less than \$90,000 when the appropriate annual budget or capital project ordinance contains sufficient appropriated but unencumbered funds.
  8. The County Manager may award and execute contracts which are not required to be bid or which G.S. 143-131 allows to be let on informal bids so long as the annual budget or appropriate capital project ordinance contains sufficient appropriated but unencumbered funds for such purposes.
  9. The County Manager may execute contracts with outside agencies to properly document budgeted appropriations to such agencies where G.S. 153 A-248(b), 259, 449 and any similar statutes require such contracts.

10. The County Manager may reject formal bids when deemed appropriate and in the best interest of Cabarrus County pursuant to G.S. 143-129(a).
11. The County Manager may reduce revenue projections consistent with prevailing economic conditions, and also reduce expenditures correspondingly.

Section III.

This ordinance and the budget documents shall be the basis of the financial plan for the County of Cabarrus.

- a. The Finance Director is hereby directed to maintain within the Capital Project Fund sufficient detailed accounting records to satisfy the requirements of the law.
- b. The Finance Director is directed to report, at the request of the Board, on the financial status of each project element in Section I and on the total revenues received or claimed.
- c. Copies of this capital project ordinance shall be furnished to the Clerk to the governing Board, and to the Finance Director for direction in carrying out this project.
- d. At the completion of a construction project, all unrestricted excess funds are transferred to the General Fund, Community Investment Fund or other Capital Project Fund and the portion of the Capital Project associated with the project is closed.

Adopted this 19<sup>th</sup> Day of June 2023.

CABARRUS COUNTY BOARD OF COMMISSIONERS

BY: \_\_\_\_\_  
Stephen M. Morris, Chairman

ATTEST:

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Clerk to the Board

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Governmental Accounting Standards Board (GASB) 87 Budget Amendment

**BRIEF SUMMARY:**

In June 2017, Governmental Accounting Standards Board (GASB) issued Statement No. 87, Leases. GASB 87 established a single model for lease accounting based on the principal that leases are financing of the "right to use" an asset, which is an underlying nonfinancial intangible asset, rather than an asset itself. Governments are required to amortize the non-financial assets over the shorter of the asset's useful life or the lease term.

In Fiscal Year 2022, Cabarrus County began recording all leases within the scope of GASB 87 and established a capitalization threshold of \$100,000, in total lease payments over the lease term.

With the implementation of GASB 87, all lease payments that fall within the materiality threshold should be budgeted and accounted for as debt service principal and interest payments.

Finance prepares a budget amendment at fiscal year end to budget principal and interest payments for "right to use" assets in the Community Investment Fund (CIF). Actual expenditures were paid out of the general fund throughout the fiscal year and will be moved to the debt service principal and interest accounts in CIF for reporting purposes.

**REQUESTED ACTION:**

Approve the necessary budget amendment to budget and account for debt service principal and interest expenditures as required by Lessee Accounting under Governmental Accounting Standards Board (GASB) Statement No. 87.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

James Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Budget Amendment

### Budget Revision/Amendment Request

Date:

Amount:

Dept. Head:

Department:

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

This budget amendment is to budget principal and interest payments for lease payments made in FY 2023 as a result of implementing GASB 87. The budget amendment budgets principal and interest payments in the Community Investment Fund (CIF) and appropriates fund balance. Actual expenditures (lease payments) were paid out of the general fund and will be moved to the principal and interest accounts in CIF. The overall effect on fund balance is zero.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
100	6	0000-6901	Fund Balance Appropriated	21,179,436.00	1,169,548.00	-	22,348,984.00
100	9	9120-991302-G87	LEASE FINANCING PRINCIPAL - G87	-	901,379.00	-	901,379.00
100	9	9120-993201-G87	LEASE INTEREST	-	12,787.00	-	12,787.00
			<i>To budget GASB 87 implementation for DHS building lease principal and interest payments</i>				
100	9	9120-991302-G87	LEASE FINANCING PRINCIPAL - G87	-	114,804.00	-	114,804.00
100	9	9120-993201-G87	LEASE INTEREST	-	517.00	-	517.00
			<i>To budget GASB 87 implementation for copier lease principal and interest payments</i>				
100	9	9120-991302-G87	LEASE FINANCING PRINCIPAL - G87	-	16,896.00	-	16,896.00
100	9	9120-993201-G87	LEASE INTEREST	-	1,365.00	-	1,365.00
			<i>To budget GASB 87 implementation for The Old Creamery lease principal and interest payments</i>				
100	9	9120-991302-G87	LEASE FINANCING PRINCIPAL - G87	-	120,814.00	-	120,814.00
100	9	9120-993201-G87	LEASE INTEREST	-	986.00	-	986.00
			<i>To budget GASB 87 implementation for HPE equipment and HP switches lease principal and interest payments</i>				

#### Budget Officer

Approved  
 Denied

#### County Manager

Approved  
 Denied

#### Board of Commissioners

Approved  
 Denied

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Government Accounting Standards Board (GASB) 96

**BRIEF SUMMARY:**

The Government Accounting Standards Board (GASB) issued Statement No. 96, *Subscription Based Information Technology Arrangements* (SBITAs) in May 2020. The statement defines a SBITA as "a contract that conveys the right to use another party's information (IT) software, alone or in combination with tangible assets as specified in the contract. As with GASB Statement No. 87, *Leases*, this means that the County is procuring an intangible asset, mainly a "right to use" asset and should be amortized over the shorter of the subscription term or the useful life. Subscription payments will be recognized and budgeted for like principal and interest debt service payments made on long term debt.

Under the Generally Accepted Accounting Principles (GAAP) basis for governmental funds and the budgetary basis for all budgeted funds in NC, Cabarrus County will initially recognize an expenditure and other financing source.

Assets which are clearly immaterial to the financial statements will not be included for GASB 96 reporting purposes. Cabarrus County will record SBITA's within the scope of GASB 96 that exceed an established capitalization threshold, or materiality. The capitalization threshold is defined as \$100,000 in total payments over the subscription term.

**REQUESTED ACTION:**

Motion to adopt the resolution to establish the materiality threshold and approve the budget amendment.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

James M. Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Budget Amendment
- Resolution

## Budget Revision/Amendment Request

Date: June 19, 2023

Amount: 1,574,000.00

Dept. Head: James Howden - Finance

Department: Finance

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

This budget amendment is to budget principal and interest payments for Subscription-Based Information Technology Arrangements (SBITA's) as a result of implementing GASB 96. The budget amendment budgets principal and interest payments in the Community Investment Fund (CIF) and appropriates fund balance. Actual expenditures (SBITS's) were paid out of the general fund and will be moved to the principal and interest accounts in CIF. This budget amendment also budget initial expenditures and other financing source to record inception of SBITA's.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
100	6	9120-690501-G96	PROCEEDS FROM SBITA - Other Financing Source	-	1,215,000.00	-	1,215,000.00
100	9	9120-9865-G96	CAPITAL OUTLAY - G96	-	1,215,000.00	-	1,215,000.00
			<i>To budget expenditure (subscription asset) and other financing source for GASB 96 implementation.</i>				
100	6	0000-6901	Fund Balance appropriated	22,348,984.00	359,000.00	-	22,707,984.00
100	9	9120-991303-G96	PRINCIPAL GASB 96	-	350,500.00	-	350,500.00
100	9	9120-993202-G96	INTEREST GASB 96	-	8,500.00	-	8,500.00
			<i>To budget principal and interest payments for GASB 96 implementation</i>				

### Budget Officer

Approved  
 Denied

Signature \_\_\_\_\_

### County Manager

Approved  
 Denied

Signature \_\_\_\_\_

### Board of Commissioners

Approved  
 Denied

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_



**Resolution To Establish Materiality Threshold for Recognition Of  
Subscription-Based Information Technology Arrangements (“SBITAs”)  
Under GASB Statement No. 96**

WHEREAS, General Accounting Standards Board (“GASB”) Statement No. 96 provides guidance on the accounting and financial reporting for subscription-based information technology arrangements (“SBITAs”); and

WHEREAS, a SBITA is defined as a contract that conveys control of the right to use another party’s information technology (IT) software, alone or in combination with a tangible capital asset, as specified in the contract for a defined period of time (a “subscription term”); and

WHEREAS, under GASB Statement No. 96, a government entity generally should recognize a right-to-use subscription *asset*, and a corresponding subscription *liability*; and

WHEREAS, for certain IT subscriptions, either the initial price or present value of future subscription payments will be immaterial to the total value of the County’s SBITA assets and liabilities; and

WHEREAS, after review of the IT subscription contracts currently in place, county staff believes that a materiality threshold of \$100,000 is reasonable with respect to compliance with GASB Statement No. 96, as that figure represents less than 1% of total capital assets, less than 8% of the current value of IT subscription contracts and is consistent with GASB 87 materiality.

NOW, THEREFORE, BE IT RESOLVED that the Cabarrus County Board of Commissioners hereby adopts \$100,000 as the materiality threshold for subscription-based information technology arrangement (SBITAs) when determining whether to recognize such subscriptions as assets, and the cost related to same as liabilities, in compliance with GASB Statement No. 96.

BE IT FURTHER RESOLVED that the Board, upon the recommendation of the County Manager or the County Finance Director, may adjust the materiality threshold from time to time as may be needed or recommended for audit purposes.

Adopted this 19<sup>th</sup> day of June 2023.

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Stephen M. Morris, Chairman  
Cabarrus County Board of Commissioners

Attest:

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Clerk to the Board

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Health Insurance Fund Balance Budget Amendment

**BRIEF SUMMARY:**

The Finance Department annually reviews revenues and expenditures for the Health Insurance Internal Service Fund based on actual activity and estimated activity for the remainder of the fiscal year. Based on this analysis, a budget amendment has been prepared to ensure claims expenditures do not exceed the budget at fiscal year end. This budget amendment appropriates fund balance and increases the budget for health insurance claims.

**REQUESTED ACTION:**

Motion to adopt the budget amendment.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Jim Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

□ Budget Amendment

Date: June 19, 2023

Amount: 320,000.00

Dept. Head: James Howden - Finance

Department: Fund 610 - Health Insurance - ISF

Internal Transfer Within Department

Transfer Between Departments/Funds

X Supplemental Request

This budget amendment is to increase the budget for health insurance claims in the Health Insurance Internal Service Fund. The total budget for claims is being increased based on higher than average claims for the last two months of the fiscal year. This budget amendment appropriates fund balance.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
610	6	1917-6901	FUND BALANCE APPROPRIATED	22,240.60	320,000.00	-	342,240.60
610	9	1917-9645	HEALTH INSURANCE CLAIMS	14,251,792.00	320,000.00	-	14,571,792.00

Total 0.00

Budget Officer

Approved

Denied

Signature

Date

County Manager

Approved

Denied

Signature

Date

Board of Commissioners

Approved

Denied

Signature

Date

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Finance - Opioid Abatement Funding

**BRIEF SUMMARY:**

Cabarrus County has been awarded Opioid Abatement Funding. Per an agreement between Partners Health Care Management and Cabarrus County, Partners Health Care Management will reimburse Cabarrus County for activities and services listed in the agreement. The County will pay Cabarrus Health Alliance for these services and activities. The funding amount is \$91,514 and there is no County match. The grant period ends June 30, 2023. All expenditures for services and activities as of June 30, 2023 and a report describing utilization of the funds is due by July 05, 2023.

**REQUESTED ACTION:**

Motion to approve the budget amendment to budget revenues and expenditures for Opioid Abatement Funding.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Jim Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Budget Amendment
- Contract

## Budget Revision/Amendment Request

Date: JUNE 19, 2023

Amount: 91,514.00

Dept. Head: JAMES HOWDEN - FINANCE

Department: OTHER HUMAN SERVICES

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

This budget amendment is to budget revenues and expenditures for OPIOID Abatement Funding awarded to Cabarrus County. An agreement has been made between the Partners Health Management (Local Managed Entity | Managed Care Organization) and Cabarrus County. Partners Health Care Management will reimburse Cabarrus County for the following activities and services listed in the agreement: purchase of Narcan, Fentanyl Strips and targeted messaging campaign activities. The County will pay Cabarrus Health Alliance for these activities and services. The amount of the award is \$91,514 and there is no County match. The grant period ends June 30, 2023.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
001	6	5910-625901	LME   MCO Grant Award	-	91,514.00	-	91,514.00
001	9	5910-9705-OPIOD	Public Health Authority - OPIOID	-	91,514.00	-	91,514.00

### Budget Officer

Approved  
 Denied

### County Manager

Approved  
 Denied

### Board of Commissioners

Approved  
 Denied

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_

## CONTRACT BETWEEN

### PARTNERS HEALTH MANAGEMENT Area Authority/LME-MCO AND COUNTY OF CABARRUS A PROVIDER OF MH/DD/SA SERVICES

**THIS CONTRACT** is made between Partners Health Management, Area Authority/LME-MCO (herein known as the "LME"), and **COUNTY OF CABARRUS** (herein known as the "Provider"), operating under the laws of North Carolina. By means of this Contract, the Local Management Entity is establishing a relationship with Provider(s) who are reimbursed for activities and/or services as listed below.

**This Contract is effective July 1, 2022 through June 30, 2023**

#### Article I General Terms and Conditions

NOW, THEREFORE, the LME and the Provider herein are referred to as the "Parties", and agree as follows:

- 1. Nonproprietary information.** The Provider shall not publish or disseminate any advertising or proprietary business material either printed or electronically transmitted (including photographs, films, and public announcements) or any business papers and documents which identify the LME or its facilities without the prior written consent of the LME. Any documents, reports, or other products, with the exception of any and all proprietary business papers and documents, developed in connection with the performance of the Contract, shall be in the public domain and shall not be copyrighted or marketed for profit by the Provider, any consumer, or other entity.
- 2. Confidentiality.** The Provider shall protect the confidentiality of any and all items relating to this contractual agreement.
- 3. Dispute Resolution.** The parties shall attempt to resolve any disagreement between them before resorting to legal process.
- 4. Invalid Provisions.** If any term, provision, or condition of this Agreement is found to be illegal, void, or unenforceable to a court of competent jurisdiction, the rest of this Agreement shall remain in full force and effect. The invalidity or unenforceability of any term or provision hereof shall in no way affect the validity or enforceability of any other term or provision.
- 5. Hold Harmless.** To the extent permitted by law, both contracting parties and their agents, servants and employees agrees to hold the other contracting party and its agents, servants and employees harmless from and against any and all claims, expenses (including attorney fees), costs or liability for acts or omissions. If this agreement is terminated, the rights and obligations of the

parties under this agreement shall survive the termination of the agreement regarding any liability for acts or omissions that occurred prior to the termination.

6. **Independent Contractor.** This agreement is not intended and shall not be construed to create the relationship of agent, servant, employee, partnership, joint venture, or association between the contracting parties, their employees, partners, or agents. This independent contractor relationship shall not preclude the Provider from utilizing the service contracts for provision of professional services under this Contract in place of employment contracts. The Provider shall provide an up to date W-9 each Fiscal Year. The Provider shall assume responsibility of any and all personal and business taxes and will be issued a 1099 form annually.

7. **Mergers and Name Changes.** Each shall inform the other party in writing regarding any merger, name change, or change in ownership or control. This change may necessitate an amendment to the agreement.

8. **Applicable Law.** The laws of the State of North Carolina shall govern this agreement.

9. **Subcontracting.** This contract may not be subcontracted without prior written consent from the LME.

## **Article II** **Termination**

This contract may be terminated prior to the end date upon any of the following events:

1. **Mutual Agreement.** This contract may be terminated at any time by mutual consent of both parties or 30 days after one of the contracting parties gives notice of termination.

2. **Funding Reduction.** This contract may be terminated in the event the funding mechanism, whether state, county or federal, is withdrawn, in part or in whole at the option of the LME with 30 days written notice to the Provider.

3. **Cause Termination.**

a) The LME may immediately terminate this Contract for cause. The cause for termination shall be documented in writing and presented to the Provider detailing the grounds for termination.

b) The LME may terminate this Contract at its discretion if Provider is acquired, merged or experiences a change in ownership or control.

c) The Provider may terminate this Contract upon breach of contract terms by the LME and upon 30 days written notice to the LME.

## **Article III** **Contract Responsibility**

1. **Notice.** Either Party may at any time change its address for notification purposes by mailing a notice to the other Party at the address designated by that Party. The new address shall be effective

on the date specified in such notice, or if no date is specified, on the tenth (10th) day following the date such notice is received.

**2. Entire Agreement.** This contract contains the entire agreement of the parties and there are no representations, inducements or other provisions other than those expressed in writing herein. All changes, additions or deletions must be in writing and signed by both parties.

**IN WITNESS WHEREOF**, the Parties have caused this Contract to be executed in multiple copies, each of which shall be deemed an original, as the act of said Party; and each Party will retain a fully executed copy. Each individual signing below warrants he/she is duly authorized by the Party to sign this Contract and to bind the Party to the terms and conditions of this Contract.

**Provider Name:** COUNTY OF CABARRUS

**Address:** 65 Church Street PO Box 707 Concord, NC 28025

**Phone:** 704-920-2139

**Provider's Federal ID:** 56-6000281

DocuSigned by:  
Mike Downs

5/1/2023 | 6:25 AM PDT

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**PROVIDER AUTHORIZED SIGNATURE**

**DATE**

Mike Downs

County Manager

---

**PRINTED NAME**

**TITLE**

Partners Health Management  
901 S. New Hope Road  
Gastonia, NC 28054

DocuSigned by:

(W. Rhett Melton

5/5/2023 | 1:11 PM EDT

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**CHIEF EXECUTIVE OFFICER**

**DATE**

Per G.S. 159-28, this instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.

DocuSigned by:

Susan Davis Lackey

4/18/2023 | 12:11 PM EDT

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**CHIEF FINANCIAL OFFICER**

**DATE**

**Attachment A**  
**REIMBURSEMENT SCHEDULE FOR SERVICES**

**COUNTY OF CABARRUS**

**Funding Term: Effective July 1, 2022 through June 30, 2023**

**1. Services to be Provided:** Cabarrus County has been awarded \$91,514 in Opioid Abatement Funding to purchase Nasal Narcan, Fentanyl Test Strips, and to support a county-wide messaging campaign to raise awareness of local and national resources to access treatment, as well as where to access free naloxone. Narcan/Naloxone and Fentanyl Test Strips will be utilized for the Narcan vending machine and distributed to other community agencies. Distribution sites in Cabarrus County include but are not limited to Cabarrus Health Alliance, Opportunity House, Salvation Army, Daymark Recovery Services, EMS, School Nurses, and others.

Purpose	Amount
	<b>07/01/2022 - 06/30/2023</b>
Nasal Narcan	72,744.00
Fentanyl Test Strips	14,270.00
Targeted Messaging Campaign	4,500.00
	<b>91,514.00</b>

Invoices should include receipts or documentation for the purchase of items needed for the project.

A report describing utilization of these funds is due with the final invoice/receipts by **July 5, 2023**, and should be sent to [nonucr@partnersbhm.org](mailto:nonucr@partnersbhm.org)

**2. Reimbursement:** The maximum amount to be reimbursed for term above is **\$91,514.00**. Partners Health Management will pay contract provider upon receipt of an appropriate invoice and backup documentation (as applicable and required as noted above). Invoices are normally processed within thirty days of receipt.

**3. Submission of Invoices:** The Provider shall submit the monthly invoice no later than 30 days after services has occurred.

**4. Funding Source:** Allocation 23-PA-41 = \$91,514.00

- **MAIL INVOICES TO:** **Partners Health Management**  
**901 S. New Hope Road**  
**Gastonia, NC 28054**  
**Attn: Finance – NonUCR Billing**  
**Email: [nonucr@partnersbhm.org](mailto:nonucr@partnersbhm.org)**

It is understood and agreed by Provider that any agreements by LME to pay any amounts to Provider on any basis other than fee-for-service, are applicable solely to the contract period, and that such payments shall not obligate LME to fund Provider in a manner other than on a fee-for-services basis in this Contract or any future Contracts

## ATTACHMENT B

### **PARTNERS HEALTH MANAGEMENT BUSINESS ASSOCIATE ADDENDUM**

This Agreement is made effective July 1, 2022 by and between Partners Health Management ("Covered Entity") and **COUNTY OF CABARRUS** ("Business Associate"), (collectively the "Parties").

#### **1. BACKGROUND**

- a. Covered Entity and Business Associate are parties to one or more contracts ("Contract(s)") whereby Business Associate agrees to perform certain services for or on behalf of Covered Entity.
- b. Covered Entity is an organizational unit of the North Carolina Department of Health and Human Services (the "Department") that has been designated in whole or in part by the Department as a health care component for purposes of the HIPAA Privacy and Security Rules.
- c. The relationship between Covered Entity and Business Associate is such that the Parties believe Business Associate is or may be a "business associate" within the meaning of the HIPAA Privacy and Security Rules.
- d. The Parties enter into this Business Associate Addendum to the Contract(s) with the intention of complying with the HIPAA Privacy and Security Rules provision that a covered entity may disclose protected health information to a business associate, and may allow a business associate to create or receive protected health information on its behalf, if the covered entity obtains satisfactory assurances that the business associate will appropriately safeguard the information.

#### **2. DEFINITIONS**

Unless some other meaning is clearly indicated by the context, the following terms shall have the following meaning in this Agreement:

- a. "Electronic Protected Health Information" shall have the same meaning as the term "electronic protected health information" in 45 C.F.R. § 160.103.
- b. "HIPAA" means the Administrative Simplification Provisions, Sections 261 through 264, of the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191, as modified and amended by the Health Information Technology for Economic and Clinical Health ("HITECH") Act, Title XIII of Division A and Title IV of Division B of the American Recovery and Reinvestment Act of 2009, Public Law 111-5.
- c. "Individual" shall have the same meaning as the term "individual" in 45 C.F.R. § 160.103 and shall include a person who qualifies as a personal representative in accordance with 45 C.F.R. § 164.502(g).
- d. "Privacy and Security Rules" shall mean the Standards for Privacy of Individually Identifiable Health Information and the Security Standard for the Protection of electronic Protected Health information set out at 45 C.F.R. Parts 160 and 164.
- e. "Protected Health Information" shall have the same meaning as the term "protected health

information" in 45 C.F.R. § 160.103, limited to the information created or received by Business Associate from or on behalf of Covered Entity.

- f. "Required By Law" shall have the same meaning as the term "required by law" in 45 C.F.R. § 164.103.
- g. "Secretary" shall mean the Secretary of the United States Department of Health and Human Services or the person to whom the authority involved has been delegated.
- h. Unless otherwise defined in this Agreement, terms used herein shall have the same meaning as those terms have in the Privacy and Security Rules.

### **3. OBLIGATIONS OF BUSINESS ASSOCIATE**

- a. Business Associate agrees to not use or disclose Protected Health Information other than as permitted or required by this Agreement or as Required by Law.
- b. Business Associate agrees to use appropriate safeguards and comply, where applicable, with subpart C of 45 C.F.R. Part 164 with respect to electronic protected health information, to prevent use or disclosure of the Protected Health Information other than as provided for by this Agreement.
- c. Business Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Business Associate of a use or disclosure of Protected Health Information by Business Associate in violation of the requirements of this Agreement.
- d. Business Associate agrees to report to Covered Entity any use or disclosure of the Protected Health Information not provided for by this Agreement of which it becomes aware, including breaches of unsecured protected health information as required by 45 C.F.R. § 164.410.
- e. Business Associate agrees, in accordance with 45 C.F.R. § 164.502(e)(1) and § 164.308(b)(2), to ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of Business Associate agree to the same restrictions and conditions that apply to Business Associate with respect to such information.
- f. Business Associate agrees to make available protected health information as necessary to satisfy Covered Entity's obligations in accordance with 45 C.F.R. § 164.524
- g. Business Associate agrees to make available Protected Health Information for amendment and incorporate any amendment(s) to Protected Health Information in accordance with 45 C.F.R. § 164.526.
- h. Unless otherwise prohibited by law, Business Associate agrees to make internal practices, books, and records relating to the use and disclosure of Protected Health Information received from, or created or received by Business Associate on behalf of, Covered Entity available to the Secretary for purposes of the Secretary determining Covered Entity's compliance with the Privacy and Security Rules.
- i. Business Associate agrees to make available the information required to provide an accounting of disclosures of Protected Health Information in accordance with 45 C.F.R. § 164.528.

### **4. PERMITTED USES AND DISCLOSURES**

- a. Except as otherwise limited in this Agreement or by other applicable law or agreement, if the Contract(s) permit(s), Business Associate may use or disclose Protected Health Information to perform functions, activities, or services for, or on behalf of, Covered Entity as specified in the Contract(s), provided that such use or disclosure:
  - 1) would not violate the Privacy and Security Rules if done by Covered Entity; or
  - 2) would not violate the minimum necessary policies and procedures of the Covered Entity.

- b. Except as otherwise limited in this Agreement or by other applicable law or agreements, if the Contract(s) permit(s), Business Associate may disclose Protected Health Information for the proper management and administration of the Business Associate or to carry out the legal responsibilities of the Business Associate, provided that:
  - 1) the disclosures are Required By Law; or
  - 2) Business Associate obtains reasonable assurances from the person to whom the information is disclosed that it will remain confidential and will be used or further disclosed only as Required By Law or for the purpose for which it was disclosed to the person, and the person notifies the Business Associate of any instances of which it is aware in which the confidentiality of the information has been breached.
- c. Except as otherwise limited in this Agreement or by other applicable law or agreements, if the Contract(s) permit(s), Business Associate may use Protected Health Information to provide data aggregation services to Covered Entity as permitted by 45 C.F.R. § 164.504(e)(2)(i)(B).
- d. Notwithstanding the foregoing provisions, Business Associate may not use or disclose Protected Health Information if the use or disclosure would violate any term of the Contract(s) or other applicable law or agreements.

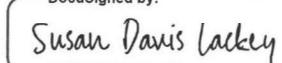
## 5. TERM AND TERMINATION

- a. **Term.** This Agreement shall be effective as of the effective date stated above and shall terminate when the Contract(s) terminate(s).
- b. **Termination for Cause.** Upon Covered Entity's knowledge of a material breach by Business Associate, Covered Entity may, at its option:
  - 1) Provide an opportunity for Business Associate to cure the breach or end the violation, and terminate this Agreement and services provided by Business Associate, to the extent permissible by law, if Business Associate does not cure the breach or end the violation within the time specified by Covered Entity;
  - 2) Immediately terminate this Agreement and services provided by Business Associate, to the extent permissible by law; or
  - 3) If neither termination nor cure is feasible, report the violation to the Secretary as provided in the Privacy and Security Rules.
- c. **Effect of Termination.**
  - 1) Except as provided in paragraph (2) of this section or in the Contract(s) or by other applicable law or agreements, upon termination of this Agreement and services provided by Business Associate, for any reason, Business Associate shall return or destroy all Protected Health Information received from Covered Entity, or created or received by Business Associate on behalf of Covered Entity. This provision shall apply to Protected Health Information that is in the possession of subcontractors or agents of Business Associate. Business Associate shall retain no copies of the Protected Health Information.
  - 2) In the event that Business Associate determines that returning or destroying the Protected Health Information is not feasible, Business Associate shall provide to Covered Entity notification of the conditions that make return or destruction not feasible. Business Associate shall extend the protections of this Agreement to such Protected Health Information and limit further uses and disclosures of such Protected Health Information to those purposes that make the return or destruction infeasible, for so long as Business Associate maintains such Protected Health Information.

## 6. GENERAL TERMS AND CONDITIONS

- a. This Agreement amends and is part of the Contract(s).
- b. Except as provided in this Agreement, all terms and conditions of the Contract(s) shall remain in force and shall apply to this Agreement as if set forth fully herein.
- c. In the event of a conflict in terms between this Agreement and the Contract(s), the interpretation that is in accordance with the Privacy and Security Rules shall prevail. In the event that a conflict then remains, the Contract's(s') terms shall prevail so long as they are in accordance with the Privacy and Security Rules.
- d. A breach of this Agreement by Business Associate shall be considered sufficient basis for Covered Entity to terminate the Contract(s) for cause.

### SIGNATURES:

DocuSigned by:  
  
Susan Davis Lackey  
0A97C2CB0EE8483

**Covered Entity**

LME/MCO

DocuSigned by:  
  
Mike Downs  
252DB2E96C2D460...

**Business Associate**

Provider

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Human Resources - Fire Services Compensation

**BRIEF SUMMARY:**

Fire Services Operations has developed a proposed career development plan for department employees. As part of this project we have re-evaluated the firefighter position and have a recommendation for movement as a "hot job".

**REQUESTED ACTION:**

Motion to approved proposed compensation changes for Fire Services Squad 410.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Lundee Covington, HR Director

Jason Burnett, Emergency Management Director

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

---

**ATTACHMENTS:**

□ Hot Jobs List

6/5/2023

PROPOSED RECLASSIFICATIONS - PAY GRADE CHANGE				RANGES PRIOR TO COLA				
Current				New				
Classification Title	Grade	Minimum	Maximum	Classification Retitle/Notes	Current Employees	Grade	Minimum	Maximum
<b>Fire Services</b>								
Entry Level Firefighter (PT)	11 (24 HR)	\$34,698.04	\$54,155.40		3	12 (24 HR)	\$36,103.60	\$56,194.84
Firefighter	12 (24 HR)	\$36,103.60	\$56,194.84		8	14 (24 HR)	\$39,824.20	\$61,954.88
				Sub total		11		
				TOTAL		11		

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Human Resources - Personnel Ordinance Update

**BRIEF SUMMARY:**

Updates to reflect a new longevity bonus program for county employees with greater than 5 years of service. This language will replace the existing Ordinance section that ended the former longevity program July 1, 1993.

**REQUESTED ACTION:**

Motion to approve Personnel Ordinance changes.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Lundee Covington, HR Director

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

---

**ATTACHMENTS:**

- Personnel Ordinance Updates

## **Cabarrus County Personnel Ordinance**

Requesting New Language to replace the current language below from the former plan that was discontinued in July 1993.

### **Article III. The Pay Plan**

#### **Section 11. Longevity Pay Plan PROPOSED**

The Cabarrus County Longevity Pay enhances employee retention by providing payments to eligible employees. Permanent full-time and part-time employees become eligible with at least five years of continuous (uninterrupted) service with Cabarrus County. The eligibility date utilized for this program is an effective date on or before October 1 of each year, meaning years of service as of that date will be utilized based on the schedule below. Years of service are based on the employee's most recent date of hire into an eligible position. Longevity payments will be made annually prior to the end of the calendar year to those still employed at the date of the payout.

#### **Full-Time Schedule**

<b>Years of Service</b>	<b>Annual Amount</b>
5 to less than 10 years of service	<b>\$750</b>
10 to less than 15 years of service	<b>\$1,000</b>
15 to less than 20 years of service	<b>\$1,500</b>
20 to less than 25 years of service	<b>\$2,000</b>
25+ years of service	<b>\$2,500</b>

#### **Part-Time Schedule (9102, 9103, Cooperative Extension)**

<b>Years of Service</b>	<b>Annual Amount</b>
5 to less than 10 years of service	<b>\$375</b>
10 to less than 15 years of service	<b>\$500</b>
15 to less than 20 years of service	<b>\$750</b>
20 to less than 25 years of service	<b>\$1,000</b>
25+ years of service	<b>\$1,250</b>

#### **Current Language:**

#### **Section 11. Longevity Pay Plan**

The Cabarrus County Longevity Pay Plan was discontinued on July 1, 1993. Each permanent full time employee receiving this benefit prior to this date will continue to do so. This "grandfathered" benefit will be paid in the biweekly pay checks, at an amount equal to that which was in effect on June 30, 1993. Recipients will lose this benefit when changing from regular full time to regular part time employment status or upon separation from employment with Cabarrus County. Once longevity pay is terminated it will not be reinstated.

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Infrastructure and Asset Management - Rob Wallace Phase II B Bid Award

**BRIEF SUMMARY:**

On April 5, 2023 Cabarrus County advertised a Request for Bid for the Rob Wallace Park Phase II B project. A pre-bid meeting was held on site on April 27, 2023. Bids were received on May 11, 2023. Four (4) bids were received for the project. Based on the bid tabulation, staff recommends Ike's Construction, Inc. be awarded the contract for the project, which will commence the second week of July 2023.

**REQUESTED ACTION:**

Motion to suspend the Rules of Procedure due to time constraints.

Motion to approve the contract between Cabarrus County and Ike's Construction, Inc. and authorize the County Manager to execute the contract on behalf of Cabarrus County, subject to review or revisions by the County Attorney.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Michael Miller, Director of Design and Construction

Kyle Bilafer, Assistant County Manager

**BUDGET AMENDMENT REQUIRED:**

No

## **COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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### **ATTACHMENTS:**

- RWP Phase II B Certified Bid Tabulation

**Rob Wallace Park Phase 2B  
Cabarrus County  
Bid Date: May 11, 2023 at 2:00 P.M.**

## Bid for Single Prime

I hereby acknowledge that this is a true and accurate tabulation of bids received for Rob Wallace Park Phase 2B May 11, 2023 at 2:00 P.M..

Jeff Ashbaugh, PLA  
Alfred Benesch & Company  
2359 Perimeter Pointe Parkway, Suite 350  
Charlotte, NC 28208



# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Juvenile Crime Prevention Council - Approval of FY 23-24 JCPC Certification

**BRIEF SUMMARY:**

The JCPC's FY 23-24 County Funding Plan remains pending at this time due to a program's appeal following the funding recommendations made during its April 19 meeting. The Plan itself cannot be presented for BOC approval until the appeal is fully resolved. However, it is requested that the JCPC Certification be considered for approval as the \$15,500 recommended for JCPC Administration remains unchanged since FY 2017-2018.

**REQUESTED ACTION:**

Motion to approve the JCPC Certification as presented with the understanding that the FY 23-24 County Funding Plan will be presented for approval when the appeal is fully resolved.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Jim Howden, Finance Director

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- FY 23-25 JCPC Certification

## Juvenile Crime Prevention Council Certification

Fiscal Year: 2023-24 \_\_\_\_\_

County: <b>CABARRUS</b>	Date:
G.S. 143B-853 allows for a 2-year funding cycle for programs that meet the requirements of the statute and have been awarded funds in a prior funding cycle. Indicate below if the JCPC plans to allow for a 1-year or 2-year funding cycle.	
<b>(Check 2-year if the JCPC has a mixture of 1-year and 2-year funding.)</b>	
1-Year Funding: FY 2023-24	2-Year Funding: FY _____ and FY _____

### CERTIFICATION STANDARDS

#### **STANDARD #1 - Membership**

- A. Have the members of the Juvenile Crime Prevention Council been appointed by county commissioners?  Yes
- B. Is the membership list attached?  Yes
- C. Are members appointed for two-year terms and are those terms staggered?  Yes
- D. Is membership reflective of social-economic and racial diversity of the community?  Yes
- E. Does the membership of the Juvenile Crime Prevention Council reflect the required positions as provided by N.C.G.S. §143B-846?  Yes

If not, which positions are vacant and why?

Cabarrus Co JCPC has no vacant positions at this time.

#### **STANDARD #2 - Organization**

- A. Does the JCPC have written Bylaws?  Yes
- B. Bylaws are  attached or  on file (Select one.)
- C. Bylaws contain Conflict of Interest section per JCPC policy and procedure.  Yes
- D. Does the JCPC have written policies and procedures for funding and review?  Yes
- E. These policies and procedures  attached or  on file. (Select one.)
- F. Does the JCPC have officers and are they elected annually?  Yes

JCPC has:  Chair;  Vice-Chair;  Secretary;  Treasurer.

#### **STANDARD #3 - Meetings**

- A. JCPC meetings are considered open and public notice of meetings is provided.  Yes
- B. Is a quorum defined as the majority of membership and required to be present in order to conduct business at JCPC meetings?  Yes
- C. Does the JCPC meet six (6) times a year at a minimum?  Yes
- D. Are minutes taken at all official meetings?  Yes
- E. Are minutes distributed prior to or during subsequent meetings?  Yes

## Juvenile Crime Prevention Council Certification (cont'd)

### STANDARD #4 - Planning

- A. Does the JCPC conduct a minimum of biennial planning process which includes a needs assessment, monitoring of programs and funding allocation process? \_\_\_\_\_ Yes
- B. Is this Annual or Biennial Plan presented to the Board of County Commissioners and to DPS? \_\_\_\_\_ Yes
- C. Is the Funding Plan approved by the full council and submitted to Commissioners for their approval? \_\_\_\_\_ Yes

### STANDARD #5 - Public Awareness

- A. Does the JCPC communicate the availability of funds to all public and private non-profit agencies which serve children or their families and to other interested community members? ( RFP, distribution list, and article attached) \_\_\_\_\_ Yes
- B. Does the JCPC complete a minimum of biennial needs assessment and make that information available to agencies which serve children or their families, and to interested community members? \_\_\_\_\_ Yes

### STANDARD #6 – No Overdue Tax Debt

- A. As recipient of the county DPS JCPC allocation, does the County certify that it has no overdue tax debts, as defined by N.C.G.S. §105-243.1, at the Federal, State, or local level? \_\_\_\_\_ Yes

Briefly outline the plan for correcting any areas of standards non-compliance.

Not applicable

Having complied with the Standards as documented herein, the Juvenile Crime Prevention Council may use up to \$15,500 of its annual Juvenile Crime Prevention fund allocation to cover administrative and related costs of the council. Budget pages (sections VI and VII) printed from NCALLIES detailing the expenditure's must be attached to this certification.

The JCPC Certification must be received by DPS by June 30<sup>th</sup> annually.

### JCPC Administrative Funds SOURCES OF REVENUE

#### DPS JCPC

Only list requested funds for  
JCPC Administrative Budget.

\_\_\_\_\_ \$15,000

#### Local

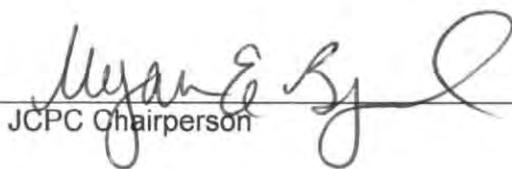
\_\_\_\_\_

#### Other

\_\_\_\_\_ 500

#### Total

\_\_\_\_\_ \$15,500

  
JCPC Chairperson

5/17/2023  
Date

Chairman, Board of County Commissioners or Designee

Date

## **Juvenile Crime Prevention Council Certification (cont'd)**

---

DPS Designated Official

Date

## Juvenile Crime Prevention Council Certification (cont'd)

**CABARRUS**

**County**

**FY 2023-24**

Instructions: N.C.G.S. § 143B-846 specifies suggested members be appointed by county commissioners to serve on local Juvenile Crime Prevention Councils. In certain categories, a designee may be appointed to serve. Please indicate the person appointed to serve in each category and his/her title. Indicate appointed members who are designees for named positions. Indicate race and gender for all appointments.

<b>Specified Members</b>	<b>Name</b>	<b>Title</b>	<b>Designee</b>	<b>Race</b>	<b>Gender</b>
1) School Superintendent or designee	Amy Jewell	Director of Student & Family Support	<input checked="" type="checkbox"/>	W	F
2) Chief of Police or designee	Matthew Greer	Sergeant	<input checked="" type="checkbox"/>	W	M
3) Local Sheriff or designee	Travis Burke	Deputy	<input checked="" type="checkbox"/>	W	M
4) District Attorney or designee	Ashlie Shanley	District Attorney	<input type="checkbox"/>	W	F
5) Chief Court Counselor or designee	Emily Coltrane	DPS Piedmont Area Administrator	<input checked="" type="checkbox"/>	W	F
6) Director, Local Management Entity/Managed Care Organization (LME/MCO), or designee	LaShay Avery	Regional Dir Community Operations	<input type="checkbox"/>	B	F
7) Director DSS or designee	Sharon Reese	Program Mgr Child Welfare Services	<input checked="" type="checkbox"/>	B	F
8) County Manager or designee	James Howden	Co Finance Director	<input checked="" type="checkbox"/>	W	M
9) Substance Abuse Professional	Terry Wise	Substance Abuse Profess		W	M
10) Member of Faith Community	Steven Ayers	Minister		W	M
11) County Commissioner	Chris Measmer	Commissioner		W	M
12) A person under the age of 21	Mikayla Branch	Student		B	F
13) A person under the age of 21, or a member of the public representing the interests of families of at-risk juveniles	Heather Jones	Parent		B	F
14) Juvenile Defense Attorney	Heather Mobley	Juvenile Defense Attorney		W	F
15) Chief District Judge or designee	Christy Wilhelm	Chief Judge	<input type="checkbox"/>	W	F
16) Member of Business Community	Mark Boles	Business Owner/Operator		W	M
17) Local Health Director or designee	Sonja Bohannon-Thacker	CHA Director of Behavioral Health	<input type="checkbox"/>	W	F

**Juvenile Crime Prevention Council Certification (cont'd)**

18) Rep. United Way/other non-profit	Carolyn Carpenter	Non-Profit Rep		W	F
19) Representative/Parks and Rec.	Jacob Wentink	Sr Park Ranger		W	M
20) County Commissioner appointee	Ashley Fitch	At Large		B	F
21) County Commissioner appointee	Connie Philbeck	At Large		W	F
22) County Commissioner appointee	Jamica LaFranque	At Large		B	F
23) County Commissioner appointee	Adrian Attaway	At Large (SRO for KCS)		B	M
24) County Commissioner appointee	Megan Baumgardner	Attorney		W	F
25) County Commissioner appointee	Marta Meares	At Large		W	F
26) County Commissioner appointee	Michelle Wilson	At Large		W	F

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

---

**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Planning and Development - Community Development Budget Amendment

**BRIEF SUMMARY:**

The Housing and Home Improvement program that is available through the Home and Community Care Block Grant requires that staff request a donation to the program for services rendered if the individual is over a certain income. The donation is voluntary. All donations are required by the grant program to be applied back to the program to expand service. The attached budget amendment is to allocate donated revenues to expenses in order to follow the grant guidelines.

**REQUESTED ACTION:**

Motion to adopt the budget amendment.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Kelly Sifford, AICP, Assistant County Manager  
Robert Anderson, Community Development Planner

**BUDGET AMENDMENT REQUIRED:**

Yes

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Budget Amendment

## Budget Revision/Amendment Request

Date: **6/19/2023**

Amount: **190.00**

Dept. Head: **Kelly Sifford**

Department: **Community Development**

Internal Transfer Within Department

Transfer Between Departments/Funds

Supplemental Request

Purpose: To allocate the consumer contributions we have received to an expense category per grant guidelines.

Fund	Indicator	Department/ Object/ Project	Account Name	Approved Budget	Increase Amount	Decrease Amount	Revised Budget
001	6	3250-6622	Home Improvement Program Fees	300.00	190.00		490.00
001	9	3250-9493-HHIHR	Operations	20,359.00	190.00		20,549.00
<b>Total</b>							<b>21,039.00</b>

### Budget Officer

Approved  
 Denied

### County Manager

Approved  
 Denied

### Board of Commissioners

Approved  
 Denied

*Signature*

*Sianature*

*Signature*

*Date*

*Date*

*Date*

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items for Action

**SUBJECT:**

Planning and Development - Community Development Grant Required Plans and Programs

**BRIEF SUMMARY:**

Cabarrus County participates in a HOME Partnership program under the Cabarrus/Iredell/Rowan HOME Consortium and at times participates in CDBG programs that support various housing and economic development activities in Cabarrus County. These programs require a series of plans and programs to address various issues such as Fair Housing, Section 3, Anti-Displacement, Section 504, Citizen Participation, Procurement, Equal Opportunities and more. Attached are the required plans and programs for the next adoption period which will extend our program until June 2026.

**REQUESTED ACTION:**

Motion to adopt the Community Development Plans and Programs and Resolution as presented.

**EXPECTED LENGTH OF PRESENTATION:**

10 Minutes

**SUBMITTED BY:**

Robert Anderson, Community Development Planner

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

- Fair Housing Resolution
- Fair Housing Plan
- Antidisplacement
- Citizen Participation
- Equal Opportunity
- Code of Conduct
- Procurement Policy
- Section 3 Plan



## CABARRUS COUNTY

### FAIR HOUSING RESOLUTION For the Period of June 19, 2023-June 19, 2026

**WHEREAS**, The County of Cabarrus seeks to protect the health, safety, and welfare of its residents; and

**WHEREAS**, citizens seek safe, sanitary and habitable dwellings in all areas of the County; and

**WHEREAS**, the County finds the denial of equal housing opportunities because of religion, race, creed, color, sex, national origin, handicap, or age legally wrong and socially unjust; and

**WHEREAS**, the denial of equal housing opportunities in housing accommodations is detrimental to public welfare and public order; and

**WHEREAS**, the County finds the practice of discrimination against any citizen in housing a denial of his equal rights and equal opportunity to seek better living conditions and to develop community pride;

**NOW, THEREFORE, BE IT ORDAINED**, by the Board of Commissioners of the County of Cabarrus, North Carolina, that:

Section I. The Board of Commissioners of the County of Cabarrus has declared it an official policy of the County government that there shall not be allowed discrimination in the terms and conditions for buying or renting housing in the County of Cabarrus.

Section II. All business groups and individual citizens of the County of Cabarrus are urged to respect and implement this policy.

Section III. The Planning and Development Director or their designate, is the official authorized to (1) receive and document complaints regarding housing discrimination in Cabarrus County; and (2) refer such complaints to the North Carolina Human Relations Commission for investigation, conciliation and resolution.

**ADOPTED**, this 19<sup>th</sup> day of June, 2023.

By: \_\_\_\_\_  
Stephen M. Morris, Chairman  
Board of Commissioners

ATTEST:

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Clerk to the Board

**Recipient's Plan to Further Fair Housing**  
**For June 19, 2023-June 19, 2026**

**Grantee: Cabarrus County**

**Recipient's Address: P. O. Box 707, Concord,  
NC 28026**

**Contact Person: Susie Morris**

**Contact Phone #:704-920-2858**

**Contact Email:samorris@cabarruscounty.us TDD #:704-920-3000**

**I. Indicate if the Recipient will be affirmatively furthering fair housing for the first time or has implemented specific activities in the past.**

First Time \_\_\_\_\_ Past Activities X \_\_\_\_\_

**II. Identify and analyze obstacles to affirmatively furthering fair housing in recipient's community. (Use additional pages as necessary)**

In the recently completed Analysis of Impediments to Fair Housing, the consultants found that the primary barriers to housing choice in Cabarrus County are generally economic and educational in nature. More specifically, the issues appear to include dealing with the general public's understanding of Fair Housing rights, the home buying process, the number of affordable accessible units available and access to affordable loan packages and loan modifications promoting housing choice.

- **Availability of Affordable Units-** Cabarrus County has experienced tremendous growth in the past five years. Production of housing units has not kept pace with population growth. The lack of units has caused less vacant units and less affordable units in the community as a whole resulting in less housing choice. Client service based non-profits report an insufficient number of accessible units as well as units that provide supportive and/or transitional services.
- **Fair Housing Awareness.** Cabarrus County has had some fair housing complaints in the past few years reported directly to the Human Relations Council. It is possible that some fair housing violations go unreported due to a lack of understanding or knowledge of the rights of protected persons and families. Awareness in the private sector, as well as with the average individual, is a crucial step in addressing this particular barrier. Cabarrus County works with the local municipalities and nonprofits to provide fair housing information to citizens and businesses.
- **Knowledge of the Home buying process and associated costs.** Many families or individuals wishing to move into homeownership are not informed about the process of purchasing a home. This lack of knowledge may make them vulnerable to unscrupulous realtors, predatory lenders and poor loans which can

limit housing choice through cost. Additionally, people new to homeownership may not understand the cost of home maintenance and budgeting for those and other associated costs (insurance, taxes, etc).

- **Transportation.** Changes in housing growth patterns in recent years have lead to more suburban housing options in Cabarrus County. However, transportation from these areas to employment and services may be a limiting factor for some families in accessing these housing choices. Economic or physical factors may limit the ownership of a vehicle, which may in turn limit access from these housing options to employment and services.

**III. Will the above activities apply to the total municipality or county?**

Yes X No \_\_\_\_\_

**If no, provide an explanation.**

(Use additional pages as necessary)

**IV. Briefly describe the quarterly activities that the recipient will undertake over the active period of the grant to affirmatively further fair housing in their community. A time schedule and estimated cost for implementation of these activities must be included. *Activities must be scheduled for implementation at least on a quarterly basis.* (Use attached table)**

**Grantee: Cabarrus County**

<b>Quarterly Fair Housing Activity</b>	<b>Months</b>	<b>Year</b>	<b>Estimated Cost</b>	<b>Actual Cost</b>
Creation and adoption of the recently completed Fair Housing Plan and the Analysis of Impediments to Fair Housing.	June-Sept 2023	2023	\$5500	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and newspaper advertisement.	Oct- Dec 2023	2023	\$350	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and placement of pamphlets in government offices, libraries, and Department of Human Services.	Jan- March 2024	2024	\$40	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and newspaper advertisement publishing fair housing law and TDD number for complaints. Joint fair housing event in conjunction with other local jurisdictions.	April- June 2024	2024	\$300	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and provide Fair Housing information and offering technical assistance to nonprofit agencies and the Department of Human Services in Cabarrus County who serve potentially protected groups such as programs that provide homebuyer assistance and rental assistance. Mail fliers and make phone calls to raise awareness.	July- Sept 2024	2024	\$50	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and local cable television advertisement regarding Fair Housing in English and Spanish.	Oct- Dec 2024	2024	\$0	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and newspaper advertisement publishing fair housing law and TDD number for complaints.	Jan- March 2025	2025	\$250	

Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and placement of pamphlets in government offices, libraries, and Department of Human Services. Fair Housing event with other local jurisdictions.	April-June 2025	2025	\$340	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and local cable television advertisement regarding Fair Housing in English and Spanish.	July-Sept 2025	2025	\$0	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and provide Fair Housing information and offering technical assistance to nonprofit agencies and the Department of Human Services in Cabarrus County who serve potentially protected groups such as programs that provide homebuyer assistance and rental assistance. Mail fliers and make phone calls to raise awareness.	Oct-Dec 2025	2025	\$50	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and update Fair Housing pamphlets at government offices, libraries and the Cabarrus County Department of Human Services.	Jan-March 2026	2026	\$40	
Cabarrus County Website Advertisement for Fair Housing (English and Spanish) and provide information to the local realtors' association regarding Fair Housing. Joint Fair Housing event with other local jurisdictions.	April-June 2026	2026	\$350	

V. **Describe recipient's method of receiving and resolving housing discrimination complaints. This may be either a procedure currently being implemented or one to be implemented under Cabarrus County grants. Include a description of how the recipient informs the public about the complaint procedures.** (Use additional pages as necessary)

- 1) Any person or persons wishing to file a complaint of housing discrimination in the county may do so by **informing the Cabarrus County Planning and Development Director** of the facts and circumstance of the alleged discriminatory acts or practice.
- 2) Upon receiving a housing discrimination complaint, the **Cabarrus County Planning and Development Director** shall acknowledge the complaint within **10 days in writing** and inform the North Carolina Human Relations Commission about the complaint.
- 3) The **Cabarrus County Planning and Development Director** shall **offer assistance** to the Commission in the investigation and reconciliation of all housing discrimination complaints which are based on events occurring in the County.
- 4) The **Cabarrus County Planning and Development Director** shall **publicize** in the local newspaper, with the TDD# 704-920-3000, who is the local agency to contact with housing discrimination complaints.

**Approved By:**

Stephen M. Morris

Chairman, Cabarrus County  
Board of Commissioners

Signature

Date

**CABARRUS COUNTY  
RESIDENTIAL ANTIDISPLACEMENT AND  
RELOCATION ASSISTANCE PLAN  
UNDER SECTION 104(d) OF THE HOUSING AND  
COMMUNITY DEVELOPMENT ACT OF 1974, AS AMENDED**

HOME/CDBG programs  
June 19, 2023- June 19, 2026

The County will replace all occupied and vacant occupiable low/moderate-income dwelling units demolished or converted to a use other than as low/moderate-income housing as a direct result of activities assisted with funds provided under the Housing and Community Development Act of 1974, as amended, as described in 24 CFR 570.606(b)(1).

All replacement housing will be provided within three years of the commencement of the demolition or rehabilitation relating to conversion. Before obligating or expending funds that will directly result in such demolition or conversion, the County will make public and submit to the appropriate governing agency with the following information in writing:

1. A description of the proposed activity;
2. A general location on a map and approximate number of dwelling units by size (number of bedrooms) that will be demolished or converted to a use other than as low/moderate-income dwelling units as a direct result of the assisted activity;
3. A time schedule for the commencement and completion of the demolition or conversion;
4. The general location on a map and approximate number of dwelling units by size (number of bedrooms) that will be provided as replacement dwelling units;
5. The source of funding and a time schedule for the provision of the replacement units; and
6. The basis for concluding that each replacement dwelling unit will remain a low/moderate-income dwelling unit for at least 10 years from the date of initial occupancy.

The County will provide relocation assistance, as described in 24 CFR 570.606(b)(2), to each low/moderate-income household displaced by the demolition or housing or by the conversion of a low/moderate-income dwelling to another use as a direct result of assisted activities.

Consistent with the goals and objectives of activities assisted under the act, we will take the following steps to minimize the displacement of persons from their homes:

1. *No housing unit will be demolished that, after inspection, has been found to be in such structural condition that it can be repaired for \$25.00 per square foot up to a maximum of \$25,000 per structure.*
2. No housing unit will converted to a use other than as low/moderate-income housing using CDBG or HOME funds.

Adopted this 19<sup>th</sup> day of June, 2023.

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Date

By: \_\_\_\_\_  
Stephen M. Morris, Chairman  
Board of Commissioners

ATTEST:

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Clerk

## CITIZEN PARTICIPATION PLAN CABARRUS COUNTY

This plan describes how Cabarrus County will involve citizens in the planning, implementation, and assessment of the HOME and CDBG Programs. The HOME and CDBG Programs provide funds to local governments through a HOME consortium and through the state of North Carolina. The funds must be used for projects which benefit low-and-moderate-income persons. The regulations give ultimate responsibility for the design and implementation of the program to local elected officials and also requires that citizens be given an opportunity to serve in key advisory roles to these elected officials.

### SCOPE OF CITIZEN PARTICIPATION

Citizens will be involved in all stages of the HOME and CDBG programs, including application, program implementation, amendments, closeout, assessment of performance and design of changes in the Plan. There will be two (2) general mechanisms for their involvement: (1) public hearings and ad hoc community meetings; and (2) individual citizen efforts in the form of comments, complaints or inquiries submitted directly to the Program Administrator or the consultant who is administering the program.

### PROGRAM IMPLEMENTATION

Citizen participation in program implementation will occur primarily through consultation with the program administrator or Board of Commissioners. They will be asked to review and comment on specific guidelines for approved projects. They will also meet to review any program amendments, budget revisions, and other program modifications. All such changes will be discussed and their comments considered prior to action being taken. These meetings will be held on an as-needed basis. If program amendments require a governing board approval, a public hearing will be held on the amendment. Citizens may also be involved in implementation of projects requiring citizen participation.

### PROGRAM ASSESSMENT

Program assessment activities by citizens will occur in a variety of ways. A performance hearing will be held thirty (30) to sixty (60) days prior to the start of planning for the next program year. The Board of Commissioners will be asked to provide time for citizen commentary for the Grantee Performance Report and to review that report prior to its submission.

As part of the orientation to the program offered at the public hearing, citizens will be invited to submit comments on all aspects of program performance through the program year. Complaints should be submitted in writing to :

Community Development Coordinator  
Planning and Development Department  
P.O. Box 707, Concord, NC 28026

A response will be given within ten (10) calendar days. If the response is unsatisfactory and the citizen is still dissatisfied, he/she should write to:

City of Concord Planning and Development Department  
HOME Compliance Officer  
P.O. Box 308, Concord, NC 28026

for HOME program concerns to request an investigation of the problem. CDBG programs will be directed to the state offices. Program staff will also be available during normal business hours to respond to citizen inquiries.

The Citizen Participation Plan will be subject to annual review and proposed revisions by the Board of Commissioners to occur in the period between the performance hearing and the first public hearing on the subsequent year's application.

Technical assistance will be provided to citizen organizations and groups of low/moderate income persons or target area residents upon request. Such assistance will support citizen efforts to develop proposals, define policy and organize for the implementation of the program. It is expected that such assistance will be provided directly to the Board of Commissioners in response to their request. Assistance could be provided in the form of local expert presentations, information handouts, research of a specific issue, or other short-term efforts.

**Public Information:** A public information effort will be undertaken to promote citizen participation. These efforts will include:

- Public Notice of all public hearings will be published in the newspaper at least ten (10) days before the hearing. These notices will indicate the date, time, location and topic to be considered. The notices will also be made available on the county website and on Channel 22.
- Orientation information will be provided at the first public hearing. The Program Administrator will make a presentation at the televised public meeting covering the total HOME and/or CDBG funds available; the range of eligible activities; the planning process and the schedule of meetings and hearings; the role of the citizens in the program; and a summary of other program requirements such as environmental, fair housing and contracting procedures.
- A public file containing program documentation will be available for review at the Cabarrus County Government Center, 65 Church Street S., Concord, NC 28026 during normal business hours. Included will be copies of the Application, Environmental Review Record, the Citizen Participation Plan, and Annual Performance Reports. Other program documents are also available for citizen review or request consistent with applicable state and local laws regarding personal privacy and obligations of confidentiality.

- In the case of public hearings where a significant number of non-English speaking residents are expected to participate, a bilingual interpreter will be provided. All required documents will be available in Spanish.

- In the case of hearing impaired, a person will be provided to sign.

Adopted this 19th day of June, 2023.

By: \_\_\_\_\_

Stephen M. Morris, Chairman  
Board of Commissioners

ATTEST:

\_\_\_\_\_  
Clerk to Board

## **Cabarrus County**

### **Equal Employment and Procurement Plan For the Period of June 19, 2023- June 19, 2026**

The County of Cabarrus maintains the policy of providing equal employment opportunities for all persons regardless of race, color, religion, sex, national origin, handicap, age, political affiliation, or any other non-merit factor, except where religion, sex, national origin, or age are bona fide occupation qualifications for employment.

In furtherance of this policy, the County prohibits any retaliatory action of any kind taken by any employee of the locality against any other employee or applicant for employment because that person made a charge, testified, assisted or participated in any manner in a hearing, proceeding or investigation of employment discrimination.

The County shall strive for greater utilization of all persons by identifying previously under utilized groups in the work force, such as minorities, women, and the handicapped, making special efforts toward their recruitment, selection, development and upward mobility and any other term, condition, or privilege of employment.

Responsibility for implementing equal opportunities and Affirmative Action measures is hereby assigned to the Chairman and/or other persons designated by the Chief Elected Official to assist in the implementation of this policy statement.

The County shall develop a self-evaluation mechanism to provide for periodic examination and evaluation. Periodic reports as requested on the progress of Equal Employment Opportunity and Affirmative Action will be presented to the Chief Elected Official.

The County is committed to this policy and is aware that with its implementation, the County will receive positive benefits through the greater utilization and development of all its human resources.

Adopted this 19<sup>th</sup> day of June, 2023.

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Stephen M. Morris, Chairman  
Board of Commissioners

ATTEST:

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Clerk

**COMMUNITY DEVELOPMENT CODE OF CONDUCT**  
For the Period of June 19, 2023-June 19, 2026

**HATCH ACT**

No employee or agent of the County may perform any function during work hours that is considered political activity. This includes: soliciting votes, transporting voters, distributing campaign materials, working or developing campaign materials, etc.

**NON DISCRIMINATION**

No person shall, on the grounds of race, color, national origin, handicap, or sex be excluded from participation in, be denied the benefits of, or be subject to discrimination under any program or activity funded in whole or in part with Community Development funds.

**ENGAGEMENT IN PROCUREMENT**

No employee, officer, or agent of the County shall participate in the selection or award of a contract supported by federal funds if a conflict of interest, real or apparent would be involved. Such a conflict would arise when:

- a) The employee, officer, or agent;
- b) Any member of his/her immediate family;
- c) His or her partner; or
- d) An organization which employs or is about to employ, any of the above, has a financial or other interest in the firm selected for award.

The grantee's officers, employees, or agents shall neither solicit nor accept gratuities, favors or anything of monetary value from contractors, potential contractors or parties to subagreements.

**CONFLICT OF INTEREST**

No employee or agent shall influence or attempt to influence the outcome of any case or matter in which he has a direct interest either personally or in the person of any relative by blood or marriage. Employees or agents so involved shall abstain from dealing with such matters; they may provide information at the request of the County, but shall not attempt to influence the decision of the County.

Adopted this 19<sup>th</sup> day of June, 2023.

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Date

By: \_\_\_\_\_  
Stephen M. Morris, Chairman,  
Board of Commissioners

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Clerk to Board

CABARRUS COUNTY

PROCUREMENT POLICY  
HOME and/or CDBG Programs

For the Period of June 19, 2023-June 19, 2026

In the procurement of supplies, equipment, or services in the CABARRUS COUNTY HOME and/or CDBG programs the following shall apply:

- 1) Small Purchase Procedures. These are relatively simple and informal procurement methods that are sound and appropriate for a procurement for services, supplies, or other property, costing in the aggregate not more than \$3,000. Under this procurement method price or rate quotations shall be obtained from an adequate number of qualified sources. Office supplies and equipment may be secured by this method.
- 2) In Competitive Sealed Bids (formal advertising), sealed bids shall be publicly solicited and a firm, fixed price contract shall be awarded to the responsible bidder whose bid, conforming with all of the material terms and conditions of the invitation for bids, is lowest in price.
- 3) In Competitive Negotiations, proposals shall be requested from a number of sources and the Request for Proposals shall be publicized. All aspects of the competitive negotiations shall be carried out in conformance with Federal Circular A-102. The general administrative contract was awarded using this method.

On all procurements efforts shall be made to solicit bids from qualified small and minority business firms.

In all cases, procurement under this Policy must conform to the requirements set forth in 24 CFR 85.36.

An adequate record of procurements must be maintained to insure that these policies and the requirements of 24 CFR 85.36 have been followed in their entirety.

ADOPTED THIS THE 19<sup>th</sup> DAY OF JUNE, 2023 BY THE CABARRUS COUNTY BOARD OF COMMISSIONERS.

By: \_\_\_\_\_  
Stephen M. Morris, Chairman,  
Board of Commissioners

ATTEST:

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Clerk to Board

**Local Economic Benefit for Low- and Very Low-Income Persons Plan**  
**For the Period of**  
**June 19, 2023- June 19, 2026**

To ensure that, to the greatest extent possible, contracts for work are awarded to business concerns located or owned in substantial part by persons residing in the Section 3 covered area, as required by Section 3 of the Housing and Urban Development Act of 1968, the County of Cabarrus has developed and hereby adopts the following Plan:

This Section 3 Plan shall apply to services needed in connection with the grant including, but not limited to, businesses in the fields of planning, consulting, design, building construction/renovation, maintenance and repair, etc.

This Section 3 covered project area for the purposes of this grant program shall include the County of Cabarrus and portions of the immediately adjacent area.

When in need of a service, the County will identify suppliers, contractors or subcontractors located in the Section 3 area. Resources for this identification shall include the Minority Business Directory published through the NC state offices, local directories and Small Business Administration local offices. Word of mouth recommendation shall also be used as a source.

The County will include this Section 3 clause in all contracts executed under HOME and CDBG programs. Where deemed necessary, listings from any agency noted above shall be included as well as sources of subcontractors and suppliers.

The prime contractor selected for major public works facility or public construction work will be required to submit a Section 3 Plan which will outline his/her work needs in connection with the project. Should a need exist to hire any additional personnel, the Cabarrus County Employment Security Commission shall be notified and referred to the contractor.

Each contract for housing rehabilitation under the program, as applicable, for jobs having contracts in excess of \$100,000 shall be required to submit a Section 3 Plan. This Plan will be maintained on file in the grant office and shall be updated from time to time or as the grant staff may deem necessary.

Early in our project, prior to any contracting, major purchases or hiring, we will develop a listing of jobs, supplies and contracts likely to be utilized during the project. We will then advertise in our local newspaper an advertisement, prominently located as a display advertisement, the pertinent information regarding the project including all Section 3 required information.

Adopted this 19<sup>th</sup> day of June, 2023.

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Stephen M. Morris Chairman  
Cabarrus County Board of Commissioners

Attest:

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Clerk to the Board of Commissioners

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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### **AGENDA CATEGORY:**

Discussion Items for Action

### **SUBJECT:**

Register of Deeds - Use of Register of Deeds Automation Fund for Re-indexing Cabarrus County Land Records

### **BRIEF SUMMARY:**

The Register of Deeds index of online land records from 1/1/1983 allows access of land records by party names.

Prior online access is by use of virtual images of our physical index books, which is a more cumbersome and complex process for both professionals and the public.

### **REQUESTED ACTION:**

Motion to approve use of the Cabarrus County Register of Deeds automation fund to re-index Cabarrus County land records from January 1, 1938 through December 31, 1982.

### **EXPECTED LENGTH OF PRESENTATION:**

### **SUBMITTED BY:**

Wayne Nixon, Register of Deeds

### **BUDGET AMENDMENT REQUIRED:**

No

### **COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

**ATTACHMENTS:**

- Revised Proposal
- Representative Register Budgets



## LOGAN SYSTEMS, INC.

4003 Clifton Road • Greensboro, NC 27407  
Toll Free: 1-800-342-2208 • Fax: 336-299-9905



March 26, 2023

Hon. Wayne Nixon  
Register of Deeds  
Cabarrus County Courthouse  
65 Church St. SE  
Concord, NC 28025

### Re: Revised Proposal for Re-indexing Land Records

Dear Mr. Nixon:

Logan Systems has been re-indexing land records in Cumberland County and Union County for the past few years. We have also re-indexed several other record types for our customers, including birth, death, marriage, court orders, etc. In Fiscal Year 2023, we are re-indexing records for nine customers. We previously provided you with a proposal for re-indexing land records from 1968-1982. We are amending that proposal to add the next year range of 1938-1967.

For each index that we key, we work with the elected official to determine the best method for the project. In your office, we would suggest that we key from the index once initially and then use key verification techniques to check our work. This is the same process that your staff does each day to confirm the accuracy of their input. All difficult issues will be handled at a supervisor level and we will come back to you and your staff with any questions that are specific to a particular instrument.

We will work up sample indexing and come to meet with you and your staff to determine the final rules for each instrument type. We use your scanned index books to determine what names and formats should be indexed historically. Once we have that information, our actual work begins.

We charge an initial fee for all of the preparation work. This includes reviewing the older scanned index books to determine indexing rules for different instrument types. It also includes our meetings with you and your staff to determine the rules for this project. We charge a one-time fee of \$4,500.00 for this initial review and rule setting. We will not charge that fee again for your land record re-indexing efforts.

We would propose that we index time periods that match the historical index books. Our fee is based on instrument counts. We have done some sampling to determine fair instrument count estimates for each time period. Based on our instrument count estimates, we propose to re-index your land records from January 1, 1968 to

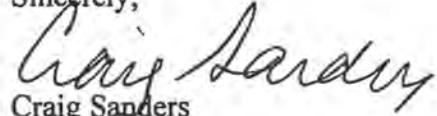
December 31, 1982. This would replace one entire year range in the imaged index product. Our fee for that keying would be \$118,500.00. Therefore, the total, including the rule creation work would be **\$123,000.00**.

The next time period that would match existing index books would be January 1, 1938 through December 31, 1967. There would be no charge for the rule setting as we would use the same rules as the 1968-1982 time period. The instruments are shorter, on average, for this time period. Our fee to re-index all of these records would be **\$152,000.00**.

Once the project is completed, staff and public users will be able to access the indexing records and search based on party names. Based on our discussions, Logan Systems would index human last names, human first and middle names, status (if applicable), business names, description (as indexed at the time), book number, and page number. We would assign instrument numbers. Once the indexing entry is found, the image can be obtained through our system by clicking on the image link.

We appreciate the opportunity to explain our procedures and conversion methods to you. If you have any questions about this proposal or any other matters, please contact me at your earliest convenience at our toll-free number.

Sincerely,

  
Craig Sanders  
President

**Table 1.1 Representative Register Budgets**

	Large County	Medium County	Small County
<i>Revenue</i>			
Fees	5,000,000	262,000	19,000
Excise tax	5,000,000	150,000	12,000
Total revenue	10,000,000	412,000	31,000
<i>Expenses</i>			
Personnel	2,000,000	275,000	95,000
Operations	750,000	75,000	35,000
Total expenses	2,750,000	350,000	130,000

All registers face challenges in preparing their budgets and working with the budget officers and county commissioners to retain experienced and knowledgeable personnel, keep up with technological demands, and maintain the level of service expected by the transactional community and the general public. As the samples above show, registers' financial circumstances can be very different—but all registers face difficult challenges working within the county budget. In a small county, a register must compete for meager resources to provide the same kind of basic services as any other county in the state. In a large county, a register is expected to continue to operate in a way that generates the revenue needed for the many other services a county must provide in a metropolitan area. To deal with these challenges, registers must be both knowledgeable about their offices and able to communicate well about their offices' requirements in the next year and thereafter. Register of deeds offices must be supported adequately to perform their functions reliably and efficiently in a modern environment, but everyone also must understand the constraints of the county revenues and the competing demands for support of other county services.

### 1.9.2 Automation Enhancement and Preservation Fund

The North Carolina General Statutes (hereinafter G.S.) require counties to have an “automation enhancement and preservation fund” (AEPF) for register of deeds offices as follows:

Ten percent (10%) of the fees collected pursuant to G.S. 161-10 and retained by the county, or six dollars and twenty cents (\$6.20) in the case of a fee collected pursuant to G.S. 161-10(a) (1a) for the first page of a deed of trust or mortgage, shall be

set aside annually and placed in a nonreverting Automation Enhancement and Preservation Fund, the proceeds of which shall be expended on computer or imaging technology and needs associated with the preservation and storage of public records in the office of the register of deeds. Nothing in this section shall be construed to affect the duty of the board of county commissioners to furnish supplies and equipment to the office of the register of deeds.<sup>154</sup>

Fees “collected pursuant to G.S. 161-10” to which the 10 percent retention requirement applies include all fees *retained by the county* for real estate instrument recording, marriage licenses, vital record fees, and other fees but do not include what the register collects for forwarding to the state, nor do they include excise taxes. As the statute provides, the percentage retained is separately calculated for fees for deeds of trust and mortgages.

This statute was intended to ensure that a portion of the register's receipts be available for the implementation and maintenance of technologies supporting the register's functions. It does not give specific direction about how this fund interrelates with other county funds necessary for the register's budget. The statute's intent clearly would be violated if the AEPF amount were merely blended into the county's general fund and applied indiscriminately to general county expenditures. Although the statute does not require that funds be collected for more than one year, the logic of a non-reverting fund is to address a register's need to accumulate funds from year to year for expenses that cannot be met from the recurring operating budget.

The AEPF earmark for “needs associated with the preservation and storage of public records” is broad. Information technology has since become central to register operations, with demands not only for imaging and data processing but now also for Internet facilities to enable online access and filing. To honor the statutory intent and to fulfill the register's and the county's responsibilities to county citizens, the register and the county finance officer should work together to develop a multiyear technology plan that includes how the fund is to be applied. The AEPF is a tool for ensuring that resources are accumulated and made available for upgrades and enhancements that require more than the usual operating budget allocation.

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

BOC - Alternative Funding Options

**BRIEF SUMMARY:**

Discuss alternative funding options.

**REQUESTED ACTION:**

Receive input.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Commissioner Wortman

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

BOC - Discussion on Central Cabarrus High School Tennis Courts

**BRIEF SUMMARY:**

Discuss options to improve the Central Cabarrus High School tennis courts.

**REQUESTED ACTION:**

Receive input.

**EXPECTED LENGTH OF PRESENTATION:**

15 Minutes

**SUBMITTED BY:**

Commissioner Wortman

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

BOC - Solicitation Ordinance

**BRIEF SUMMARY:**

Discussion of solicitation ordinance.

**REQUESTED ACTION:**

Receive input.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Commissioner Strang

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

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**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

Budget - Budget Discussion

**BRIEF SUMMARY:**

Provide opportunity for the Board of Commissioners to discuss the recommended budget and provide feedback. Provide opportunity for staff to field any questions the Board would like addressed at the upcoming budget workshop.

**REQUESTED ACTION:**

Provide feedback.

**EXPECTED LENGTH OF PRESENTATION:**

15 Minutes

**SUBMITTED BY:**

Rosh Khatri, Budget Director

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

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**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

Infrastructure and Asset Management - Cabarrus County Parking Deck Reserved Spaces  
Discussion

**BRIEF SUMMARY:**

County staff will discuss options for reserved spaces for Novi-Flats (LMG) per agreement.

**REQUESTED ACTION:**

Receive input.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Kyle Bilafer, Asst. County Manager  
Todd Shanley, Chief Information Officer

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

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**ATTACHMENTS:**

Exhibit

- ❑ Parking Garage Lease
- ❑ Interlocal Parking Agreement Amendment

Where are the spaces?	# of spaces without HC spaces
5th flat spaces	103
Ramp from level 4 to level 5 spaces	33
4th flat spaces	86
ramp from level 3 to level 4 spaces	33
3rd flat spaces	45
<b>TOTAL:</b>	<b>300</b>



## PARKING GARAGE LEASE AGREEMENT

14 THIS PARKING GARAGE LEASE AGREEMENT ("Parking Lease") is made as of the day of December, 2020, by and between the CITY OF CONCORD, NORTH CAROLINA, a public body corporate and politic (the "City"), CABARRUS COUNTY (the "County"), and CONCORD MASTER VENTURE, LLC, a Florida limited liability company (the "Developer").

### RECITALS:

A. Developer was selected by the City through a competitive process to facilitate the development and construction of a multi-parcel, mixed-use redevelopment project to include a mix of parking stalls, residential units and retail space (the "Catalyst Project");

B. City and County are parties to the CABARRUS COUNTY PARKING DECK INTERLOCAL AGREEMENT dated October 15, 2018 and amended on November 24, 2020 (the "Interlocal Agreement") which sets forth the City's and the County's agreement to share space in the Parking Garage along Barbrick Ave SW, Spring and Corban Streets and with an address of 81 Spring Street, SW, Concord, North Carolina (the "Garage").

C. Developer and City are parties to that certain AMENDED AND RESTATED MASTER DEVELOPMENT AGREEMENT dated September 22, 2020 (the "MDA") which sets forth the plan for Developer's construction and development of the Catalyst Project as defined in the MDA;

D. The MDA sets forth terms upon which City will lease up to three hundred (300) offsite parking spaces in the evening (based on the Catalyst Project's need) and up to two hundred (200) offsite parking spaces in the daytime (based on the Catalyst Project's need) to Developer to serve the residential components of the Catalyst Project (the "Parking Lease Terms") which Parking Lease terms are incorporated into this Parking Lease.

E. Considerable economic benefit is expected to accrue to City and County from Developer's construction and leasing of the Catalyst Project, and City and County desire to provide a competitive long-term lease of a portion of the spaces in the Garage for the use and benefit of the Catalyst Project;

F. City and County are agreeable to leasing parking spaces in the Garage to Developer as provided in this Parking Lease beginning with Certificate of Occupancy following construction of the mixed-use building on Parcel 1 as defined in the MDA (the "Commencement Date").

NOW, THEREFORE, in consideration of the foregoing, the mutual covenants contained in this Parking Lease and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the City, County, and Developer agree as follows:

1. Lease of Parking Spaces

During the Term (as defined below) of this Parking Lease, City and County hereby lease to Developer, and Developer hereby leases from City and County, parking spaces in the Garage subject to the following terms and conditions:

a. *Evening/Weekend Spaces.* City and County lease to Developer and its successors and assigns three hundred (300) parking spaces on the second level and above in the Garage for residential users of the Catalyst Project to use for personal vehicular parking. Of the total three hundred allocable parking spaces, one hundred and thirty-two (132) spaces will be leased by the City from the City's allocation of spaces in the Garage per the Interlocal Agreement and one hundred and sixty-eight (168) spaces will be leased directly from the County. For a period of 10 years following the Commencement Date, Developer shall have the non-exclusive right to use such spaces during the hours of 5 PM to 8 AM between Monday and Friday and for 24 hours per day on Saturday and Sunday at no cost. At the end of the tenth year, City, County, and Developer will negotiate the future rate, if any, for evening parking in the Garage at a rate not to exceed the minimum rate charged to Garage users for evening parking. Developer may (in compliance with all applicable zoning requirements) adjust the number of spaces under this section at any time during the Initial Term or any Renewal Term by providing notice to City and County of Developer's intent to adjust the number of spaces under this section. If Developer provides that notice to City and County, then City, County and Developer shall amend this Parking Lease within thirty (30) days of that notice to set the new number of spaces under this section. However, the total number of spaces allotted under this section shall not exceed three hundred for evening/weekend spaces.

b. *Daytime Spaces.* The parties acknowledge that the Garage will be a public facility available to the public on an "open occupancy" basis with no reserved spaces or access gates installed thereto; provided, however, County reserves its right to later designate certain spaces as "Reserved" and to install access gates to the Garage. In the event that County restricts daytime parking in the Garage, the City and County will make the following accommodations to the Developer for daytime parking:

i. Should daytime parking be restricted during years one through ten following the Commencement Date, the City will make available eighty (80) all-day parking passes for Catalyst Project residents at a rate of twenty-five dollars (\$25.00) per pass, per month. The County will similarly provide one hundred and twenty (120) parking passes for Catalyst Project residents at the same rate. Parking passes do not guarantee a reserved parking space.

ii. Should daytime parking be restricted during years 11 through 15 following the Commencement Date, the City will make available 80 all-day parking passes and the County will make available 120 all-day parking passes for residents at a rate of thirty dollars (\$30.00) per pass, per month.

iii. Should daytime parking be restricted during years 16 through 20 following the Commencement Date, the City will make available 80 all-day parking passes and the County will make available 120 all-day parking passes for residents at a rate of twenty-five dollars (\$36.00) per pass, per month.

iv. Should daytime parking be restricted after year 20 following the Commencement Date, the City, County, and the Developer will negotiate the future rate for daytime parking in the Garage for the next ten (10) years at a rate not to exceed the minimum rate charged to Garage users for daytime parking and review every ten (10) years for the remainder of the Initial Term.

If the County restricts daytime parking, residents of the Catalyst Project will not be required to purchase all-day parking passes. Residents without passes may access public parking in the Garage but must follow any hourly limits or fee schedules.

2. Operation and Use

a. County or its designated operator shall operate the Garage with all services and facilities normally associated with comparable public parking areas.

b. County shall allow unimpeded and open access to users and occupiers (“Occupiers”) of the Catalyst Project to and from the Garage at all times, i.e., twenty-four (24) hours per day, seven (7) days per week, including holidays. City and County agree to designate levels 2-6 as generally available for residential parking per Section 1 and will develop a pass and signage system managing the availability.

c. Developer or a duly recognized representative will manage all-day parking pass requests and payments to the County and City on behalf of the Catalyst Project’s residents. Developer or a duly recognized representative will be responsible for distributing all-day parking passes to residents. The County and City will not manage all-day parking pass requests and payments directly with individual residents.

d. Use of the Garage by Developer, Occupiers, and their agents, employees, contractors and guests shall be subject to County policies and procedures and such reasonable rules and regulations as County may adopt from time to time.

e. Except as provided in Section 1 above, County reserves the right to charge parking fees to the public for use of the Garage.

3. Term

The initial term of the Parking Lease (“Initial Term”) shall be for a period of fifty (50) years from the Commencement Date, unless this Parking Lease is sooner terminated as provided for in this Parking Lease. Provided that (i) the Apartments are operated as an apartment or condominium project at the expiration of the Initial Term, (ii) Developer is not in default under this Parking Lease beyond applicable notice and cure periods at the expiration of the Initial Term, (iii) Developer has not given City written notice of its desire to terminate the Initial Term to end at the expiration of the Initial Term at least ninety (90) days prior to the expiration of the Initial Term, and (iv) City and County has not given Developer written notice of its desire to terminate the Initial Term to end at the expiration of the Initial Term at least ninety (90) days prior to the expiration of the Initial Term, then Term of this Parking Lease shall automatically extend for five (5) additional successive extension terms of ten (10) years each (individually referred to in this Parking Lease as a “Renewal Term” and collectively as the “Renewal Terms”). As used in this

Parking Lease, "Term" means the Initial Term and any Renewal Terms. Each Renewal Term shall be upon all the terms and conditions set forth in this Parking Lease.

4. Electronic Access, Signage, Cameras, Garage Improvements

The Developer shall not be responsible for any costs associated with the purchase and installation of access and revenue equipment, including any hardware and/or software needed for use of the Garage. Further, the Developer shall not be responsible for any costs associated with the maintenance, repair, upgrade, or replacement of the systems serving the Garage. The County shall provide the periodic utilization report generated by the access and revenue equipment, including those reports generated by any Apartment module(s) that are mutually selected, purchased, and installed in the Garage if requested by the Developer. Developer may request to upgrade and/or replace certain exterior doors, gates, locks, and/or signage to permit Occupiers access to the Garage and to facilitate ADA access to and from the Apartments as may be required for the lawful operation of the Apartments or to improve security for the Occupiers and to make other nonstructural, cosmetic changes for the purpose of improving the general appearance of the Garage. Prior to making any such improvements, the Developer shall provide County with thirty (30) days prior, written notice of such proposed improvements. County will work cooperatively with the Developer to assure access to and from the Garage by Occupiers and will endeavor to grant the Developer permission to place such items, including monitoring cameras and pre-approved signage (collectively, "Upgrades"), in and around the Garage, all subject to County's prior written approval. County will make best efforts to approve or deny the request within 30 days. However, upon request of County, the Developer must present County with sufficient drawings and/or information, together with any required engineering documentation, to establish that the Upgrades will not damage and/or impair the Garage or the use of the Garage and will not interfere with County's operation of the Garage. Developer shall be solely responsible for all costs, expenses, and responsibility, including any claims of any type or nature that may be made in connection with or resulting from the placement, installation, use, operation, maintenance, repair, removal or the Upgrades, and/or any other matters involving the Upgrades, and Developer agrees to indemnify and hold the County and its parking management company, their employees, agents, and representatives, harmless from any and all such claims relating to the Upgrades, including reasonable attorney's fees. Developer shall also be solely responsible for relocating any Upgrades. Developer further assumes all risks of any type or nature in connection with any Upgrades, including, but not limited to, any damage to, any theft of, or any vandalism of the Upgrades. Upon the expiration and/or termination of this Parking Lease, Developer shall properly and timely remove any Upgrades, including any signs, that it installed or had installed and restore the areas where Upgrades were installed to the condition the areas were in prior to the installation of the Upgrades by Developer. Developer agrees that if Developer fails to remove the Upgrades and properly restore the areas within thirty (30) days of any such expiration or termination of this Parking Lease that County may do so and dispose of the Upgrades as County sees fit and charge the Developer all reasonable costs and expenses of such removal and disposal. Furthermore, all Upgrades, including cameras, and signage are subject to applicable federal, state and local laws, rules, and regulations and Developer shall also obtain at Developer's cost any required approvals and permits.

5. Operation, Maintenance, Repair and Temporary Relocation

a. County will ensure the operation of the Garage in a manner similar to the operation of other publicly-owned and/or controlled parking facilities in the region. County will maintain the Garage in good working condition and repair and will make such repairs, perform such preventative maintenance, structural repairs or other improvements as the County reasonably deems necessary. In performing maintenance, repairs or replacements, County shall use all commercially reasonable efforts to minimize interference with the use, occupation and enjoyment of the Garage by Developer and Occupiers. If possible, maintenance, repairs and replacements shall be confined to the area actually being so maintained, repaired or replaced. County will use commercially reasonable efforts to make other parking spaces available in the event of temporary closure of the Garage for the purposes of maintenance, repair, or replacement, at no additional cost or expense of the alternate parking spaces to the Developer. Other than in the event of an emergency, the County will confer with Developer prior to any closures of the Garage and will endeavor to accomplish all Garage maintenance, repairs and replacements in a manner that will result in the least inconvenience for the Occupiers. In the event that Developer is denied the use of any of its allotted spaces for a period exceeding three (3) days due to any such maintenance, repairs, replacements or otherwise, and replacement parking in the Garage reasonably satisfactory to Developer is not provided by the County and City, Developer payments with respect to such parking may be abated until use of the affected Spaces is restored. In that event, the County and City will make every effort to provide reasonably satisfactory replacement parking until such maintenance, repairs, or replacements are completed. Otherwise, the Developer will not be entitled to any payments or offsets from the County's monthly, hourly, daily, or parking revenues against the parking charges otherwise due from the Developer to the County under the terms of this Parking Lease. Developer and/or Occupiers shall have no rights in or to any monies paid by anyone to the County, or revenues received from anyone by the County on account of parking in the Garage.

b. County shall maintain interior and exterior illumination sufficient to illuminate the Garage and all means of pedestrian and vehicular access and egress thereto and therefrom, during all twilight and evening hours of operation.

c. County may provide suitable and sufficient signs around the Garage as required for safe and orderly flow of pedestrian and vehicular traffic, including signage directing garage users to appropriate Catalyst Project entrances within the Garage and on any general directories provided by County in the Garage if the County ever chooses to install such signage. Notwithstanding the foregoing, Developer shall be solely responsible for all costs and expenses in connection with or resulting from the placement, installation, use, operation, maintenance, repair, removal, and/or any other matters involving nonstructural and cosmetic changes to the signage and re-marking of the Spaces subject to the County's approval. Any signs pertaining to the Catalyst Project will be subject to County's approval, which approval shall not be unreasonably withheld, conditioned or delayed.

d. The County shall approve the finishing of the wall of the Catalyst Project that will be visible from the interior of the Garage.

6. Damage to the Garage

During the Term of this Parking Lease, in the event of any damage or destruction of all or any portion of the Garage, County shall undertake promptly to repair and/or rebuild the Garage to provide to Developer as promptly as reasonably possible after the date of such damage or destruction the parking contemplated by this Parking Lease. In the event that any or all of the allotted spaces are unavailable for Developer's use as a result of any such damage or destruction, the County and City will make every effort to identify and provide reasonably satisfactory replacement parking until the Garage is restored and the affected spaces are again available for use by Developer.

7. Default by Developer

a. The failure or refusal by the Developer to perform any of its covenants or obligations hereunder within sixty (60) days after written notice of nonperformance shall constitute a default under this Agreement; however, if such failure to perform cannot reasonably be cured within sixty (60) days, the Developer shall not be in default if it commences within sixty (60) days steps reasonably calculated to cure the nonperformance and in good faith pursues those steps diligently and in good faith to completion (not to exceed ninety (90) days).

b. Upon the occurrence of a Default as set forth in Section 7(a), City and County may immediately terminate this Parking Lease by written notice to the Developer. In addition to this right to terminate this Parking Lease, City and County may also in the event of a Default by Developer under this Parking Lease exercise any and all other rights and remedies available to City and County at law or in equity, including without limitation the recovery of any and all monetary damages that City and County has suffered as a result of such Default.

c. City and County agree to give Developer's (i) investor member, Concord Investor QOF LP (the "Investor Member") or (ii) lender with first deed of trust on the Catalyst Project a copy of any notice of default sent to Developer, provided that City and County has been notified in writing by certified mail, return receipt requested, of the addresses of such parties. City and County further agrees that if Developer fails to cure any default under this Parking Lease within the time provided for in this Parking Lease, then prior to City and County exercising any right to terminate this Parking Lease on account of such default, Developer's Investor Member and lender, as applicable shall have an additional sixty (60) days within which to cure such default. If such default cannot be cured within that time, Developer's Investor Member or lender, as applicable, shall have such additional time as may be necessary if within such sixty (60) days, Developer's Investor Member or lender, as applicable, has commenced and is diligently pursuing the remedies necessary to cure such default (including commencement of foreclosure proceedings, if necessary to effect such cure). The City and County may not exercise any right to terminate this Parking Lease on account of any such default by Developer, whether available under this Parking Lease, at law or in equity, while such remedies are being so diligently pursued by Developer's Investor Member or lender, as applicable.

8. Force Majeure

A delay in, or failure of, performance by any party, shall not constitute a default, nor shall Developer, City or County be held liable for loss or damage, or be in breach of this Parking Lease, if and to the extent that such delay, failure, loss or damage is caused by an occurrence beyond the reasonable control of such party, and its agents, employees, contractors, subcontractors, and consultants, including results from Acts of God or the public enemy, compliance with any order or request of any governmental authority or person authorized to act therefore, acts of declared or undeclared war, public disorders, rebellion, sabotage, revolution, earthquake, floods, riots, strikes, labor or equipment difficulties, delays in transportation, inability to obtain necessary materials or equipment or permits due to existing or future laws, rules or regulations of governmental authorities or any other causes, whether direct or indirect, and which by the exercise of reasonable diligence said party is unable to prevent. For purposes of this Parking Lease any one delay caused by any such occurrence shall not be deemed to last longer than six (6) months and the party claiming delay caused by any and all such occurrences shall give the other party written notice of the same within thirty (30) days after the date such claiming party learns of or reasonably should have known of such occurrence. Notwithstanding anything else set forth above, after a total of nine (9) months of delays of any type have been claimed by a party as being subject to force majeure, no further delays or claims of any type shall be claimed by such party as being subject to force majeure and/or being an excusable delay.

9. Default by the City or County

In the event of any default, nonperformance, or breach of any of the terms or conditions of this Parking Lease by City or County or both (the "Defaulting Entity"), the Defaulting Entity shall make every effort to identify alternative parking for residents in downtown Concord. In addition to the remedies set forth in the prior sentence, if the Defaulting Entity is in default, nonperformance, or breach of any of the terms or conditions of this Parking Lease, Developer may provide the Defaulting Entity with written notice of the same and the Defaulting Entity shall have sixty (60) days following receipt of such notice from Developer to cure any such default, nonperformance, or breach, provided if such default, nonperformance, or breach cannot be cured within sixty (60) days from the date of receipt of the notice from Developer, the Defaulting Entity shall be deemed to have cured the default as long as the Defaulting Entity undertakes to remedy the same within sixty (60) days following receipt of notice and the Defaulting Entity diligently proceeds to remedy such default, nonperformance, and/or breach.

10. Insurance Requirements

Developer shall maintain the insurance coverage as set forth in Exhibit "B" attached and incorporated into to this Parking Lease and provide the proof of such insurance coverage as called for in Exhibit "B", including workers' compensation coverage if Developer hires any employees. If Exhibit "B" coverage exceeds reasonable insurance requirements for a parking deck, serving the intended purposes, then City, County, and Developer will agree on acceptable coverage. Such insurance coverage shall be obtained at the Developer's sole expense and maintained during the Term of this Parking Lease and shall be effective prior to the beginning of any performance by the Developer or others under this Parking Lease. All insurance companies providing the coverages required hereunder must be lawfully authorized to do business in North Carolina and be acceptable

to City's and the County's risk manager, in its reasonable discretion. Certificates evidencing required insurance shall be delivered to the City and the County prior to the Commencement Date (as defined in Section 18 of this Parking Lease) or opening date of the garage, whichever is later and upon renewal of the applicable policies. Notice of cancellation or reduction or elimination of coverage shall be provided to additional insureds in accordance with the terms of the applicable policy.

11. Indemnity

a. *City and County Indemnity.* To the extent permitted by law, City and County hereby assumes liability for, and shall indemnify, protect, defend, save and keep harmless Developer, its leasehold mortgagees, and their respective affiliates, officers, directors, employees, agents, contractors, subcontractors, licensees and invitees (individually a "Developer Indemnitee" and collectively, "Developer Indemnitees") from and against any and all claims, liabilities, losses, damages, costs and expenses (including reasonable attorneys' fees actually incurred), whenever they may be suffered or incurred by, imposed on or asserted against a Developer Indemnitee, as applicable (collectively, "Developer Claims"), arising out of or resulting from: (i) any default, breach, violation, or nonperformance by City or County under this Parking Lease (including breach of any representation, warranty or covenant of City or County contained herein); or (ii) any negligent act or omission of City or County, including, without limitation, injury to or death of any person or damage to property arising out of any work, construction, reconstruction, restoration, maintenance, repair or other work to be done hereunder by City or County, except in all cases to the extent such Developer Claims are caused by the negligent act or omission or willful misconduct of Developer or Developer Indemnitees. The provisions of this Section 12(a) shall survive the expiration or earlier termination of this Parking Lease.

b. *Developer Indemnity.* Developer hereby assumes liability for, and shall indemnify, protect, defend, save and keep harmless City and County, including council members, commissioners, officers, employees, agents, contractors, subcontractors, successors, assigns, licensees, mortgagees of City or County and invitees (individually a "Public Indemnitee" and collectively, "Public Indemnitees") from and against any and all claims, liabilities, losses, damages, costs and expenses (including reasonable attorneys' fees actually incurred), whenever they may be suffered or incurred by, imposed on or asserted against a Public Indemnitee, as applicable (collectively, "Public Claims"), arising out of or resulting from: (i) any default, breach, violation, or nonperformance by Developer under this Parking Lease (including breach of any representation, warranty or covenant of Developer contained herein); or (ii) any negligent act or omission of Developer, including, without limitation, injury to or death of any person or damage to property arising out of any work construction, reconstruction, restoration, maintenance, repair or other work to be done hereunder by Developer, except in all cases to the extent such Public Claims are caused by the negligent act or omission or willful misconduct of City or County or Public Indemnitees. The provisions of this Section 12(b) shall survive the expiration of earlier termination of this Parking Lease.

12. Title to Property; Memorandum

a. County covenants that it has full right to enter into this Parking Lease as of the date hereof and the Interlocal Agreement gives the City rights to lease spaces in the Garage and does not prevent County from performing its obligations hereunder.

b. Upon Developer's request, City and County will execute and deliver to Developer an original memorandum of this Parking Lease in form reasonably satisfactory to City, County, and Developer, and Developer may record the memorandum in the land records of the County of Cabarrus, North Carolina. Developer will pay all recording taxes or fees required in connection with recording such memorandum.

13. Attorneys' Fees

In the event of any litigation between City and/or County and Developer arising out of this Parking Lease, each party shall bear its own expense.

14. Assignment and Leasing

a. Developer may not assign this Parking Lease, in whole or in part, except to a purchaser of the Apartments in the event of a sale thereof, subject to the written approval of the City and County which approval shall not be unreasonably withheld. Developer shall also be permitted to assign this Parking Lease to any affiliate or to any lender providing financing in connection with the Apartments as collateral for its loan and to sublease individual spaces that may, from time to time, be in excess of the amount of parking required to accommodate the needs of the Catalyst Project subject to City and County review and approval. Notwithstanding anything to the contrary set forth herein, transfer of direct or indirect membership interests in Developer, or its rights hereunder, shall be permitted without further consent in accordance with the terms of Section 4.31 of the MDA, which is incorporated in this Agreement by reference as if fully set forth herein.

b. Except as provided in Section 16(a) above, Developer may not assign, transfer, or pledge any of its rights under this Parking Lease without the prior written consent of the City and County and the City and County may grant or deny its consent in City or County sole discretion.

c. Notwithstanding any permitted assignment, the Developer shall remain responsible for all obligations under this Parking Lease unless the City and County specifically grants the Developer a release in writing.

15. Notices

Except where other forms of notice are expressly and specifically authorized in this Parking Lease, all notices or other communications required or desired to be given with respect to this Parking Lease shall be in writing and shall be addressed as follows:

To the City

City Manager  
City of Concord  
35 Cabarrus Avenue W  
Concord, NC 28025  
Attn: Lloyd Wm. Payne, Jr.

With a copy to:

City Attorney  
City of Concord  
35 Cabarrus Avenue W  
Concord, NC 28025  
Attn: VaLerie Kolczynski

To the County

County Manager  
Cabarrus County  
PO Box 707  
Concord, NC 28026  
Attn: Michael Downs

With a copy to:

County Attorney  
Cabarrus County  
PO Box 707  
Concord, NC 28026  
Attn: Richard Koch

If to Developer

Concord Master Venture, LLC  
2420 East Sunrise Boulevard, #90  
Fort Lauderdale, Florida 33304  
Attn: Peter Flotz

With copy to  
Investor Member

Concord Investor QOF LP  
200 West Street  
New York, New York 10282  
Attention: Urban Investment Group Portfolio Manager  
E-mail: [gs-uig-portfolio-manager@gs.com](mailto:gs-uig-portfolio-manager@gs.com)  
[gs-uig-docs@gs.com](mailto:gs-uig-docs@gs.com)

With copy to

Sidley Austin LLP  
787 Seventh Avenue  
New York, New York 10019  
Attention: Steven C. Koppel, Esq.  
E-mail: [skoppel@sidley.com](mailto:skoppel@sidley.com)

Any communication so addressed shall be deemed duly served when received or when mailed by certified mail, postage prepaid, return receipt requested.

#### 16. MDA

This Parking Lease is expressly conditioned on the execution, delivery and performance of the MDA by the Developer which terms are incorporated herein by reference; provided that after the Commencement Date, this Lease shall not be terminated or voided by City for any default by Developer under the MDA.

17. Dispute Resolution.

Disputes arising under this Parking Lease shall be mediated. Disputes resulting in unsuccessful mediations shall be determined in the state courts of North Carolina with its venue in Cabarrus County.

18. Iran Divestment Act Certification

Developer certifies that, if it submitted a successful bid for this Parking Lease, then as of the date it submitted the bid, Developer was not identified on the Iran List. If it did not submit a bid for this Parking Lease, Developer certifies that as of the date that this Parking Lease is entered into, Developer is not identified on the Iran List. It is a material breach of this Parking Lease for Developer to be identified on the Iran List during the term of this Parking Lease or to utilize on this Parking Lease any contractor or subcontractor that is identified on the Iran List. In this Iran Divestment Act Certification section – “Iran List” means the Final Divestment List – Iran, the Parent and Subsidiary Guidance List – Iran, and all other lists issued from time to time by the N.C. State Treasurer to comply with N.C.G.S. §143C-6A-4 of the N.C. Iran Divestment Act.

19. Entire Agreement

This Parking Lease, including any attachments, exhibits, and referenced documents, constitutes the complete understanding between the parties hereto with respect to the matters addressed herein and supersedes all prior understandings and writings, and this Parking Lease may only be amended or modified only by a writing signed by City, County and Developer.

20. Miscellaneous

a. The obligations of this Parking Lease shall be binding upon and inure to the benefit of the parties hereto and their respective successors and assigns. Any such successors and assigns shall be deemed to have assumed and agreed to perform all obligations under this Parking Lease arising from and after such assignment.

b. In the event that any provisions of this Parking Lease shall be held invalid, the same shall not affect in any respect whatsoever the validity of the remaining provisions of this Parking Lease.

c. This Parking Lease and the rights of the parties hereunder shall be interpreted in accordance with the laws of the State of North Carolina.

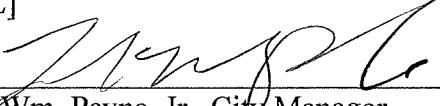
d. This Parking Lease may be executed in any number of counterparts, each of which shall be deemed to be an original and all of which together shall comprise but a single document.

e. In the case that any provisions of this Agreement are in conflict with the Interlocal Agreement or the MDA, the provisions of this Agreement shall control.

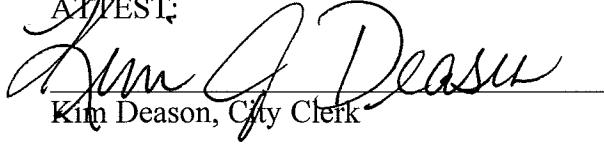
[THIS PAGE INTENTIONALLY LEFT BLANK]

IN WITNESS WHEREOF, the Parties hereby set their hands and seals, effective the date first above written.

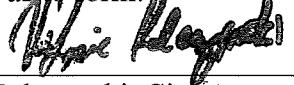
CITY OF CONCORD, NORTH CAROLINA  
[SEAL]

  
Lloyd Wm. Payne, Jr., City Manager

ATTEST:

  
Kim Deason, City Clerk

Approved as to form:

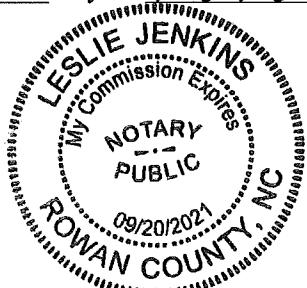
  
VaLerie Kolczynski, City Attorney

STATE OF NORTH CAROLINA  
COUNTY OF CABARRUS

I, Leslie Jenkins, a Notary Public of the State and County aforesaid, <sup>Rowan</sup> certify that Kim Deason personally came before me this day and acknowledged under seal that she is City Clerk of the City of Concord, and that by authority duly given and as the act of the Council, the foregoing instrument was signed in its name by its City Manager, sealed with its corporate seal and attested by herself as its City Clerk.

WITNESS my hand and official seal, this 1st day of December, 2020.

Notary Public Leslie Jenkins  
My commission expires: 9-20-21

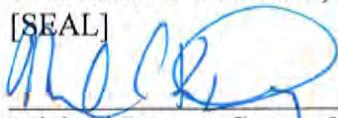


[SIGNATURES CONTINUE ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the Parties hereby set their hands and seals, effective the date first above written.

CABARRUS COUNTY, NORTH CAROLINA

[SEAL]

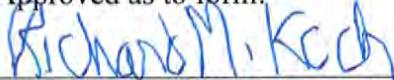


Michael Downs, County Manager

ATTEST:



Approved as to form:



Richard Koch, County Attorney

STATE OF NORTH CAROLINA  
COUNTY OF CABARRUS

I, Sheila K. Bruce, a Notary Public of the State and County aforesaid, certify that Kim Deason personally came before me this day and acknowledged under seal that she is City Clerk of the City of Concord, and that by authority duly given and as the act of the ~~Council~~ <sup>Annelie Peplin</sup> Board of Commissioners of Cabarrus County, the foregoing instrument was signed in its name by its City Manager, sealed with its corporate seal and attested by herself as its City Clerk. <sup>Deputy</sup> <sup>County</sup>

WITNESS my hand and official seal, this 17<sup>th</sup> day of December, 2020.

Notary Public Sheila K. Bruce  
My commission expires: 08-17-2021



[SIGNATURES CONTINUE ON FOLLOWING PAGE]

IN WITNESS WHEREOF, the Parties hereby set their hands and seals, effective the date first above written.

CONCORD MASTER VENTURE, LLC, a Florida limited liability company

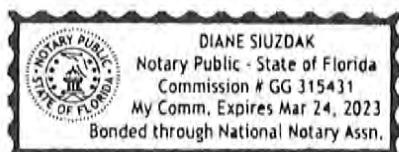


Peter Flotz, Manager

STATE OF FLORIDA  
County of BROWARD

I, the undersigned, a Notary Public of the County and State aforesaid, do hereby certify that Peter Flotz personally came before me this day and acknowledged under seal that he is Manager of CONCORD MASTER VENTURE, LLC, a Florida limited liability company, and acknowledged, on behalf of the company, the due execution of the foregoing instrument. Witness my hand and official stamp or seal, this 18 day of November, 2020.

Notary Public  
My commission expires:



Diane Siuzdak

## Exhibit “A”

### **Access & Rates (Daytime):**

- The County currently permits unrestricted daytime parking in the deck.
- If the County decides to restrict daytime parking during years one through ten following the completion of Parcel 1, the City and County will make available 200 all-day parking passes (120 provided by the County and 80 provided by the City) for residents at a rate of \$25 per pass per month.
- In years 11 – 15, the City will make available 100 parking passes at the rate of \$30 per pass per month.
- In years 16 – 20, the City will make available 100 parking passes at the rate of \$36 per pass per month.
- During Year 20, the City and Concord Master Venture will renegotiate the rate for Years 21 – 50 to the prevailing rate for all-day parking in downtown Concord.
- If passes become necessary, Residents will not be required to purchase an all-day pass. Residents without passes will be able to access public parking in the deck but must follow any hourly limits or fees.

### **Access & Rates (Evening/Weekend):**

- During the evening hours of 5 PM – 8 AM between Monday and Friday and for 24 hours per day on Saturday and Sunday , the City and the County will reserve up to 300 Spaces (132 provided by the City and 168 provided by the County) at no cost for the first 10 years following the completion of construction on “Parcel 1”, as defined in the MDA.

Exhibit "B"

Insurance Requirements

Garage Lease Insurance

A. Insurance Coverage

Developer shall obtain insurance to satisfy the requirements hereunder. The policies shall be with companies authorized to do business in North Carolina and rated "A" or above by A.M. Best Company. Developer, individually or by and through its subcontractors, shall satisfy the following requirements and provide the following coverage:

(a) General Requirements.

1. Developer shall name the City as an additional insured under the liability policies required by this section.
2. Developer's insurance shall be primary of any self-funding and/or insurance otherwise carried by the City for all loss or damages arising from Developer's operations under this Parking Lease. Developer and each of its subcontractors shall and does waive all rights of subrogation against the City.
3. City shall be exempt from, and in no way liable for any sums of money that may represent a deductible in any insurance policy. The payment of such deductible shall be the sole responsibility of Developer and/or subcontractor providing such insurance.
4. Developer shall provide the City with certificates of insurance and endorsements documenting that the insurance requirements-set forth in this paragraph have been met, and that the City be given thirty (30) days' written notice of any intent to amend coverage or make material changes to or terminate any policy by either the insured or the insurer. Developer shall further provide such certificates of insurance to the City at any time requested by the City after the execution of this Parking Lease, and shall provide such certificates within five (5) days after the City's request. The City's failure to review a certificate of insurance sent by or on behalf of Developer shall not relieve Developer of its obligation to meet the insurance requirements set forth in this Parking Lease.
5. Should any or all of the required insurance coverage be self-funded/self-insured, Developer shall furnish to the City a copy of the Certificate of Self-Insurance or other documentation from the North Carolina Department of Insurance.

(b) Types of Insurance.

1. Automobile Liability. Bodily injury and property damage liability covering all owned, non-owned and hired automobiles for limits of not less than \$1,000,000 bodily injury each person, each accident and \$1,000,000 property damage, or \$1,000,000 combines single limit-bodily injury and property damage.
2. Commercial General Liability. Bodily injury and property damage liability as shall protect Developer and any subcontractor performing work under this Parking Lease, from claims of bodily

injury or property damage which arise from operation of this Parking Lease, whether such operations are performed by Developer, any subcontractor, or anyone directly or indirectly employed by either. The amounts of such insurance shall not be less than \$1,000,000 bodily injury each occurrence/\$2,000,000 aggregate and \$1,000,000 property damage each occurrence/\$2,000,000 aggregate, or \$1,000,000 bodily injury and property damage combined single limits each occurrence/\$2,000,000 aggregate. This insurance shall include coverage for products, operations, personal injury liability and contractual liability, assumed under the indemnity provision of this Parking Lease.

3. Workers' Compensation Insurance. Developer shall meet the statutory requirements of the State of North Carolina, \$100,000 per accident limit, \$500,000 disease per policy limit, \$100,000 disease each employee limit.

4. Umbrella. \$1,000,000 per occurrence/\$2,000,000 aggregate.

(c) Certificates of all required insurance and endorsements shall be furnished to the City and shall contain the provision that the City will be given thirty (30) day advance written notice of any intent to amend or terminate by either the insurance or the insuring company.

(d) Failure to maintain the insurance coverage required in this paragraph is a material default subject to termination of this Parking Lease.

B. Notice of Cancellation

Developer shall notify the City, in writing immediately upon learning of cancellation or reduction of the insurance afforded by its policy.

Garage Construction Insurance:

In addition to the above, property insurance on a builder's "all risk" or equivalent policy in the amount of the contract amount plus the value of any subsequent modifications, cost of materials supplied or installed on a replacement cost basis.

STATE OF NORTH CAROLINA

COUNTY OF CABARRUS

CABARRUS COUNTY PARKING DECK

INTERLOCAL AGREEMENT

AMENDED

This CABARRUS COUNTY PARKING DECK INTERLOCAL AGREEMENT ("Agreement") is made and entered into by and between CABARRUS COUNTY ("County") and the CITY OF CONCORD ("City").

RECITALS

1. The County is the owner of two parcels of real property in a block in Concord, North Carolina, bordered by certain buildings along Union Street South and by Barbrick, Spring and Corban Streets now with an address of 81 Spring Street, SW, Concord, North Carolina.

2. Previously, the larger of these two parcels (the "Site") was used by the County as a surface parking lot for courthouse employees, and the County acquired the smaller parcel in order to own the entire Spring and Corban Streets portion of the block.

3. The County has contracted to construct and operate a multilevel parking deck (the "Project") on the Site, which will contain 615 parking spaces, including ADA spaces.

4. The parking capacity of the Project will provide sufficient parking for courthouse employees and courthouse users and institutions such as the City, and the general public.

5. The City recognizes the need for additional downtown parking for its purposes and for use by the general public and has authorized a contribution of \$3,000,000.00 to the cost of construction of the Project.

6. In return for the City's contribution, the County is willing to designate a certain number of parking spaces in the completed Project for use by the City, with the number of City spaces determined by the following formula: dividing the total estimated cost of the Project (\$12,734,096, excluding the contingency) by the total number of non ADA parking spaces (601), which yields a cost per space of \$21,188, then dividing the City contribution of \$3,000,000.00 by the cost per space, resulting in an allocation of 142 spaces to the City.

7. This Agreement is authorized by the provisions of N.C. Gen. Stat. §160A-460.

In consideration of the foregoing Recitals and the following Terms, the County and City agree as provided below.

TERMS

1. The City agrees to contribute a total of \$3,000,000.00 to the cost of the Project. Such amount shall be paid as determined by the City, but shall be paid in full no later than August 31, 2018.

2. Based on the formula contained in Paragraph 6 of the Recitals, the County shall allocate spaces in the Project to the City to utilize.

3. The County shall allocate 142 parking spaces for the City to utilize that shall be located in the general use area of the parking deck. The City's 142 parking spaces may be floating or individually specified in the parking deck upon mutual agreement between the City and the County.

4. The City shall have the right to charge through leases with third parties or in conjunction with the County for its 142 general use parking spaces and keep revenue derived from such parking spaces. Revenue derived from all other parking spaces in the Project shall belong to the County.

5. The County will own, operate and maintain the parking deck and will promulgate rules and regulations for its use. The City agrees to abide by such rules and regulations and to require its employees and agents to also abide by such rules and regulations. The County reserves the right to prohibit any City employee or agent from use of any parking spaces assigned to the City if such employee or agent violates the County's rules and regulations, it being understood that such rules and regulations shall be applied evenly and fairly to all users of the parking deck.

6. This Agreement only describes an allocation and license of parking spaces in the Project to the City in return for its contribution. The City acquires no ownership rights in the Project or in the City parking spaces. The usage by the City or its employees or agents of the City parking spaces shall be under the same laws and ordinances applicable to any use of the parking deck.

7. This document contains the entire agreement of the parties relating to the allocation of parking spaces to the City in exchange for its contribution to the cost of the Project. Any modification or amendment to this Agreement shall be reduced to writing and executed by the parties in order to be effective.

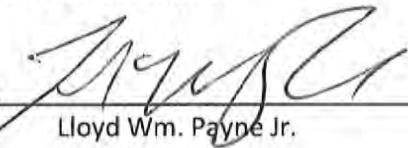
8. This Agreement shall be construed pursuant to North Carolina law.

IN WITNESS, the parties have executed this Agreement by authority duly given as indicated below.

CABARRUS COUNTY  
  
BY: \_\_\_\_\_

Michael K. Downs  
County Manager  
CABARRUS COUNTY

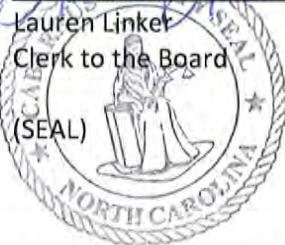
Date: 11/24/2020

CITY OF CONCORD  
  
BY: \_\_\_\_\_

Lloyd Wm. Payne Jr.  
City Manager  
CITY OF CONCORD

Date: 11-24-2020

ATTEST: *Lauren Linker* 11/18/20



Lauren Linker  
Clerk to the Board  
(SEAL)

ATTEST: *Kim Deason*

Kim Deason  
City Clerk  
(SEAL)



This instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.

By: *Suzanne B. Jeannet*  
Cabarrus County, Finance Director

Date: 11-17-2020

This instrument has been pre-audited in the manner required by the Local Government Budget and Fiscal Control Act.

By: *Kim Deason*  
City of Concord, Finance Director

Date: 11/24/20

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

---

**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

Infrastructure and Asset Management - Emergency Equipment Warehouse and ITS Building Project Update

**BRIEF SUMMARY:**

County staff will provide an update on the Emergency Equipment Warehouse and ITS Building project.

**REQUESTED ACTION:**

No action required.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Michael Miller, Director of Design and Construction

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

---

**ATTACHMENTS:**

Photos

## Emergency Equipment Warehouse/ITS Office (5/25/23)



Front entrance of ITS office



**Opposite front corner of the building from the entrance**



**View of front parking lot from entrance off of Ramdin Ct.**



**View of front entrance to ITS from the entrance off of Ramdin Ct.**





**Back side of the warehouse**



**Dumpster enclosure footings**



**Back of warehouse working on putting down gravel in parking lot**



**Back of warehouse working on putting down gravel in parking lot**



**Open office space area in the ITS building**



**Open office space area in the ITS building**



**Open office space area in the ITS building**



**Inside view of the warehouse space**





**Developer Collaboration office space**





**Supervisor's offices**



**Entrance vestibule to ITS office**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

June 5, 2023  
5:30 PM

---

**AGENDA CATEGORY:**

Discussion Items - No Action

**SUBJECT:**

Infrastructure and Asset Management - Emergency Medical Services Headquarters Project Update

**BRIEF SUMMARY:**

County staff will provide an update on the Emergency Medical Services Headquarters project.

**REQUESTED ACTION:**

No action required.

**EXPECTED LENGTH OF PRESENTATION:**

5 Minutes

**SUBMITTED BY:**

Michael Miller, Director of Design and Construction

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

---

**ATTACHMENTS:**

Photos

## EMS Headquarters (5/25/23)



**View from Union Cemetery Rd.**



**View from rear entrance on Union Cemetery Rd.**



**Front entrance looking from Cabarrus Ave.**



**View of front entrance standing at the Cabarrus Ave/Union Cemetery intersection**



**View from Cabarrus Ave entrance looking at front entrance**



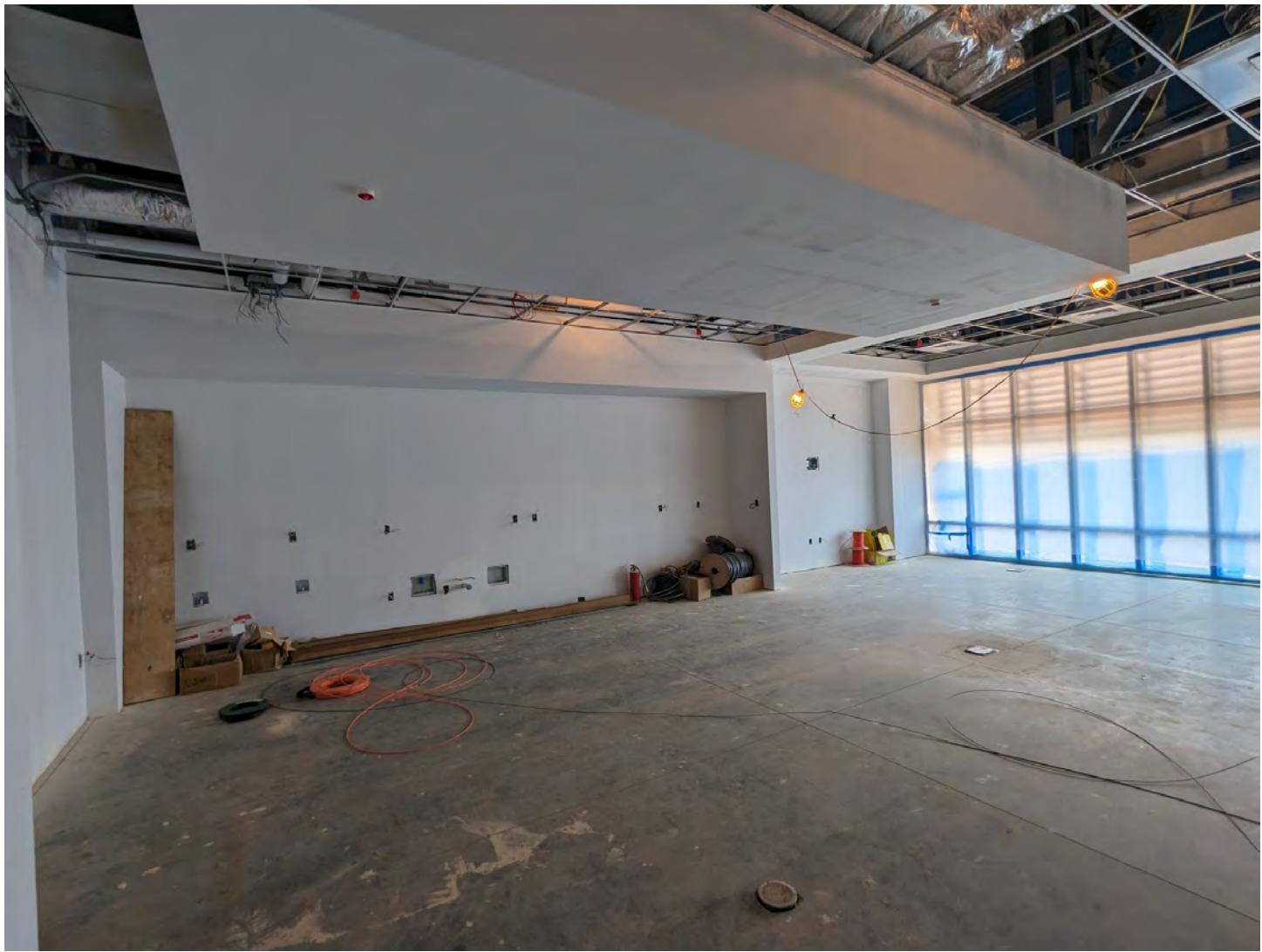
**Back side of the building looking at the ambulance bays**



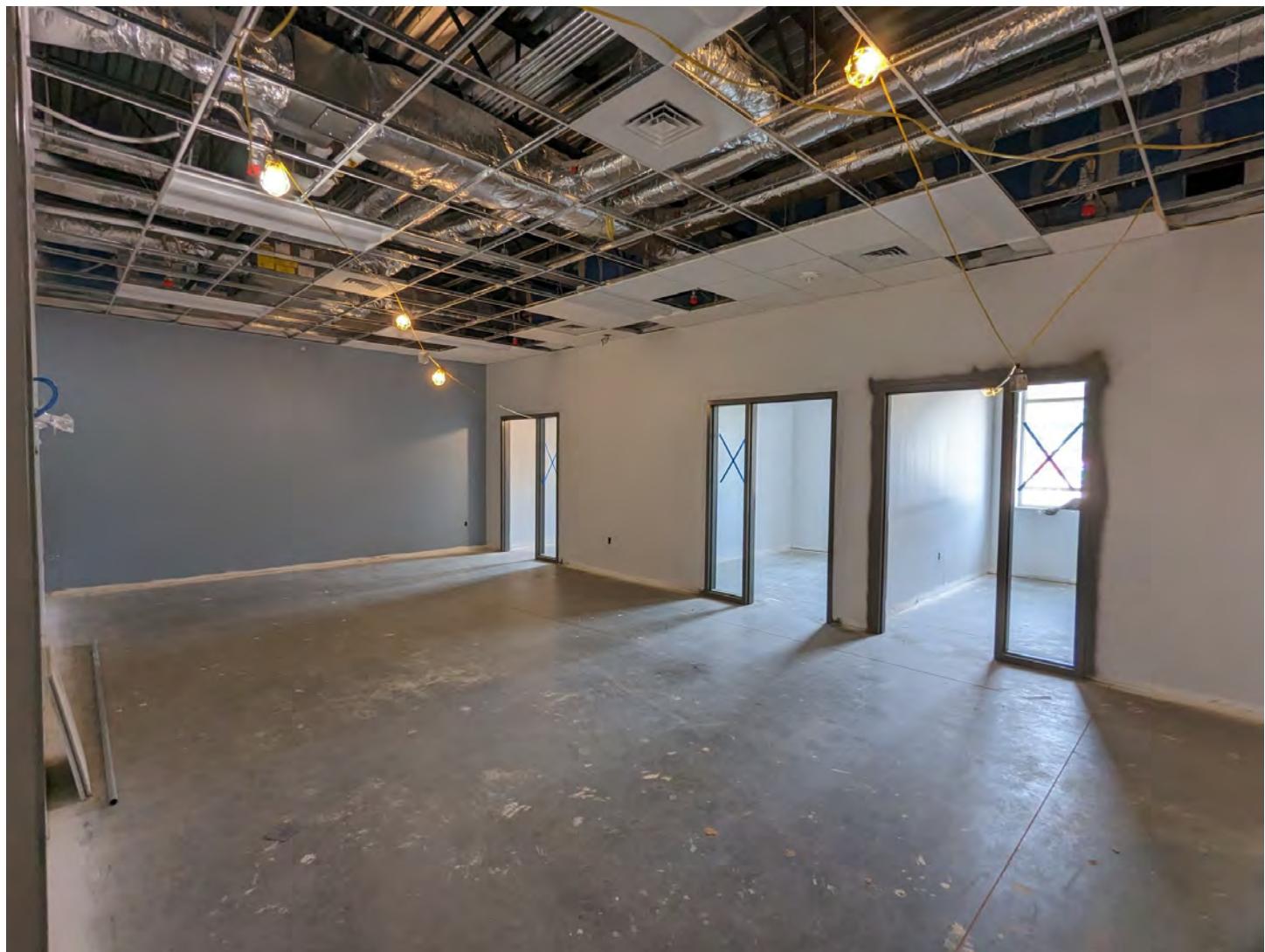


**Showers in Locker Room**

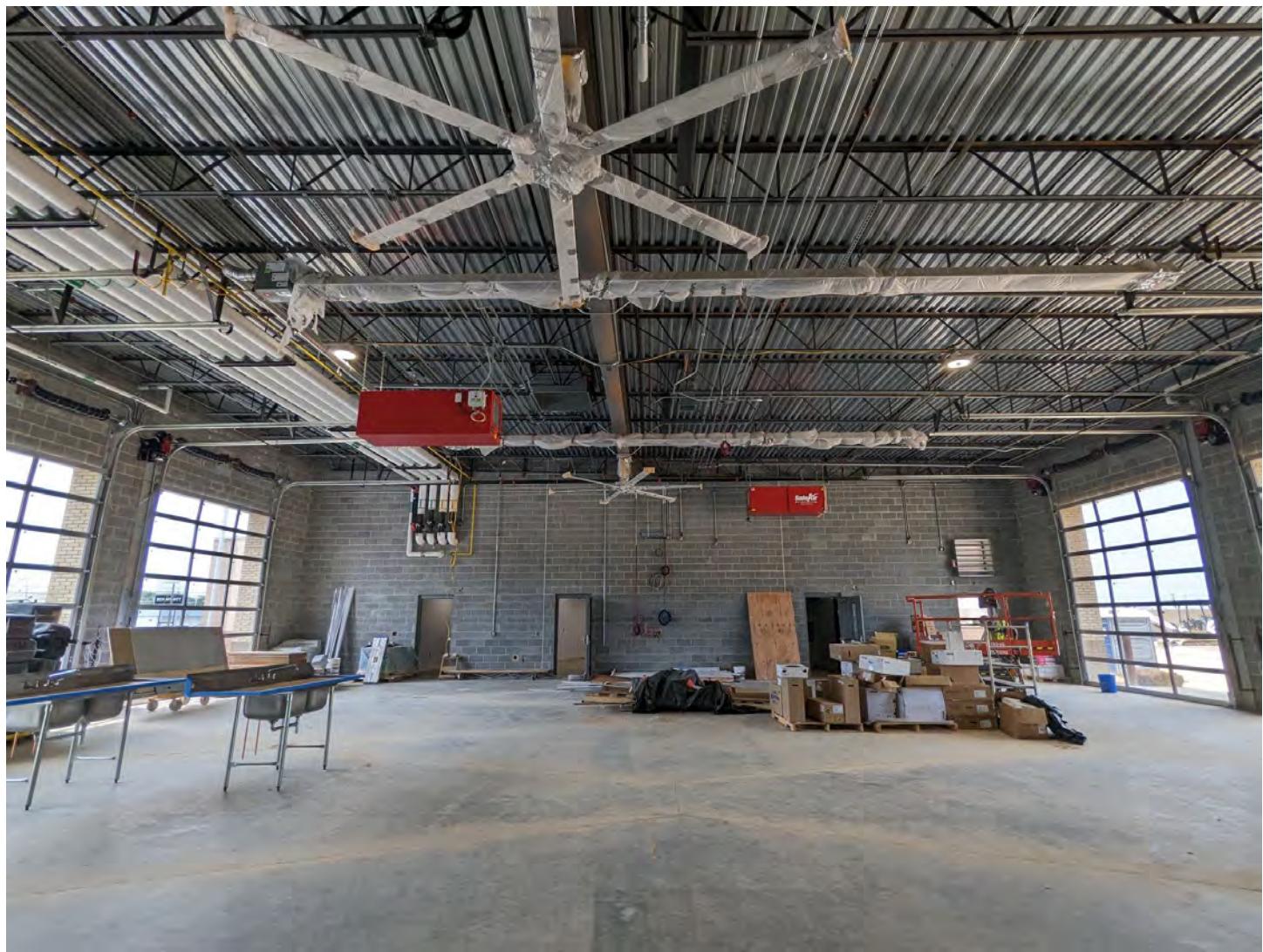




**This is the Kitchen/Dining Room on the left side of the picture and the Dayroom on the right side of the picture**







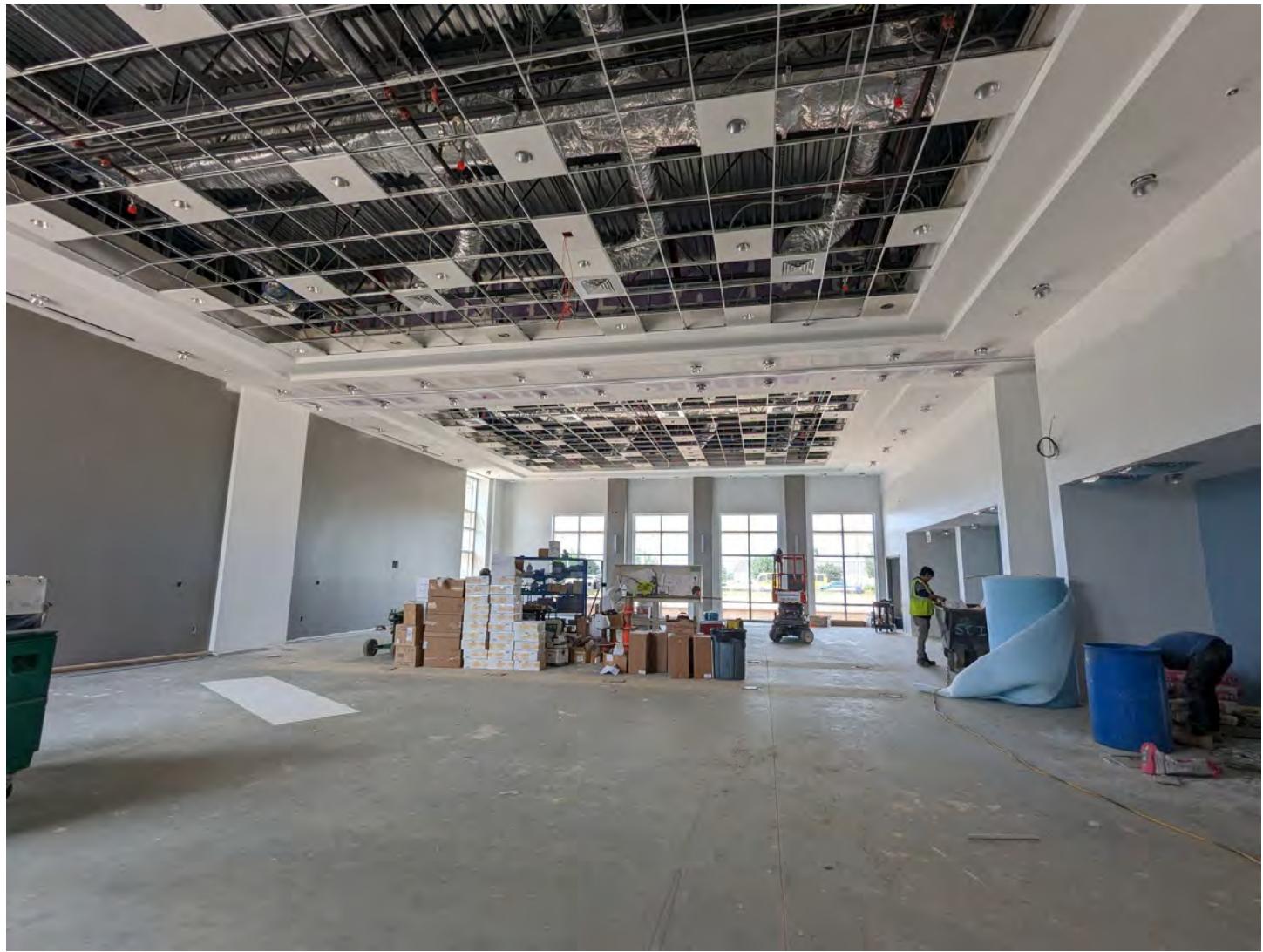
**Vehicle Bay**



**Back side of the building outside of Medical Supply Storage and the Delivery Vestibule**



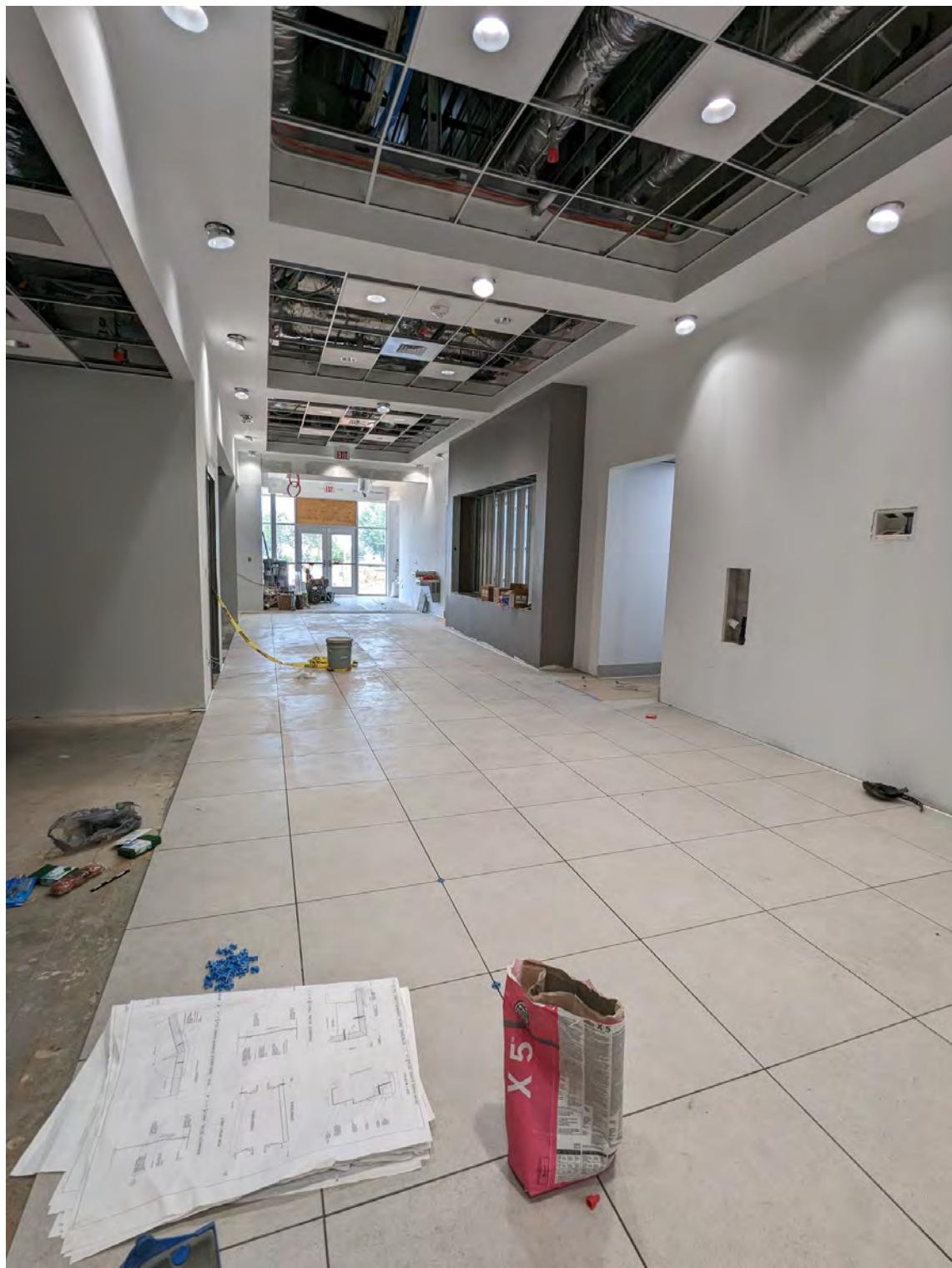
**Workroom and Office Space**



**Training Room**



**Large Conference Room**



**Lobby area**

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS WORK SESSION

**June 5, 2023  
5:30 PM**

---

**AGENDA CATEGORY:**

Approval of Regular Meeting Agenda

**SUBJECT:**

BOC - Approval of Regular Meeting Agenda

**BRIEF SUMMARY:**

The proposed agenda for the June 19, 2023 regular meeting is attached.

**REQUESTED ACTION:**

Motion to approve the agenda for the June 19, 2023 regular meeting as presented.

**EXPECTED LENGTH OF PRESENTATION:**

1 Minute

**SUBMITTED BY:**

Lauren Linker, Clerk to the Board

**BUDGET AMENDMENT REQUIRED:**

No

**COUNTY MANAGER'S RECOMMENDATIONS/COMMENTS:**

---

**ATTACHMENTS:**

- Proposed June 19, 2023 Regular Meeting Agenda

# CABARRUS COUNTY



## BOARD OF COMMISSIONERS REGULAR MEETING

**June 19, 2023  
6:30 PM**

---

### MISSION STATEMENT

THROUGH VISIONARY LEADERSHIP AND GOOD STEWARDSHIP, WE WILL ADMINISTER STATE REQUIREMENTS, ENSURE PUBLIC SAFETY, DETERMINE COUNTY NEEDS, AND PROVIDE SERVICES THAT CONTINUALLY ENHANCE QUALITY OF LIFE

### CALL TO ORDER BY THE CHAIRMAN

### PRESENTATION OF COLORS

### INVOCATION

#### A. APPROVAL OR CORRECTIONS OF MINUTES

1. Approval or Correction of Meeting Minutes

#### B. APPROVAL OF THE AGENDA

#### C. RECOGNITIONS AND PRESENTATIONS

1. Active Living and Parks - July Park and Recreation Month
2. Cabarrus Soil and Water Conservation - Contest Winners
3. Human Resources - Recognition of Teresa Hillie on Her Retirement from Cabarrus County Department of Human Services

#### D. INFORMAL PUBLIC COMMENTS

#### E. CONSENT AGENDA

*(Items listed under consent are generally of a routine nature. The Board may take action to approve/disapprove all items in a single vote. Any item may be withheld from a general action, to be discussed and voted upon separately at the discretion of the Board.)*

1. Appointments - Board of Equalization and Review
2. Appointments - Jury Commission
3. Appointments - Region F Aging Advisory Committee

4. Appointments - Water and Sewer Authority of Cabarrus County
5. Appointments and Removals - Cabarrus County Tourism Authority
6. Appointments and Removals - Centralina Workforce Development Board
7. Appointments and Removals - Juvenile Crime Prevention Council
8. Appointments and Removals - Transportation Advisory Board
9. Appointments (Removals) - Youth Commission
10. BOC - NACo Voting Credentials - 2023 Annual Conference
11. BOC - Resolution Amending the Cabarrus County Board of Commissioners' 2023 Meeting Schedule
12. County Manager - Easement for Back Creek Greenway
13. County Manager - Provider for Regional Behavioral Health Center
14. DHS - FY24 Home and Community Care Block Grant Funding Plan
15. Finance - Budget Amendment Ambulance Fees and EMS | MC billing service fees
16. Finance - Cabarrus County Schools Health Sciences Institute
17. Finance - Governmental Accounting Standards Board (GASB) 87 Budget Amendment
18. Finance - Government Accounting Standards Board (GASB) 96
19. Finance - Health Insurance Fund Balance Budget Amendment
20. Finance - Opioid Abatement Funding
21. Human Resources - Fire Services Compensation
22. Human Resources - Personnel Ordinance Update
23. Juvenile Crime Prevention Council - Approval of FY 23-24 JCPC Certification
24. Planning and Development - Community Development Budget Amendment
25. Planning and Development - Community Development Grant Required Plans and Programs
26. Register of Deeds - Use of Register of Deeds Automation Fund for Re-indexing Cabarrus County Land Records
27. Sheriff's Office - Awarding of Service Weapon to Captain Kevin Pfister Upon His Retirement
28. Sheriff's Office - Retirement of K9 Turbo
29. Tax Administration - Refund and Release Reports - May 2023

**F. NEW BUSINESS**

1. County Manager - Adoption of the Fiscal Year 2024 Budget

**G. OLD BUSINESS**

1. County Manager - Fiscal Year 2023 Funding Re-appropriations
2. Finance - Capital Improvement Plan ("CIP") Funded Projects in the FY2024 General Fund Budget

**H. REPORTS**

1. BOC - Receive Updates from Commission Members who Serve as Liaisons to

Municipalities or on Various Boards/Committees

2. BOC - Request for Applications for County Boards/Committees
3. Budget - Monthly Budget Amendment Report
4. Budget - Monthly Financial Update
5. County Manager - Monthly Building Activity Reports
6. County Manager - Monthly New Development Report
7. EDC - May 2023 Monthly Summary Report

- I. GENERAL COMMENTS BY BOARD MEMBERS**
- J. WATER AND SEWER DISTRICT OF CABARRUS COUNTY**
- K. CLOSED SESSION**
- L. ADJOURN**

### **Scheduled Meetings**

July 10	Work Session	4:00 p.m.	Multipurpose Room
July 17	Regular Meeting	6:30 p.m.	BOC Meeting Room
July 19	Cabarrus Summit	6:00 p.m.	Cabarrus Arena
August 7	Work Session	4:00 p.m.	Multipurpose Room
August 21	Regular Meeting	6:30 p.m.	BOC Meeting Room

**Mission:** Through visionary leadership and good stewardship, we will administer state requirements, ensure public safety, determine county needs, and provide services that continually enhance quality of life.

**Vision:** Our vision for Cabarrus is a county where our children learn, our citizens participate, our dreams matter, our families and neighbors thrive, and our community prospers.

### **Cabarrus County Television Broadcast Schedule Cabarrus County Board of Commissioners' Meetings**

The most recent Commissioners' meeting is broadcast at the following days and times. Agenda work sessions begin airing after the 1st Monday of the month and are broadcast for two weeks up until the regular meeting. Then the regular meeting begins airing live the 3rd Monday of each month and is broadcast up until the next agenda work session.

<b>Sunday - Saturday</b>	<b>1:00 P.M.</b>
<b>Sunday - Tuesday</b>	<b>6:30 P.M.</b>
<b>Thursday &amp; Friday</b>	<b>6:30 P.M.</b>

In accordance with ADA regulations, anyone who needs an accommodation to participate in the meeting should notify the ADA Coordinator at 704-920-2100 at least forty-eight (48) hours prior to the meeting.