

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
BOARD OF HEALTH DIRECTORS
December 7, 2021**

The Lake Cumberland District Board of Health met on Tuesday, December 7, 2021 via Zoom and it was recorded and saved on LCDHD YouTube channel available here:

https://youtu.be/T9qHrwK_jY

Members Present	Members Absent
Pam Bills, APRN Kristen Branham Joseph Brown, MD Judge Gale Cowan Judge Ricky Craig Judge Jimmie Greene Gina Goode Matt Jackson RPh Judge Steve Kelley Stephen McKinley, OD Richard Miles, MD Judge John Phelps, Jr. Gayle Phillips, DNP, APRN Shantila Rexroat, DVM Marlene Richardson, DMD Judge Gary Robertson proxy Joe Silvers, RPh Judge Barry Smith proxy Jake Staton James Wesley	Judge Mike Anderson Judge Randy Dial Judge John Frank Patty Guinn, RPh Bruce Jasper, DVM Kay King Tank Lawson, ARNP Susanne Lee, OD Alvin Perkins, MD

Judge Kelley called the meeting to order after confirmation of quorum of Board members. A moment of silence was given in honor of Dr. Fallahzadeh. He was a passionate physician who gave a great portion of his life in service to our community. An invocation was given by Judge Phelps. After confirming a quorum was present, the meeting was called to order by Chair, Judge Steve Kelley.

Topic	Discussion	Follow-up
Legal Authority		
Approval of Minutes	Jim Wesley motioned to approve the prior minutes. Dr. Miles seconded the motion. The board voted unanimously to approve the prior minutes. Motion carried.	None

Old Business	Judge Kelley asked if there was anything for which the administration had failed to adequately follow-up on since the last meeting. Nothing was noted.	None.
Election of Officers	<p>With the passing of Dr. Fallahzadeh, an At Large member would need to be elected to serve on the Executive Committee. Dr. Richardson agreed to be nominated and serve on the executive committee.</p> <p>Jake Staton moved to keep the slate of officers the same as they are currently and for Dr. Richardson to replace Dr. Fallahzadeh as the At Large member. This was seconded by Dr. Miles. Judge Kelley asked for any further discussion and none was made. The board voted unanimously to approve the motion.</p> <p>Current Members: Chair, Judge Steve Kelley, Pulaski; V. Chair, Dr. Gayle Phillips, Taylor; Past-chair, Judge John Phelps, Cumberland; At Large 1, Dr. Hossein Fallahzadeh, Pulaski; At Large 2, Dr. Richard Miles, Russell; and, At Large 3, Judge Gary Robertson, Russell)</p>	
Resource Stewardship		
Audit Report	Brad Hays, auditor with RFH, presented the annual audit report. No adverse findings. No questioned costs. No prior audit findings. No proposed adjustments.	
<p>Financial Updates/Directors Comments</p> <p>Financial Position 10/31/21</p>	<p>Ron Cimala presented the financial report for 10/31/21. The LCDHD balance sheet for the period shows \$11,789,446.57 in assets with \$88,422.42 of that owed in current liabilities. The total of LCDHD's assets is equal to 6 months of this year's average expenses. LCDHD had \$4,852,137.21 in Year-To-Date revenues and \$5,476,983.08 in Year-To-Date expenditures resulting in a \$(624,845.87) Year-To-Date deficit.</p> <p>Our annual revenues are less than budgeted mainly due to not receiving any local tax revenue until middle of the year. We also will</p>	None

	<p>be starting our GO365 program after January 1st which should generate a chunk of revenue.</p> <p>Finally, this note, DPH is five quarters behind on billing us for their Medicaid Match payments. The Medicaid Match amount due back to DPH each quarter is dependent on the amount of Medicaid money we receive for the previous quarter, but as DPH has delayed billing us for the last three quarters, we estimate approximately \$500,000 is now due back to the state out of the Medicaid Revenue we've collected for services.</p> <p>At this point in the fiscal year, it is still very difficult to project a reliable fiscal year end 2022 position. As a result, we plan on ending the year as budgeted at a \$1,537,941 surplus.</p>	
<p>Christmas Bonus</p>	<p>The Board wanted to recognize the hard work the staff has put in during the pandemic and to show appreciation by awarding a one-time lump sum payment of \$1,000. Jake Staton moved to approve a one-time lump sum payment of \$1,000 for full time merit and full-time contract staff who receive retirement benefits. Dr. Miles seconded. No further discussion. All approved. Motion carried.</p>	
<p>Grants Report</p>	<p>Carol Huckelby gave the quarterly grant report. We have for applied for and received three new grants this quarter.</p> <ul style="list-style-type: none"> • The Foundation for a Healthy Ky grant - to create a social media campaign to encourage vaccine confidence among unvaccinated population. It will be wrapping up soon. - \$1,500. • Syringe Services Program Expansion grant- we will use it to do some community awareness events and provide Fentanyl testing strips through the syringe exchange program. - \$33,002 x 5 counties = \$165,010 • Office of Health Equity CHW grant – will allow us to hire two CHWs to work in the diabetes program. - \$127,740 	<p>None</p>

Continuous Improvement		
Suggestions	The board was reminded they can make suggestions via email or to type into the chat box during the live Zoom meeting to be followed-up by the administration. None were presented during the meeting.	The administration will follow on board suggestions.
Employee Satisfaction Surveys	We have had the highest response rate of employee participation at 70.3%. In general, scores were high.	
Director/Agency Board Survey	With our current accreditation efforts, we will be required to create a new strategic plan. We will incorporate the SWOT analysis into the Board of Health survey. Forms will be sent out in January. We would appreciate Strengths, Weakness, Opportunities, and Threats evaluation as it pertains to the health department and the community as a whole.	
Annual EPI Report	Report will be given in March.	None
Partner Engagement		
Syringe Exchange	<p>Tracy Aaron presented the update and said that SEP programs were going well. LCDHD participated in a needle cleanup at Rocky Hollow Park in Somerset.</p> <p>Laura Woodrum explained that the new SEP Expansion grant would cover the cost of some of the SEP supplies that were not currently covered. It would also allow us to expand HIV testing. One mobile event would be held each month across the counties. Promotional material would be created to help reduce the stigma. Personal care items would be provided for program participants.</p>	None
Oversight		
Covid-19 Update	<p>Sam Price presented the Covid-19 update. Cases increased dramatically during the summer and started to drop in October. Seems like we are in an increase again. DOC activation is currently at level 3.</p> <p>Incident rate – our counties are all in the red level of incidence. There is a delay between our reporting and the state reporting which is why the reports may look different.</p>	None

	<p>The District has a 4.17% hospitalization rate vs KY 4.18%. The District has a 1.71% mortality rate vs KY 1.41%. Currently, 78% of ICU beds are filled. This is an improvement over where we were a few weeks ago.</p> <p>Omicron Variant was first detected in Botswana November 11. The CDC is working with State and local public health officials to monitor the spread. Currently no detected cases of Omicron variant in KY.</p> <p>Judge Phelps asked if there had been a recent audit of the numbers of deaths? Amy confirmed that yes, the State audits death certificates and every so often they will push those stats out to us. We may not know all the deaths that occur with COVID as a cause of death. We get them in clusters and get 10 or 15 at a time but these are from the past.</p> <p>Dr. Miles explained that our community has a higher proportion of elderly, people with diabetes, and people who have obesity which would increase the mortality due to Covid.</p> <p>Fewer patients admitted to our hospitals, but the ones that are tend to be sicker than other areas of the state. Early on, we had a large proportion of our LTC patients who died due to Covid.</p>	
<p>Human Resources Report</p>	<p>Since our last meeting, we had 14 staff come on duty and 10 go off duty.</p> <p>We currently have 3 open positions and due to the current job market are having a difficult time recruiting new staff.</p>	<p>None</p>
<p>Policy Development</p>		
<p>New Policies</p>	<p>Janae Tucker presented a draft version of a Covid-19 Vaccination, Testing, and Face Covering Policy. This is in response to OSHA’s Emergency Temporary Standard on Vaccination and Testing. Staff would be required to be vaccinated unless they have a medical or religious exemption. Those exempted must test weekly for Covid.</p> <p>Judge Phelps asked if a reward program could be established for Board Members. Amy</p>	<p>None</p>

	agreed to look into it. He also asked if there was one for employees. Amy responded that we do have one currently but are in the process of revamping it.	
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Chair set the next meeting date for March 1st at 7pm EST/6pm CST.

A motion was made by Dr. Miles to adjourn the meeting. Gayle Phillips seconded the motion. Motion carried and meeting was adjourned.

Judge Steve Kelley, Chair _____

Ms. Amy Tomlinson, Secretary _____

DRAFT

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
BOARD OF HEALTH DIRECTORS
September 7, 2021**

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Judge Mike Anderson Kristen Branham Joseph Brown, MD Judge Gale Cowan Judge Ricky Craig Judge Randy Dial Judge Jimmie Greene Gina Goode Patty Guinn, RPh Judge Steve Kelley Kay King Tank Lawson, ARNP Susanne Lee, OD Stephen McKinley, OD Richard Miles, MD Judge John Phelps, Jr. Gayle Phillips, DNP, APRN Marlene Richardson, DMD Judge Gary Robertson proxy James Wesley	Pam Bills, APRN Hossein Fallahzadeh, MD Judge John Frank Matt Jackson RPh Bruce Jasper, DVM Alvin Perkins, MD Shantila Rexroat, DVM Joe Silvers, RPh Judge Barry Smith Jake Staton

An invocation was given by Judge Steve Kelley.

After confirming a quorum was present, the meeting was called to order by Chair, Judge Steve Kelley.

Topic	Discussion	Follow-up
Legal Authority		
Approval of Minutes	Judge Anderson motioned to approve the prior minutes. Judge Phelps seconded the motion. The board voted unanimously to approve the prior minutes. Motion carried.	None
Old Business	Judge Kelley asked if there was anything for which the administration had failed to adequately follow-up on since the last meeting.	None.

	Nothing was noted.	
Resource Stewardship		
Financial Updates/Directors Comments		
Financial Position 6/30/21	<p>Ron Cimala presented the financial report for 6/30/21. The LCDHD balance sheet for the period shows \$12,426,713.89 in assets with \$100,843.87 of that owed in current liabilities. The total of LCDHD's assets is equal to 6 months of this year's average expenses. LCDHD had \$16,901,022.35 in Year-To-Date revenues and \$13,973,870.28 in Year-To-Date expenditures resulting in a \$2,927,152.07 Year-To-Date surplus after closeout. Of the \$16,901,022.35 in Year-To-Date revenues, \$211,914.82 was made up of prior year reserves that we used to closeout program deficits which means that before closeout we had a surplus of \$2,715,237.25. Our annual expenses are less than budgeted right now since we didn't spend as much in staffing agency services dollar for dollar since we had planned to hire quite a few HANDS employees but COVID-19 put that on pause. Also, our travel costs were way down due to COVID-19. Finally, this note, DPH is six quarters behind on billing us for their Medicaid Match payments. The Medicaid Match amount due back to DPH each quarter is dependent on the amount of Medicaid money we receive for the previous quarter, but as DPH has delayed billing us for the last six quarters, we estimate approximately \$475,000 is now due back to the state out of the Medicaid Revenue we've collected for services.</p>	None
Grants Report	<p>Carol Huckelby gave the quarterly grant report. We have applied for and been granted \$10,000 in additional funding for the EnviroHealth Link grant.</p> <p>Budget requests for the JEP and ROPA grants were submitted for Y3 of both grants. We will know the results in October.</p> <p>We submitted Syringe Services Program</p>	None

	<p>Expansion grants for each of our 5 SEP programs. We requested \$33,000 per each SEP. If funded, we will host community awareness events and provide Fentanyl testing strips in the SEP. We will know in September if we receive the funding.</p> <p>Continuing Programs: Health Education will continue Teen Pregnancy Prevention programs in the school setting. Diabetes will continue the Heart4Change grant activities. ROPA/JEP will continue jail education and case management.</p>	
Environmental Starting Salary	<p>Due to constant turnover in the Environmentalist position in Taylor County and lack of adequate applicants, we request that the board increase the starting salary for that position from \$12.15 to \$19.80.</p> <p>Environmental services is a service that under statute LCDHD must provide to our community. Currently, we are recruiting for two positions – one in Casey County and one in Taylor County. It is expected that the education requirements for Environmentalists will increase going forward as the state is reviewing this job classification currently.</p> <p>Two current employees will have their salaries increased due to compression. This will ensure that new environmentalists will not start at a higher rate than existing environmentalists.</p> <p>The compression adjustment for existing staff will be calculated at the new starting rate plus a factor for years of service. The calculation for factoring in years of service has been used for several years at LCDHD. The total compression adjustment will increase our current staff cost by \$11,219. A motion was made to approve the increase in starting salary to \$19.80 by Dr. Miles. It was seconded by Jim Wesley. The Board voted on the increase. All were in favor of the salary adjustment. Motion carried.</p>	None
Continuous Improvement		
Suggestions	The board was reminded they can make	The

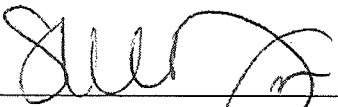
	suggestions via email or to type into the chat box during the live Zoom meeting to be followed-up by the administration. None were presented during the meeting.	administration will follow on board suggestions.
Employee Harassment Training	Carol Huckelby shared that the program roll-out is suspended at this time due to COVID. She is working with other Health Department HR managers and they have been more severely impacted by Covid as they were smaller health departments. Once the other HD can resume normal HR duties, this work will resume. This item will be removed from the agenda until work on it can resume.	None
Partner Engagement		
Syringe Exchange	<p>Tracy Aaron presented the update and said that due to Covid, we have been unable to provide community education. Judge Kelley advised the Board that at the Somerset City Council meeting, there was some community opposition to the SEP. The community is concerned with a perceived increase in the number of homeless and discarded needles in public areas. He urged the Board to continue speaking about the benefits of the SEP and that it is a way to decrease Hepatitis C (and A) in our community. The overall syringe collection rate remains at 96%. It is not 100% because of drop out clients.</p> <p>Tracy said that there will be a small group created with community members to address the public concern and propose some next steps.</p> <p>Dr. Miles cautioned that the HIV rates in our community would increase without a SEP program. He stated that the syringes on the street aren't from the SEP program. The return rate on syringes in our SEP program is excellent.</p> <p>Amy Tomlinson offered that LCDHD would be willing to present information about the SEP program at any city council meetings.</p>	None
Oversight		
Covid-19 Update	Sam Price presented the Covid-19 update. We are currently at the highest level of Covid infections in our 10 counties than at any time during the pandemic. The DOC has been	None


	<p>reactivated and is at a level 2. Kentucky as a whole has a 13.17% positivity rate and all but 2 counties are in the “red” or critical level of spread as of 9/3/21. There have been 7,845 deaths across the Commonwealth.</p> <p>The state published red zone reduction recommendations include promoting vaccination efforts. We added EMS and hospital community partners in our last media update held last week to share the current Covid situation in our counties. All 10 of our counties have a lower than state average vaccination rate. Our community partners are continuing to provide Covid-19 vaccinations as well. We are updating the state with testing locations in our community as requested. We are sending out guidance to our community partners. We are in constant communication with our local schools and helping to address their questions. We are distributing face masks to schools for the students.</p> <p>We have one FEMA EMS team that is assisting transports between hospitals and between hospitals and nursing homes. This resource has allowed our local EMS staff to better respond to emergencies.</p> <p>Amy stated that 90 to 95% of the Covid patients in the hospital due to Covid are unvaccinated.</p> <p>We are providing these statistics on our website and also in our daily brief. We will add more information to our website to get the message out.</p> <p>Dr. Miles stated that a most of the vaccinated patients in the hospital are ones with significant medical problems and/or immune deficiencies. Due to immune deficiencies, their bodies are not responding to the vaccine. Healthy people who take the vaccine are doing very well. This is a disease of the unvaccinated.</p> <p>We urge our community to get the latest guidance on Covid from our website. Exposure protocols are available as well as general information on Covid.</p>	
Human Resources	Since our last meeting, we had 11 staff come	None

Report	on duty and 8 go off duty. Of the 5 merit off duty, 4 were merit retirements.	
Nominations for Officers	Judge Kelley requested volunteers from the Board to create a nomination committee for the December vote. Volunteers for nominating committee are Gayle Phillips, Judge Phelps, Judge Greene, and Dr. Miles.	Amy will provide email addresses to the volunteers.
Policy Development		
New Policies	Janae Tucker presented four new policies in response to new OSHA regulations. Jim Wesley moved to adopt the new policies. Seconded by Dr. Miles. No further discussion. Board voted all in favor. Motion carried.	None

Chair set the next meeting date for December 7th as a virtual meeting at 7pm EST/6pm CST.

A motion was made by Jim Wesley to adjourn the meeting. Judge Phelps seconded the motion. Motion carried and meeting was adjourned.

Judge Steve Kelley, Chair 

Ms. Amy Tomlinson, Secretary 

Title	Name	County	Attending 12/7?	Present	
Judge	Anderson, Mike	Wayne	Yes		Proxy Judge Frank
	Bills, Pam	Green		Y	
	Branham, Kristen	Cumberland	Yes	Y	
Dr.	Brown, Joseph	Wayne	Yes	Y	
Judge	Cowan, Gale	Adair	Yes	Y	
Judge	Craig, Ricky	Clinton	Yes	Y	
Judge	Dial, Randy	Casey	No		Proxy Judge Franks
Dr.	Fallahzadeh, Hossein	Pulaski	No		
Judge	Frank, John	Green	Yes		
	Goode, Gina	Casey	Yes	Y	
Judge	Green, Jimmy "Bevo"	McCreary	Yes	Y	
	Guinn, Patty	Pulaski	Yes		
	Jackson, Matt	Adair	Yes	Y	
Dr.	Jasper, Bruce	Pulaski			
Judge	Kelley, Steven	Pulaski	Yes	Y	
	King, Kay	Casey	No		
	Lawson, Terry "Tank"	McCreary	Yes		
Dr.	Lee, Susanne	Russell			
Dr.	McKinley, Stephen	McCreary	Yes	Y	
Dr.	Miles, Richard	Russell	Yes	Y	
Dr.	Perkins, Alvin	Pulaski	No		
Judge	Phelps, John Jr.	Cumberland	Yes	Y	
Dr.	Phillips, Dr. Gayle	Taylor		Y	
Dr.	Rexroat, Shantila	Adair	Yes	Y	
Dr.	Richardson, Marlene	Taylor	Yes	Y	
Judge	Robertson, Gary D.	Russell	Yes	Y	Proxy Judge Phelps
	Joe Silvers	Wayne	Yes	Y	
Judge	Smith, Barry	Taylor	No	Y	Proxy Phelps
	Staton, Jake	Clinton		Y	
	Wesley, James	Pulaski	Yes	Y	

Barry Smith
County Judge/Executive
tcjudgeexec@taylorcounty.us



Melissa W. Williams
County Treasurer
treasurer@taylorcounty.us

Magistrates:

James Jones - 1st Dist.
John D. Gaines - 2nd Dist.
Tommy Corbin - 3rd Dist.

Magistrates:

Zuel Yarberry - 4th Dist.
Derrick Bright - 5th Dist.
Richard A. Phillips - 6th Dist.

OFFICE OF THE JUDGE/EXECUTIVE

203 N. Court St., Suite 4
Campbellsville, Kentucky 42718
270-465-7729 • Fax: 270-789-3675
www.taylorcounty.us

December 7, 2021

Re: Health Board

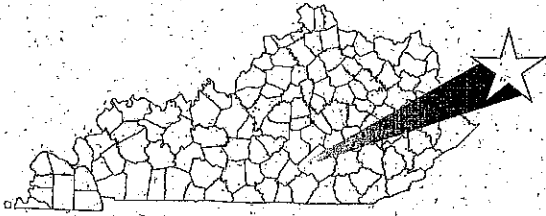
It is with regret that I will be unable to attend the meeting of the Health Department Board on December 7, 2021. I do hereby appoint Judge John Phelps as my representative to vote in my stead on any and all matters that shall be brought before the board.

Sincerely,

Barry Smith
Taylor County Judge Executive



Equal Opportunity Employer M/E/D



Gary D. Robertson
Russell County Judge Executive

Phone: (270) 343-2112
Fax: (270) 343-2134
email: grobertson@rckygov.com

P.O. BOX 397
Jamestown, KY 42629

December 6, 2021

Lake Cumberland District Health Department
Attn: Melonie Williams
500 Bourne Avenue
Somerset, KY 42501

Dear Ms. Williams:

Due to a schedule conflict, I am unable to attend the Lake Cumberland District Health Department's Board Meeting, Tuesday, December 7, 2021; therefore, this letter serves as my proxy appointing Judge Executive John Phelps to vote on my behalf.

Sincerely,

Gary D. Robertson
Russell County Judge Executive

/la



District Board of Directors Meeting
Tuesday, December 7, 2021; 7:00 EST/6:00 CST

ZOOM link: <https://lcdhd.zoom.us/j/84710879816?pwd=NnFxVmhhJck0vRjJkU2NpVnU3cE1lUT09>

AGENDA

- Welcome/Invocation/Dinner.....Chair Kelley
- I. Legal Authority**
- a. Quorum/Approval of Minutes.....Chair Kelley
 - i. Approve September Minutes
 - b. Old Business.....Chair Kelley
 - i. Was there anything the administration failed to adequately follow-up on from the last meeting?.....Chair Kelley
 - c. Election of Officers.....Chair Kelley
 - i. Current Members: Chair, Judge Steve Kelley, Pulaski; V. Chair, Dr. Gayle Phillips, Taylor; Past-chair, Judge John Phelps, Cumberland; At Large 1, Dr. Hossein Fallahzadeh, Pulaski; At Large 2, Dr. Richard Miles, Russell; and, At Large 3, Judge Gary Robertson, Russell)
- II. Resource Stewardship**
- a. Audit Report.....RFH, PLLC
 - b. Financial Updates/Director’s Comments.....Ron Cimala/Amy Tomlinson
 - c. Christmas Bonus.....Amy Tomlinson
 - d. Grants Report.....Carol Huckelby
- III. Continuous Improvement (QI Projects Etc. - Story Boards available at: <https://www.lcdhd.org/info-tools/quality-improvement/>)**
- a. Make Suggestions on Back of Agenda.....Amy Tomlinson
 - b. Employee Satisfaction Surveys.....Janae Tucker
 - c. Director/Agency Board Survey.....Janae Tucker
 - d. Annual Epi Report.....Amanda England
- IV. Partner Engagement**
- a. Syringe Exchange Progress/Update.....Tracy Aaron
- V. Oversight**
- a. COVID-19 Update.....Sam Price
 - b. Human Resources Report.....Carol Huckelby
- VI. Policy Development**
- a. New Policies.....Janae Tucker
- Next Meeting/Closing Comments.....Chair Kelley

NALBOH'S Six Functions of Public Health Governance

Definitions: Governing entity - The board, commission, council, individual, or other body legally accountable for ensuring the Six Functions of Public Health Governance in a jurisdiction. **Governance Functions (The Six Functions of Public Health Governance)** - The identified functions for which a public health governing entity is responsible (All public health governing entities are responsible for some aspects of each function. No one function is more important than another).

The Six Functions Include: 1. Policy Development, 2. Resource Stewardship, 3. Legal Authority, 4. Partner Engagement, 5. Continuous Improvement, 6. Oversight

Suggestions for Health Department of Community Improvement Projects

Recommendations: Please use the space below to make any suggestions as to improvement projects you would like to see the health department undertake. These can include suggestions for internal agency improvement, staff enhancement, or community health improvement projects. Submit your response to the Executive Director.

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An invocation was given by Judge Steve Kelley.

After confirming a quorum was present, the meeting was called to order by Chair, Judge Steve Kelley.

Topic	Discussion	Follow-up
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Old Business	Judge Kelley asked if there was anything for which the administration had failed to	None.

	adequately follow-up on since the last meeting. Nothing was noted.	
Resource Stewardship		
<p>Financial Updates/Directors Comments</p> <p>Financial Position 6/30/21</p>	<p>Ron Cimala presented the financial report for 6/30/21. The LCDHD balance sheet for the period shows \$12,426,713.89 in assets with \$100,843.87 of that owed in current liabilities. The total of LCDHD's assets is equal to 6 months of this year's average expenses. LCDHD had \$16,901,022.35 in Year-To-Date revenues and \$13,973,870.28 in Year-To-Date expenditures resulting in a \$2,927,152.07 Year-To-Date surplus after closeout. Of the \$16,901,022.35 in Year-To-Date revenues, \$211,914.82 was made up of prior year reserves that we used to closeout program deficits which means that before closeout we had a surplus of \$2,715,237.25. Our annual expenses are less than budgeted right now since we didn't spend as much in staffing agency services dollar for dollar since we had planned to hire quite a few HANDS employees but COVID-19 put that on pause. Also, our travel costs were way down due to COVID-19. Finally, this note, DPH is six quarters behind on billing us for their Medicaid Match payments. The Medicaid Match amount due back to DPH each quarter is dependent on the amount of Medicaid money we receive for the previous quarter, but as DPH has delayed billing us for the last six quarters, we estimate approximately \$475,000 is now due back to the state out of the Medicaid Revenue we've collected for services.</p>	None
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	<p>We submitted Syringe Services Program Expansion grants for each of our 5 SEP programs. We requested \$33,000 per each SEP. If funded, we will host community awareness events and provide Fentanyl testing strips in the SEP. We will know in September if we receive the funding.</p> <p>Continuing Programs: Health Education will continue Teen Pregnancy Prevention programs in the school setting. Diabetes will continue the Heart4Change grant activities. ROPA/JEP will continue jail education and case management.</p>	
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<p>Continuous Improvement</p>		

Suggestions	The board was reminded they can make suggestions via email or to type into the chat box during the live Zoom meeting to be followed-up by the administration. None were presented during the meeting.	The administration will follow on board suggestions.
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Syringe Exchange	<p>Tracy Aaron presented the update and said that due to Covid, we have been unable to provide community education. Judge Kelley advised the Board that at the Somerset City Council meeting, there was some community opposition to the SEP. The community is concerned with a perceived increase in the number of homeless and discarded needles in public areas. He urged the Board to continue speaking about the benefits of the SEP and that it is a way to decrease Hepatitis C (and A) in our community. The overall syringe collection rate remains at 96%. It is not 100% because of drop out clients.</p> <p>Tracy said that there will be a small group created with community members to address the public concern and propose some next steps.</p> <p>Dr. Miles cautioned that the HIV rates in our community would increase without a SEP program. He stated that the syringes on the street aren't from the SEP program. The return rate on syringes in our SEP program is excellent.</p> <p>Amy Tomlinson offered that LCDHD would be willing to present information about the SEP program at any city council meetings.</p>	None
Oversight		
Covid-19 Update	Sam Price presented the Covid-19 update. We are currently at the highest level of Covid infections in our 10 counties than at any time	None

	<p>during the pandemic. The DOC has been reactivated and is at a level 2. Kentucky as a whole has a 13.17% positivity rate and all but 2 counties are in the “red” or critical level of spread as of 9/3/21. There have been 7,845 deaths across the Commonwealth.</p> <p>The state published red zone reduction recommendations include promoting vaccination efforts. We added EMS and hospital community partners in our last media update held last week to share the current Covid situation in our counties. All 10 of our counties have a lower than state average vaccination rate. Our community partners are continuing to provide Covid-19 vaccinations as well. We are updating the state with testing locations in our community as requested. We are sending out guidance to our community partners. We are in constant communication with our local schools and helping to address their questions. We are distributing face masks to schools for the students.</p> <p>We have one FEMA EMS team that is assisting transports between hospitals and between hospitals and nursing homes. This resource has allowed our local EMS staff to better respond to emergencies.</p> <p>Amy stated that 90 to 95% of the Covid patients in the hospital due to Covid are unvaccinated.</p> <p>We are providing these statistics on our website and also in our daily brief. We will add more information to our website to get the message out.</p> <p>Dr. Miles stated that a most of the vaccinated patients in the hospital are ones with significant medical problems and/or immune deficiencies. Due to immune deficiencies, their bodies are not responding to the vaccine. Healthy people who take the vaccine are doing very well. This is a disease of the unvaccinated.</p> <p>We urge our community to get the latest guidance on Covid from our website. Exposure protocols are available as well as general information on Covid.</p>	
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Human Resources Report	Since our last meeting, we had 11 staff come on duty and 8 go off duty. Of the 5 merit off duty, 4 were merit retirements.	None
Nominations for Officers	Judge Kelley requested volunteers from the Board to create a nomination committee for the December vote. Volunteers for nominating committee are Gayle Phillips, Judge Phelps, Judge Greene, and Dr. Miles.	Amy will provide email addresses to the volunteers.
Policy Development		
New Policies	Janae Tucker presented four new policies in response to new OSHA regulations. Jim Wesley moved to adopt the new policies. Seconded by Dr. Miles. No further discussion. Board voted all in favor. Motion carried.	None

Chair set the next meeting date for December 7th as a virtual meeting at 7pm EST/6pm CST.

A motion was made by Jim Wesley to adjourn the meeting. Judge Phelps seconded the motion. Motion carried and meeting was adjourned.

Judge Steve Kelley, Chair _____

Ms. Amy Tomlinson, Secretary _____

**LAKE CUMBERLAND DISTRICT
HEALTH DEPARTMENT
Somerset, Kentucky**

**FINANCIAL STATEMENTS
June 30, 2021**

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INDEPENDENT AUDITORS' REPORT

The Board of Health
Lake Cumberland District Health Department
Somerset, Kentucky

Report on the Financial Statements

We have audited the accompanying financial statements of the Lake Cumberland District Health Department (the District Health Department) which comprise the statement of assets, liabilities, and fund balance – regulatory basis as of June 30, 2021, and the related statement of revenues, expenditures, and changes in fund balance – regulatory basis – budget to actual, for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the financial reporting provisions of the *Administrative Reference* established by the Commonwealth of Kentucky, Cabinet for Health and Family Services, Department for Public Health, Division of Administration and Financial Management as described in Note 1. Management is also responsible 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. 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. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles

As described in Note 1, the financial statements are prepared by the District Health Department, on the basis of the financial reporting provisions of the *Administrative Reference*, which is a basis of accounting other than accounting principles generally accepted in the United States of America, to comply with the requirements of the Commonwealth of Kentucky.

The effects on the financial statements of the variances between the regulatory basis of accounting described in Note 1 and accounting principles generally accepted in the United States of America, although not reasonably determinable, are presumed to be material.

Adverse Opinion on U.S. Generally Accepted Accounting Principles

In our opinion, because of the significance of the matter discussed in the “Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles” paragraph, the financial statements referred to above do not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of the District Health Department as of June 30, 2021, and the respective changes in financial position for the year then ended.

Unmodified Opinion on Regulatory Basis of Accounting

In our opinion, the financial statements referred to above, present fairly, in all material respects, the assets, liabilities and fund balances of the Lake Cumberland District Health Department, as of June 30, 2021, and the respective revenues and expenditures, and budgetary results for the year then ended, in accordance with the financial reporting provisions of the *Administrative Reference* as described in Note 1.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements that collectively comprise the District Health Department’s basic financial statements. The supplementary schedules of revenues and direct and indirect costs by reporting area are presented for purposes of additional analysis and are not a required part of the basic financial statements. The schedule of expenditures of federal awards is presented for purposes of additional analysis as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, and is also not a required part of the basic financial statements.

The supplementary schedules of revenues and direct and indirect costs by reporting area and the schedule of expenditures of federal awards are the responsibility of management and were derived from and relate directly to the underlying accounting and other records used to prepare the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary schedules of revenues and direct and indirect costs by reporting area and the schedule of expenditures of federal awards are fairly stated in all material respects in relation to the basic 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 14, 2021, on our consideration of the District Health Department’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 the District Health Department’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 the District Health Department’s internal control over financial reporting and compliance.

RFH

RFH, PLLC
Lexington, Kentucky
October 14, 2021

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
STATEMENT OF ASSETS, LIABILITIES AND FUND BALANCE
REGULATORY BASIS
June 30, 2021**

ASSETS

Current assets	
Checking	\$ 10,371,933
Petty cash	<u>2,100</u>
Total current assets	10,374,033
Investments	
Certificates of deposit	<u>2,052,680</u>
Total assets	<u>\$ 12,426,713</u>

LIABILITIES AND FUND BALANCE

Current liabilities	
Payroll withholdings and other payables	<u>\$ 100,844</u>
Fund Balance	
Unrestricted	6,880,967
Reserved - Local Community Health	150
Reserved - MCH	3,052
Reserved - Medicaid match	466,169
Reserved - Employer retirement	1,777,536
Restricted - Capital	125,000
Restricted - State	847,332
Restricted - Federal	239,840
Restricted - Fees	<u>1,985,823</u>
Total fund balance	<u>12,325,869</u>
Total liabilities and fund balance	<u>\$ 12,426,713</u>

The accompanying notes are an integral
part of the financial statements.

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
STATEMENT OF REVENUES, EXPENDITURES AND CHANGES IN FUND BALANCE
REGULATORY BASIS – BUDGET TO ACTUAL
for the year ended June 30, 2021

	Budget	Actual	Over (under) Budget
REVENUES			
State	\$ 3,264,264	\$ 2,884,483	\$ (379,781)
Federal, pass-through and direct	3,694,215	7,093,759	3,399,544
Local	3,316,519	3,280,907	(35,612)
Service fees and other	5,417,727	3,382,845	(2,034,882)
Interest	59,423	47,116	(12,307)
Prior year funds used	<u>-</u>	<u>211,915</u>	<u>211,915</u>
 Total revenues	 <u>15,752,148</u>	 <u>16,901,025</u>	 <u>1,148,877</u>
EXPENDITURES			
Salaries and leave	5,206,206	5,600,410	394,204
Part-time	252,725	211,726	(40,999)
Fringe benefits	4,387,068	4,294,560	(92,508)
Contracts	77,750	138,309	60,559
Travel	527,521	174,657	(352,864)
Space occupancy	649,002	520,616	(128,386)
Office and administrative expense	447,805	594,335	146,530
Medical supplies	602,490	294,602	(307,888)
Other operating expenses	<u>2,530,352</u>	<u>2,144,657</u>	<u>(385,695)</u>
 Total expenditures	 <u>14,680,919</u>	 <u>13,973,872</u>	 <u>(707,047)</u>
EXCESS OF REVENUES OVER (EXPENDITURES)	1,071,229	2,927,153	1,855,924
Adjustments to fund balance			
Prior year funds used	<u>-</u>	<u>(211,915)</u>	<u>(211,915)</u>
Net change in fund balance	1,071,229	2,715,238	1,644,009
FUND BALANCE - beginning of year	<u>9,610,631</u>	<u>9,610,631</u>	<u>-</u>
FUND BALANCE - END OF YEAR	<u>\$ 10,681,860</u>	<u>\$ 12,325,869</u>	<u>\$ 1,644,009</u>

The accompanying notes are an integral
part of the financial statements.

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021

1. ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES

Lake Cumberland District Health Department (the District Health Department) was created and became fully operational on July 1, 1971, and is governed by a District Board of Health, which is a body politic and corporate. The purpose of the District Health Department is to provide centralized administrative services for the county health departments. In July 1982, the District Health Department expanded from five counties to its current ten counties in the Lake Cumberland area which includes the counties of Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, and Wayne. The District Board of Health consists of representatives from each of the ten counties as set forth in Kentucky Revised Statutes 212.855.

The District Health Department records revenues and expenditures in accordance with the *Administrative Reference* established by the Commonwealth of Kentucky, Cabinet for Health and Family Services, Department for Public Health, Division of Administration and Financial Management which is a regulatory basis of accounting. This basis of accounting and financial reporting differs from generally accepted accounting principles in several areas. Accounts receivable for revenue earned, but not received, and accounts payable for expense incurred, but unpaid, are not recorded. Inventories are not recorded, but are expensed to the current period. Property, plant and equipment are not capitalized and the related depreciation expense is not reported; prepaid expenses and unearned revenues are also not recorded. "Prior year funds used" represents previously accumulated restricted and unrestricted fund balance.

Federal and state revenues for services are recognized as received and are based in some instances upon reimbursement reports filed by the District Health Department for eligible services and are subject to adjustments based upon federal and state agency audits as to eligibility of recipients and the computation of reimbursable costs. As of October 14, 2021, no formal reports have been issued as a result of audits performed or in progress for the year ended June 30, 2021.

Source of Funds:

Revenue sources of the District Health Department are divided into five groups as follows:

State – includes restricted and unrestricted state grant funds

Federal – includes direct federal grant funds and those funds passed through the Cabinet for Health and Family Services

Local – includes funds from taxing districts, county and city appropriations, and donations from private sources

Service fees and other – includes funds from Medicaid and Medicare payments for services, self-pay, insurance payments, and other pay for service

Interest – includes interest received from bank accounts and investments.

All transactions are recorded in the general fund except those related to environmental inspection and permit fees. These fees are treated as escrow funds and are deposited in an environmental checking account with a portion being disbursed to the State and a portion being disbursed to the District Health Department. Revenue is recorded when the portion disbursed to the District Health Department is deposited in the operating checking account.

Funding restricted for specific programs in excess of those programs' allowed reimbursements or expenditures are recorded at year-end under Fund Balance - Restricted.

The District Health Department is directed by the State when to use restricted or unrestricted funds when an expenditure is incurred for purposes for which both restricted and unrestricted fund balances are available.

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021

1. ORGANIZATION AND SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

The District Health Department uses an indirect cost allocation plan approved by the Commonwealth of Kentucky, Cabinet for Health and Family Services, Department for Public Health, and is prepared in accordance with 2 CFR Part 200.

Functional classifications are included in supplementary data for the District Health Department.

The preparation of financial statements requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly actual results could differ from those estimates.

The District Health Department has evaluated and considered the need to recognize or disclose subsequent events through October 14, 2021, which represents the date that these financial statements were available to be issued. Subsequent events past this date, as they pertain to the year ended June 30, 2021, have not been evaluated by the District Health Department.

2. CASH AND INVESTMENTS

KRS 66.480 authorizes the District Health Department to invest in the following, including but not limited to, obligations of the United States and of its agencies and instrumentalities, obligations and contracts for future delivery or purchase of obligations backed by the full faith and credit of the United States, obligations of any corporation of the United States government, bonds or certificates of indebtedness of this state, and certificates of deposit issued by or other interest-bearing accounts of any bank or savings and loan institution which have a physical presence in Kentucky and are insured by the Federal Deposit Insurance Corporation (FDIC) or which are collateralized, to the extent uninsured, by any obligation permitted by KRS 41.240(4). The Statute also authorizes investment in mutual funds, exchange traded funds, individual equity securities and high-quality corporate bonds that are managed by a professional investment manager and subject to additional requirements outlined in KRS 66.480.

Interest rate risk is the risk that changes in interest rates will adversely affect the fair value of an investment. Investments held for longer periods are subject to increased risk of adverse interest rate changes. The District Health Department does not have a policy governing interest rate risk.

Custodial credit risk is the risk that, in the event of the failure of the counterparty, the District Health Department will not be able to recover the value of the investment or collateral securities that are in the possession of an outside party. In order to anticipate market changes and provide a level of security for all funds, the collateralization level shall be one hundred percent of the market value of the principal, plus accrued interest.

The District Health Department's deposits at June 30, 2021, were not fully covered by federal depository insurance or by collateral held by the custodial banks in the District Health Department's name. However, since that time, the collateral was increased to cover the balance and procedures are now in place to ensure that there will always be enough collateral to cover the balance.

Total cash and investments	\$ 12,505,388
FDIC insurance	(537,010)
Collateral held by pledging bank	<u>(10,832,734)</u>
Under collateralized	<u>\$ 1,135,644</u>

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021**

3. FUND BALANCE

Fund balance is restricted due to specific program restrictions. Fund balance is restricted as follows:

	State	Federal	Fees	Totals
500 – Food Service	\$ -	\$ -	\$ 77,932	\$ 77,932
520 – Public Service	-	-	67,735	67,735
560 – Onsite Sewage	-	-	5,952	5,952
590 – Food License	-	-	30,554	30,554
712 – Dental Services	622	-	26,796	27,418
725 – KWSCP Pink County Outreach	-	3,554	-	3,554
726 – ZIKA Preparedness	-	957	-	957
731 – Opioid Crisis Response	-	564	-	564
738 – KCCSP Outreach/Education	6	-	-	6
747 – KHREF	-	-	15,964	15,964
758 – Humana Vitality	-	-	629,372	629,372
760 – Hands Federal Home Visiting	-	23,708	-	23,708
762 – Smiling Schools Preventive	72,394	-	-	72,394
764 – HEP A Outbreak Activities	15,160	-	-	15,160
767 – Competitive Home Visiting	-	6,692	-	6,692
770 – KCCSP-HB 265	1,315	-	-	1,315
809 – Diabetes	61,373	-	-	61,373
827 – U of L Social Media TMOMS	-	68,706	18	68,724
828 – Diabetes Outreach and Ed.	-	20,729	-	20,729
830 – Sexual Risk Avoidance	-	48,534	-	48,534
831 – Worksite Wellness Project	-	-	2,827	2,827
838 – Foundation for Healthy KY	-	-	5,000	5,000
839 – Marshall Grant Diabetes	-	-	29,822	29,822
842 – HIV Counseling & Testing	8,071	-	-	8,071
846 – Rural Health Opioid Grant	-	52,886	-	52,886
849 – USDA Rural Bus. Dev. Grant	-	10,905	-	10,905
850 – KIPRC Harm Reduction Summit	-	2,605	-	2,605
853 – HANDS	688,391	-	257,857	946,248
858 – Supplemental School Health	-	-	835,981	835,981
892 – Minor Restricted	-	-	13	13
Total	<u>\$ 847,332</u>	<u>\$ 239,840</u>	<u>\$ 1,985,823</u>	<u>\$ 3,072,995</u>

4. LEASES

The District Health Department leases its district administrative office spaces in Somerset, Kentucky from the Pulaski County Fiscal Court. The lease is for 20 years from July 1, 2001 to June 30, 2021 and is rent free in consideration of approximately \$400,000 in renovations made to the building by the District Health Department. The District Health Department and the Fiscal Court are currently working on a new lease agreement. Additional spaces are leased from time to time as needed on a month by month basis.

5. ACCRUED TIME-OFF

The District Health Department's accrued vacation and other potential compensated absences are not accrued as earned because the District Health Department uses the regulatory basis of accounting. The District Health Department's potential liability is \$739,614 at June 30, 2021.

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021

6. RISK MANAGEMENT

The District Health Department is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. In addition to its general liability insurance, the District Health Department also carries commercial insurance for all other risks of loss such as worker's compensation and employee health and accident insurance. Settled claims resulting from these risks have not exceeded commercial coverage in any of the past three fiscal years.

7. KENTUCKY EMPLOYEE'S RETIREMENT SYSTEM PLAN

The District Health Department is a participating employer of the Kentucky Employees' Retirement System (KERS). Under the provisions of Kentucky Revised Statute 61.645, the Board of Trustees of Kentucky Retirement Systems administers the KERS. The plan issues publicly available financial statements which may be downloaded from the Kentucky Retirement System's website.

Plan Description – KERS is a cost-sharing multiple-employer defined benefit pension plan that covers substantially all regular full-time members employed in positions of each participating county, city, and school board, and any additional eligible local agencies electing to participate in the System. The plan provides plan members with benefits through a pension trust and an insurance trust. The pension trust provides retirement, disability, and death benefits. The insurance trust provides health insurance or other postemployment benefits (OPEB). Benefits may be extended to beneficiaries of plan members under certain circumstances. Cost-of-living (COLA) adjustments are provided at the discretion of state legislature.

Contributions – For the year ended June 30, 2021, grandfathered plan members were required to contribute 5.00% of wages for non-hazardous job classifications. Employees hired after September 1, 2008 are required to contribute 6.00% of wages for non-hazardous job classifications. Participating employers are required to contribute at an actuarially determined rate. Per Kentucky Revised Statute Section 61.565(3), normal contribution and past service contribution rates shall be determined by the Board on the basis of an annual valuation last proceeding the July 1 of a new biennium. The Board may amend contribution rates as of the first day of July of the second year of a biennium, if it is determined on the basis of a subsequent actuarial valuation that amended contribution rates are necessary to satisfy requirements determined in accordance with actuarial basis adopted by the Board. Per House Bill 352, passed during the 2020 legislative session, certain agencies, including the District Health Department, were authorized to pay the reduced KERS non-hazardous employer contribution rate for the year ended June 30, 2021. The authorized participating employers contributed 49.47% (41.06% to the pension fund and 8.41% to the insurance fund) of each non-hazardous employee's wages as opposed to the contribution rate of 84.43% (73.28% to the pension fund and 11.15% to the insurance fund) other KERS non-hazardous employers paid. Administrative costs of Kentucky Retirement System are financed through employer contributions and investment earnings.

Plan members who began participating on, or after, January 1, 2014, are required to contribute to the Cash Balance Plan. The Cash Balance Plan is known as a hybrid plan because it has characteristics of both a defined benefit plan and a defined contribution plan. Members in the plan contribute a set percentage of their salary each month to their own account. Plan members contribute 5.00% of wages to their own account and 1.00% to the health insurance fund. The employer contribution rate is set annually by the Board based on an actuarial valuation. The employer contributes a set percentage of each member's salary. Each month, when employer contributions are received, an employer pay credit is deposited to the member's account. For non-hazardous members, their account is credited with a 4.00% employer pay credit. The employer pay credit represents a portion of the employer contribution.

The District Health Department contributed \$2,752,285 for the year ended June 30, 2021, or 100% of the required contribution. The contribution was allocated \$2,284,391 to the KERS pension fund and \$467,894 to the KERS insurance fund.

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021

7. KENTUCKY EMPLOYEE’S RETIREMENT SYSTEM PLAN (CONTINUED)

Pension Liabilities – At June 30, 2021, the District Health Department estimates that its total unfunded pension liability would be approximately \$53,833,189 based upon its proportionate share of the total net pension liability. The net pension liability was measured as of June 30, 2020, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of June 30, 2019, and rolled forward using generally accepted actuarial procedures. The District Health Department’s proportion of the net pension liability was based on a projection of the District Health Department’s long-term share of contributions to the pension plan relative to the projected contributions of all participating entities, actuarially determined. At June 30, 2020, the District Health Department’s proportion was .3801 percent, which was a decrease of .0153 percent from its proportion measured as of June 30, 2019.

OPEB Liabilities – At June 30, 2021, the District Health Department estimates that its total unfunded OPEB liability would be approximately \$9,649,196 based upon its proportionate share of the total OPEB liability. The net OPEB liability was measured as of June 30, 2020, and the total OPEB liability used to calculate the net OPEB liability was determined by an actuarial valuation as of June 30, 2019, and rolled forward using generally accepted actuarial procedures. The District Health Department’s proportion of the net OPEB liability was based on a projection of the District Health Department’s long-term share of contributions to the OPEB plan relative to the projected contributions of all projected contributions of all participating entities, actuarially determined. At June 30, 2020, the District Health Department’s proportion was .3801 percent, which was a decrease of .0153 percent from its proportion measured as of June 30, 2019.

House Bill 8, passed in the March 2021 legislative session, requires each participating KERS nonhazardous employer to pay off its own portion of the total KERS nonhazardous unfunded pension liability over a set period regardless of covered payroll. Each KERS nonhazardous employer will pay the normal cost contribution rate plus their actuarially calculated portion of the unfunded liability beginning July 1, 2021.

8. COMPLIANCE

The Lake Cumberland District Health Department is not in compliance per 902 KAR 8:170 Section 3, Subsection 3(c). The District Health Department has excess unrestricted fund balance in the amount of \$2,390,901. The District Health Department is required to submit a plan to spend this excess amount to the State Department of Public Health.

9. RELATED PARTIES

The District Health Department is related by common Board members to ten county public health taxing districts. The ten county Boards of Health set their county’s public health tax rate annually. A total of \$3,280,907 in public health taxes were transferred from the taxing districts to the District Health Department for the year ended June 30, 2021. An additional \$625,430 was transferred from the taxing districts for reimbursements for various expenditures and mini grants. The county public health tax transfers were as follows:

Adair County Public Health Taxing District	\$ 230,903
Casey County Public Health Taxing District	633,075
Clinton County Public Health Taxing District	154,215
Cumberland County Public Health Taxing District	126,308
Green County Public Health Taxing District	152,834
McCreary County Public Health Taxing District	211,981
Pulaski County Public Health Taxing District	1,311,442
Russell County Public Health Taxing District	356,796
Taylor County Public Health Taxing District	448,007
Wayne County Public Health Taxing District	<u>280,776</u>
Total local contributions	<u>\$ 3,906,337</u>

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
NOTES TO FINANCIAL STATEMENTS
June 30, 2021

10. COVID-19 PANDEMIC

In early 2020, the COVID-19 pandemic reached the United States and the State of Kentucky. The direct impacts thus far to the District Health Department have resulted in modifications to the manner in which services are provided to reduce in person contact, and additional funding from State and Federal governments. The duration and pervasiveness of the pandemic are uncertain as of the date of these financial statements. The District Health Department is continuously evaluating the impact of COVID-19 on its operations and finances.

SUPPLEMENTARY INFORMATION

LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SUPPLEMENTARY SCHEDULE OF REVENUES BY REPORTING AREA
for the year ended June 30, 2021

	REVENUES						Total Costs	Department Carryover	Program Excess (Deficit)	
	State	Federal	Local	Service Fees	Interest	Total Revenues				
Food	500	\$ -	\$ -	\$ 180,947	\$ -	\$ 180,947	\$ 103,015	\$ -	\$ 77,932	
Public Facilities	520	-	-	103,177	-	103,177	35,442	-	67,735	
General Sanitation	540	-	110,034	-	-	110,034	110,034	-	-	
Onsite Sewage	560	-	-	585,242	-	585,242	579,290	-	5,952	
Food License Project	590	-	-	227,976	-	227,976	209,657	-	18,319	
Radon	591	-	2,331	2,321	-	4,652	4,652	-	-	
Total Environmental		-	2,331	112,355	1,097,342	-	1,042,090	-	169,938	
Preventative Problems	700	-	-	-	-	-	-	-	-	
Dental Services	712	142	-	19	-	161	147	-	14	
Laboratory/Testing/Radiology	718	-	-	-	-	-	-	-	-	
ELC COVID Minigrant	723	-	74,249	301	-	74,550	74,550	-	-	
Needle Exchange Program	727	13,510	10,000	102,065	-	125,575	125,575	-	-	
Diabetes Disease Management	728	-	-	97	-	97	97	-	-	
Diabetes Prevention Program	732	-	-	439	-	439	439	-	-	
CHAT	736	-	35,878	48,542	-	84,420	84,420	-	-	
COVID-19 Immunization Supp.	738	-	97,092	16,997	-	114,089	114,089	-	-	
Envirohealth Link	742	-	8,670	10,913	-	19,583	19,583	-	-	
Environmental Strike Team	746	-	-	19	-	19	19	-	-	
Accreditation	750	-	-	6,351	-	6,351	6,351	-	-	
Hands GF Services	752	-	-	7,205	-	7,205	39,187	31,982	-	
PHEP	753	-	26,302	10,365	-	36,667	36,667	-	-	
Personal Responsibility Education	756	-	31,359	4,696	-	36,055	36,055	-	-	
Go365 - Humana Vitality	758	-	-	-	62,772	62,772	108,940	46,168	-	
HANDS Federal Home Visiting	760	-	80,090	-	-	80,090	142,476	62,386	-	
Diabetes Telehealth	761	-	18,585	4,003	-	22,588	22,588	-	-	
HEP A Outbreak Activities	764	-	-	-	-	-	334	334	-	
Tobacco Program Federal Funds	765	-	7,015	18,600	-	25,615	25,615	-	-	
MCH Coordinator	766	-	194,478	14,778	-	209,256	209,256	-	-	
Competitive Home Visiting	767	-	-	-	-	-	137	137	-	
Cares Act	771	-	1,212,564	87,811	-	1,300,375	1,300,375	-	-	
COVID-19 Federal	772	-	-	-	-	-	-	-	-	
Contact Tracing	773	-	2,460,108	72,579	-	2,532,687	2,532,687	-	-	
Child Fatality Prevention	774	-	-	124	-	124	124	-	-	
Pediatric/Adolescent	800	-	5,000	63,249	43,390	111,673	111,673	-	-	
Immunization	801	-	25,817	167,425	73,746	266,988	266,988	-	-	
Family Planning	802	112,434	109,884	199,606	128,550	550,474	550,474	-	-	
Maternity Services & Activity	803	-	-	225	-	225	225	-	-	
WIC	804	-	948,417	111,196	7	1,059,620	1,059,620	-	-	
MCH Nutrition & Group Activity	805	-	42,668	198	1,665	44,531	44,531	-	-	
Tuberculosis	806	-	3,293	166,866	37,446	207,605	207,605	-	-	
Sexually Transmitted Disease	807	-	-	14,033	2,867	16,900	16,900	-	-	
Diabetes	809	197,106	-	-	-	197,106	135,733	-	61,373	
Adult Visits & Follow-up	810	-	-	160,662	24,507	185,169	185,169	-	-	
Breast & Cervical Cancer	813	-	19,082	31,918	6,395	57,395	57,395	-	-	
COVID-19 Vaccine	816	-	-	345,897	5,459	398,438	398,438	-	-	
Prep. Coordination & Training	821	-	87,213	8,042	-	95,255	95,255	-	-	
Prep. Epidemic & Surveillance	822	4,444	84,453	7,722	-	96,619	96,619	-	-	
Prep. Medical Rsr. Corp.	823	-	-	1	-	1	1	-	-	
Teen Pregnancy Prevention	827	-	240,086	-	-	240,086	171,380	-	68,706	
Heart4Change	829	-	67,636	1,861	-	69,497	90,404	20,907	-	
Worksite Wellness Project	831	-	-	-	-	-	83	83	-	
KIPRC ROPA	832	-	62,247	31,018	-	93,265	93,265	-	-	
Breastfeeding Promotion	833	-	31,910	2,601	-	34,511	34,511	-	-	
HPP Activity Support	835	-	5,301	-	-	5,301	5,301	-	-	
Tobacco	836	65,783	-	2,614	10,000	78,397	78,397	-	-	
Marshall Univ Grant Diabetes	839	-	-	-	-	-	3,223	3,223	-	
Breastfeeding Peer Counselor	840	-	38,629	3,757	-	42,386	42,386	-	-	
Diabetes Today Program	841	-	7,076	16,231	-	23,307	23,307	-	-	
Ryan White Pharmacy Rebate Funds	844	119,297	-	9,984	-	129,281	129,281	-	-	
Ryan White Program	845	-	170,059	18,856	-	188,915	188,915	-	-	
Rural Health Opioid Grant	846	-	136,177	-	-	136,177	83,291	-	52,886	
KIPRC Jail Education Grant	847	-	39,787	9,154	-	48,941	48,941	-	-	
Healthy Start Day Care	848	13,680	-	2,984	-	16,664	16,664	-	-	
USDA Rural Bus. Dev. Grant	849	-	18,403	-	-	18,403	7,498	-	10,905	
KIPRC HARM Reduction Summit	850	-	23,709	-	-	23,709	21,104	-	2,605	
HANDS Prima Gravida Program	853	567,771	-	1,834,920	-	2,402,691	1,800,225	-	602,466	
Supplemental School Health	858	-	-	51,556	-	51,556	98,251	46,695	-	
HPP Coordinator	875	-	-	1	-	1	1	-	-	
Ryan White COVID-19 CARES	882	-	2,025	-	-	2,025	2,025	-	-	
Core Public Health	890	-	-	4,718	2,192	6,910	6,910	-	-	
Medicaid Match	891	-	-	156,313	-	156,313	156,313	-	-	
Minor Restricted	892	-	-	1	12	13	-	-	13	
Total Medical		1,094,167	6,425,262	1,943,018	2,285,503	47,116	11,795,066	11,208,013	211,915	798,968
Capital	894	-	-	120,152	-	120,152	120,152	-	-	
Allocable Direct	895	1,790,316	666,166	1,105,382	-	3,561,864	1,603,617	-	1,958,247	
Total Administrative		1,790,316	666,166	1,225,534	-	3,682,016	1,723,769	-	1,958,247	
Total Revenues		\$ 2,884,483	\$ 7,093,759	\$ 3,280,907	\$ 3,382,845	\$ 47,116	\$ 16,689,110	\$ 13,973,872	\$ 211,915	\$ 2,927,153

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SUPPLEMENTARY SCHEDULE OF DIRECT COSTS BY REPORTING AREA
for the year ended June 30, 2021**

	DIRECT COSTS										Total Direct Costs
	Salaries	Part-Time	Fringes	Contracts	Travel	Occupancy	Administration	Supplies	Other		
Food	500	\$ 33,732	\$ -	\$ 12,374	\$ -	\$ 1,813	\$ -	\$ 1,389	\$ -	\$ -	\$ 49,308
Public Facilities	520	12,172	-	4,464	-	758	-	394	-	214	18,002
General Sanitation	540	39,525	-	14,509	-	3,109	-	1	-	-	57,144
Onsite Sewage	560	208,747	-	76,598	-	27,495	-	1,472	-	-	314,312
Food License Project	590	80	-	27	-	-	-	40,794	-	167,029	207,930
Radon	591	1,098	-	400	-	-	-	-	-	1,886	3,384
Total Environmental		295,354	-	108,372	-	33,175	-	44,050	-	169,129	650,080
Preventative Problems	700	451,314	20,364	184,575	760	6,101	-	2,550	43,648	67,497	776,809
Dental Services	712	37	-	27	-	-	-	25	-	-	89
Laboratory/Testing/Radiology	718	20,320	63	8,237	5,668	-	-	-	6,831	604	41,723
ELC COVID Minigrant	723	3,269	1,310	1,717	-	-	-	248	8,307	58,036	72,887
Needle Exchange Program	727	8,964	26	4,360	-	-	-	712	106,085	353	120,500
Diabetes Disease Management	728	-	-	-	-	-	-	97	-	-	97
Diabetes Prevention Program	732	246	-	108	-	-	-	-	-	-	354
CHAT	736	26,105	-	12,697	-	3,497	-	19	-	30,742	73,060
COVID-19 Immunization Supp.	738	54,557	16	26,538	-	1,458	-	-	128	12,544	95,241
Envirohealth Link	742	57	-	27	-	-	-	-	-	19,485	19,569
Environmental Strike Team	746	-	-	-	-	-	-	-	-	-	-
Accreditation	750	2,913	-	1,418	-	14	-	-	-	-	4,345
Hands GF Services	752	20,114	85	9,789	-	797	-	93	-	1,323	32,201
PHEP	753	7,723	-	3,764	-	169	-	624	-	21,719	33,999
Personal Responsibility Education	756	8,994	-	4,383	-	67	-	-	-	17,755	31,199
Go365 - Humana Vitality	758	21,325	2,152	10,556	-	2,334	-	458	37,929	21,897	96,651
HANDS Federal Home Visiting	760	66,159	925	32,257	-	243	-	13	-	-	99,597
Diabetes Telehealth	761	11,373	-	5,532	-	225	-	1,109	-	-	18,239
HEP A Outbreak Activities	764	168	-	81	-	-	-	-	-	28	277
Tobacco Program Federal Funds	765	-	-	-	-	13	-	1,080	-	24,522	25,615
MCH Coordinator	766	89,022	2,450	43,509	-	170	-	383	10,798	26,648	172,980
Competitive Home Visiting	767	-	-	-	-	-	-	-	-	137	137
Cares Act	771	565,064	73,598	281,183	-	11,798	13,817	43,069	18,169	68,867	1,075,565
COVID-19 Federal	772	(1)	-	-	-	-	-	1	-	-	-
Contact Tracing	773	1,087,567	7,461	529,528	-	11,333	-	22,742	-	495,458	2,154,089
Child Fatality Prevention	774	68	-	27	-	-	-	-	-	-	95
Pediatric/Adolescent	800	737	14	350	-	-	-	-	-	-	1,101
Immunization	801	-	-	-	-	-	-	-	402	-	402
Family Planning	802	77	2,081	211	-	194	-	-	26,667	215	29,445
Maternity Services & Activity	803	-	-	-	-	-	-	-	-	-	-
WIC	804	8,472	19	4,118	-	1,157	-	7,675	-	24	21,465
MCH Nutrition & Group Activity	805	12,070	-	5,878	794	184	-	191	-	17,383	36,500
Tuberculosis	806	2,536	1,840	1,391	-	41	-	21	7,721	101	13,651
Sexually Transmitted Disease	807	92	-	54	-	-	-	-	-	-	146
Diabetes	809	41,707	-	20,283	-	719	-	8,615	-	39,763	111,087
Adult Visits & Follow-up	810	9,193	120	4,477	-	-	-	-	-	141	13,931
Breast & Cervical Cancer	813	57	-	27	18,835	-	-	-	-	-	18,919
COVID-19 Vaccine	816	201,521	8,701	98,760	-	2,456	-	102	2,240	11,557	325,337
Prep. Coordination & Training	821	45,054	-	21,916	-	105	870	2,823	-	405	71,173
Prep. Epidemic & Surveillance	822	48,517	44	23,604	-	-	-	3,625	-	29	75,819
Prep. Medical Rsrv. Corp.	823	-	-	-	-	-	-	1	-	-	1
Teen Pregnancy Prevention	827	29,380	-	14,298	-	354	-	2,558	-	108,544	155,134
Heart4Change	829	24,987	-	12,159	-	1,412	-	2,135	3,904	30,920	75,517
Worksite Wellness Project	831	-	-	-	-	-	-	-	-	-	-
KIPRC ROPA	832	31,527	-	15,339	77	3,573	1,742	1,228	-	22,594	76,080
Breastfeeding Promotion	833	10,357	10	5,029	-	805	-	740	-	12,641	29,582
HPP Activity Support	835	-	-	-	-	-	2,400	2,901	-	-	5,301
Tobacco	836	24,382	-	11,867	-	297	-	1,111	217	29,501	67,375
Marshall Univ Grant Diabetes	839	-	-	-	-	-	-	-	-	3,223	3,223
Breastfeeding Peer Counselor	840	4,373	17,688	3,673	-	407	-	2,047	-	-	28,188
Diabetes Today Program	841	-	-	-	-	-	-	202	-	23,105	23,307
Ryan White Pharmacy Rebate Funds	844	51,050	-	24,828	2,755	6,520	9,703	5,015	2,802	-	102,673
Ryan White Program	845	51,601	-	25,093	12,154	6,344	47,222	3,498	15,207	-	161,119
Rural Health Opioid Grant	846	14,630	-	7,111	-	657	-	2,536	-	51,170	76,104
KIPRC Jail Education Grant	847	8,741	-	4,249	-	990	-	726	-	31,222	45,928
Healthy Start Day Care	848	5,589	-	2,723	-	46	-	-	-	4,537	12,895
USDA Rural Bus. Dev. Grant	849	-	-	-	-	-	-	-	-	7,498	7,498
KIPRC HARM Reduction Summit	850	-	-	-	-	-	-	207	-	20,897	21,104
HANDS Prima Gravida Program	853	760,024	10,135	370,475	-	20,551	-	96,612	-	101,044	1,358,841
Supplemental School Health	858	483	-	238	97,266	-	-	93	-	-	98,080
HPP Coordinator	875	-	-	-	-	-	-	1	-	-	1
Ryan White COVID-19 CARES	882	-	-	-	-	-	1,775	-	-	250	2,025
Core Public Health	890	3,037	-	1,471	-	267	-	-	-	16	4,791
Medicaid Match	891	-	-	-	-	-	-	-	-	156,313	156,313
Minor Restricted	892	-	-	-	-	-	-	-	-	-	-
Total Medical		3,835,552	149,102	1,839,935	138,309	85,298	77,529	217,886	291,055	1,540,708	8,175,374
Capital	894	-	-	-	-	-	-	-	-	120,152	120,152
Allocable Direct	895	-	-	1,603,580	-	37	-	-	-	-	1,603,617
Total Administrative		-	-	1,603,580	-	37	-	-	-	120,152	1,723,769
Indirect Cost Allocation - Dept.		435,892	11,288	248,439	-	8,492	404	288,858	-	240,237	1,233,610
Indirect Cost Allocation - Envir.		158,990	5,057	90,588	-	9,203	-	5,835	-	5,540	275,213
Indirect Cost Allocation - Clinic		672,363	8,679	285,542	-	14,199	16,869	20,765	3,547	57,887	1,079,851
Indirect Cost Allocation - Medical		103,274	6,086	59,164	-	1,552	-	15,871	-	4,133	190,080
Indirect Cost Allocation - Space		98,985	31,514	58,940	-	22,701	425,814	1,070	-	6,871	645,895
Indirect Cost Allocation		1,469,504	62,624	742,673	-	56,147	443,087	332,399	3,547	314,668	3,424,649
Total Expenditures		\$ 5,600,410	\$ 211,726	\$ 4,294,560	\$ 138,309	\$ 174,657	\$ 520,616	\$ 594,335	\$ 294,602	\$ 2,144,657	\$ 13,973,872

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SUPPLEMENTARY SCHEDULE OF INDIRECT COSTS BY REPORTING AREA
for the year ended June 30, 2021**

	INDIRECT COSTS						Total Indirect Costs	
	Departmental	Environmental	Clinic	Medical	Space	Allocation		
Food	500	\$ 7,562	\$ 31,432	\$ -	\$ -	\$ 14,713	\$ -	\$ 53,707
Public Facilities	520	2,726	11,342	-	-	3,372	-	17,440
General Sanitation	540	8,859	36,829	-	-	7,202	-	52,890
Onsite Sewage	560	46,778	194,515	-	-	23,685	-	264,978
Food License Project	590	12	74	-	-	1,641	-	1,727
Radon	591	247	1,021	-	-	-	-	1,268
Total Environmental		66,184	275,213	-	-	50,613	-	392,010
Preventative Problems	700	118,710	-	1,035,804	19,327	275,875	(2,226,525)	(776,809)
Dental Services	712	12	-	-	2	39	5	58
Laboratory/Testing/Radiology	718	5,045	-	44,047	821	18,867	(110,503)	(41,723)
ELC COVID Minigrant	723	1,431	-	-	232	-	-	1,663
Needle Exchange Program	727	2,677	-	-	435	1,963	-	5,075
Diabetes Disease Management	728	-	-	-	-	-	-	-
Diabetes Prevention Program	732	74	-	-	11	-	-	85
CHAT	736	7,747	-	-	1,262	2,351	-	11,360
COVID-19 Immunization Supp.	738	16,210	-	-	2,638	-	-	18,848
Envirohealth Link	742	12	-	-	2	-	-	14
Environmental Strike Team	746	-	-	-	-	19	-	19
Accreditation	750	864	-	-	141	1,001	-	2,006
Hands GF Services	752	6,008	-	-	978	-	-	6,986
PHEP	753	2,295	-	-	373	-	-	2,668
Personal Responsibility Education	756	2,677	-	-	435	1,744	-	4,856
Go365 - Humana Vitality	758	7,081	-	-	1,152	4,056	-	12,289
HANDS Federal Home Visiting	760	19,972	-	-	3,252	19,655	-	42,879
Diabetes Telehealth	761	3,380	-	-	549	420	-	4,349
HEP A Outbreak Activities	764	49	-	-	8	-	-	57
Tobacco Program Federal Funds	765	-	-	-	-	-	-	-
MCH Coordinator	766	27,287	-	-	4,442	4,547	-	36,276
Competitive Home Visiting	767	-	-	-	-	-	-	-
Cares Act	771	193,331	-	-	31,479	-	-	224,810
COVID-19 Federal	772	-	-	-	-	-	-	-
Contact Tracing	773	325,587	-	-	53,011	-	-	378,598
Child Fatality Prevention	774	25	-	-	4	-	-	29
Pediatric/Adolescent	800	222	-	-	36	207	110,107	110,572
Immunization	801	-	-	-	-	-	266,586	266,586
Family Planning	802	740	-	-	122	-	520,167	521,029
Maternity Services & Activity	803	-	-	-	-	-	225	225
WIC	804	2,517	-	-	411	2,060	1,033,167	1,038,155
MCH Nutrition & Group Activity	805	3,590	-	-	584	2,047	1,810	8,031
Tuberculosis	806	1,394	-	-	226	8,810	183,524	193,954
Sexually Transmitted Disease	807	25	-	-	4	19	16,706	16,754
Diabetes	809	12,385	-	-	2,017	10,244	-	24,646
Adult Visits & Follow-up	810	2,776	-	-	450	1,724	166,288	171,238
Breast & Cervical Cancer	813	12	-	-	2	19	38,443	38,476
COVID-19 Vaccine	816	62,865	-	-	10,236	-	-	73,101
Prep. Coordination & Training	821	13,385	-	-	2,178	8,519	-	24,082
Prep. Epidemic & Surveillance	822	14,421	-	-	2,349	4,030	-	20,800
Prep. Medical Rsr. Corp.	823	-	-	-	-	-	-	-
Teen Pregnancy Prevention	827	8,722	-	-	1,420	6,104	-	16,246
Heart4Change	829	7,426	-	-	1,209	6,252	-	14,887
Worksite Wellness Project	831	-	-	-	-	83	-	83
KIPRC ROPA	832	9,363	-	-	1,524	6,298	-	17,185
Breastfeeding Promotion	833	3,084	-	-	502	1,343	-	4,929
HPP Activity Support	835	-	-	-	-	-	-	-
Tobacco	836	7,241	-	-	1,178	2,603	-	11,022
Marshall Univ Grant Diabetes	839	-	-	-	-	-	-	-
Breastfeeding Peer Counselor	840	7,426	-	-	1,211	5,561	-	14,198
Diabetes Today Program	841	-	-	-	-	-	-	-
Ryan White Pharmacy Rebate Funds	844	15,161	-	-	2,469	8,978	-	26,608
Ryan White Program	845	15,321	-	-	2,496	9,979	-	27,796
Rural Health Opioid Grant	846	4,342	-	-	707	2,138	-	7,187
KIPRC Jail Education Grant	847	2,591	-	-	422	-	-	3,013
Healthy Start Day Care	848	1,665	-	-	270	1,834	-	3,769
USDA Rural Bus. Dev. Grant	849	-	-	-	-	-	-	-
KIPRC HARM Reduction Summit	850	-	-	-	-	-	-	-
HANDS Prima Gravida Program	853	229,229	-	-	37,324	174,831	-	441,384
Supplemental School Health	858	148	-	-	23	-	-	171
HPP Coordinator	875	-	-	-	-	-	-	-
Ryan White COVID-19 CARES	882	-	-	-	-	-	-	-
Core Public Health	890	901	-	-	156	1,062	-	2,119
Medicaid Match	891	-	-	-	-	-	-	-
Minor Restricted	892	-	-	-	-	-	-	-
Total Medical		1,167,426	-	1,079,851	190,080	595,282	-	3,032,639
Capital	894	-	-	-	-	-	-	-
Allocable Direct	895	-	-	-	-	-	-	-
Total Administrative		-	-	-	-	-	-	-
Indirect Allocation		(1,233,610)	(275,213)	(1,079,851)	(190,080)	(645,895)	-	(3,424,649)
Totals		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -



**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 Health
Lake Cumberland District Health Department
Somerset, Kentucky

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 the Lake Cumberland District Health Department (the District Health Department) as of and for the year ended June 30, 2021, and the related notes to the financial statements, which collectively comprise the District Health Department's basic financial statements, and have issued our report thereon dated October 14, 2021. Our report contains an unmodified opinion on the regulatory basis of accounting in accordance with the *Administrative Reference*.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the District Health Department'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 the District Health Department's internal control. Accordingly, we do not express an opinion on the effectiveness of the District Health Department'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.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the District Health Department'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 entity'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 entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

RFH

RFH, PLLC
Lexington, Kentucky
October 14, 2021



**INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR
EACH MAJOR PROGRAM AND ON INTERNAL CONTROL
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

The Board of Health
Lake Cumberland District Health Department
Somerset, Kentucky

Report on Compliance for Each Major Federal Program

We have audited the Lake Cumberland District Health Department's (the District Health Department) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the District Health Department's major federal programs for the year ended June 30, 2021. The District Health Department's major federal programs are identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditors' Responsibility

Our responsibility is to express an opinion on compliance for each of the District Health Department's major federal programs based on our audit of the types of compliance requirements referred to above. 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). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the District Health Department's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the District Health Department's compliance.

Opinion on Each Major Federal Program

In our opinion, the Lake Cumberland District Health Department, 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, 2021.

Report on Internal Control over Compliance

Management of the District Health Department is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the District Health Department's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program 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 internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the District Health Department's 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 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 first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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.

RFH

RFH, PLLC
Lexington, Kentucky
October 14, 2021

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
for the year ended June 30, 2021**

GRANTOR/PROGRAM TITLE	Federal AL Number	Pass/Through Contract Number	Grant Contract Period	Passed Through to Subrecipients	Expenditures
U.S. Department of Agriculture (USDA)					
Direct Grants					
Rural Business-Cooperative Program	10.351	21-000-704697945	8/1/2019-9/30/2020	\$ -	\$ 18,403
Passed through Kentucky Cabinet for Health and Family Services (CHFS)					
WIC Special Supplemental Nutrition Program for Women, Infants, and Children					
WIC Program - Administrative Services	10.557	01160020	7/1/2020-6/30/2021	-	388,777
WIC Program - Administrative Services	10.557	01160021	7/1/2020-6/30/2021	-	707,839
WIC Program - Administrative Services	10.557	02540019	7/1/2020-6/30/2021	-	23,231
WIC Program - Administrative Services	10.557	02540020	7/1/2020-6/30/2021	-	25,305
				-	1,145,152
Total U.S. Department of Agriculture				\$ -	\$ 1,163,555
U.S. Department of Treasury					
Passed through State (CHFS)					
COVID-19, CARES Act	21.019	CARES20	4/1/2020-6/30/2021	\$ -	\$ 946,561
COVID-19, CARES Act	21.019	CARES-B20	4/1/2020-6/30/2021	-	935,102
COVID-19, CARES Act	21.019	CARES-C20	4/1/2020-6/30/2021	-	2,041,526
Total U.S. Department of Treasury				\$ -	\$ 3,923,189
U.S. Environmental Protection Agency (EPA)					
Passed through State (CHFS)					
State Indoor Radon Grants					
State Indoor Radon Grants	66.032	02610018	7/1/2020-6/30/2021	\$ -	\$ 2,331
Total U.S. Environmental Protection Agency				\$ -	\$ 2,331
U.S. Department of Health and Human Services (HHS)					
Direct Grants					
Kentucky Overdose Date to Action	93.136	1NU17CE924971	9/1/2019-8/31/2022	\$ -	\$ 62,247
Kentucky Overdose Date to Action - Jail Education Program	93.136	1NU17CE924971	9/1/2019-8/31/2022	-	39,787
Kentucky Overdose Date to Action - Harm Reduction	93.136	1NU17CE924971	9/1/2019-8/31/2022	-	23,710
				-	125,744
Appropach to Reducing Appalchian Teen Pregnancy	93.297	TP1AH000185	7/15/2019-6/30/2021	-	240,086
Provider Relief Fund	93.498	N/A	7/1/2020-6/30/2021	-	25,817
Rural Health Care Services Outreach Grant Program	93.912	D04RH31636	5/01/2018-4/30/2021	-	67,636
Rural Health Opioid Program	93.912	H1URH31441	9/30/2017-9/29/2020	-	136,177
				-	203,813
Passed through State (CHFS)					
Public Health Emergency Preparedness					
HPP & PHEP	93.069	02140018	7/1/2020-6/30/2021	-	25,539
HPP & PHEP Combined Cooperative Agreement	93.069	02140019	7/1/2020-6/30/2021	-	128,684
				-	154,223
Environmental Public Health and Emergency Response	93.07	022500OL21	7/1/2020-6/30/2021	-	8,670
ACA Personal Responsibility Education Programs					
PREP	93.092	02980019	7/1/2020-6/30/2021	-	13,149
PREP	93.092	02980020	7/1/2020-6/30/2021	-	31,359
				-	44,508
Project Grants and Cooperative Agreements for Tuberculosis Control Programs					
Tuberculosis Control Programs	93.116	010600ON21	7/1/2020-6/30/2021	-	1,996
Tuberculosis Control Programs	93.116	010600ON22	7/1/2020-6/30/2021	-	1,297
				-	3,293
Subtotal HHS				\$ -	\$ 806,154

Basis of Presentation

The accompanying schedule of expenditures of federal awards includes the federal grant activity of the Lake Cumberland District Health Department and is presented on the regulatory basis of accounting. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance)*. Therefore, some amounts presented in, or used in the preparation of, the basic financial statements may differ from these numbers.

Indirect Cost Rates

The Lake Cumberland District Health Department did not elect to use the 10 percent *de minimis* cost rate as allowed under the Uniform Guidance.

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
for the year ended June 30, 2021**

GRANTOR/PROGRAM TITLE	Federal AL Number	Pass/Through Contract Number	Grant Contract Period	Passed Through to Subrecipients	Expenditures
U.S. Department of Health and Human Services (HHS) (previous page)				\$ -	\$ 806,154
Passed through State (CHFS)					
Title X Family Planning	93.217	011500OL21	7/1/2020-6/30/2021	-	114,722
Title V State Sexual Risk Avoidance Education Program					
Sexual Avoidance Education	93.235	01270021	7/1/2020-6/30/2021	-	26,302
Immunization Cooperative Agreements					
Immunization Grant	93.268	010500OL17	7/1/2020-6/30/2021	-	15,873
Immunization Grant	93.268	010500OL18	7/1/2020-6/30/2021	-	5,000
Immunization Grant	93.268	0105OLCRR1	7/1/2020-6/30/2021	-	97,091
				-	117,964
Disease Control and Prevention Investigations					
Disease Control and Prevention Investigations	93.283	011100OL19	7/1/2020-6/30/2021	-	3,400
Disease Control and Prevention Investigations	93.283	011100OL20	7/1/2020-6/30/2021	-	19,082
				-	22,482
Tobacco Control Programs					
KY Healthy Communities - Tobacco Control	93.305	0240OL19	7/1/2020-6/30/2021	-	2,276
Epidemiology & Laboratory Capacity for Infectious Disease (ELC)					
Vector Surveillance	93.323	013900PP20	7/1/2020-6/30/2021	-	117,231
National and State Tobacco Control Program					
Tobacco Control Program	93.387	01620121	7/1/2020-6/30/2021	-	2,848
Tobacco Control Program	93.387	01620122	7/1/2020-6/30/2021	-	4,167
				-	7,015
Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke					
Diabetes Today Program	93.426	02440120	7/1/2020-6/30/2021	-	1,112
Diabetes Today Program	93.426	02440121	7/1/2020-6/30/2021	-	7,076
				-	8,188
Innovative State and Local Public Health Strategies to prevent and Manage Diabetes and Heart Disease and Stroke					
Diabetes Telehealth	93.435	02450020	7/1/2020-6/30/2021	-	11,865
Diabetes Telehealth	93.435	02450021	7/1/2020-6/30/2021	-	8,076
				-	19,941
ACA — Maternal, Infant, and Early Childhood Home Visiting Program Formula, Expansion, and Development Grants to States-Cluster:					
Maternal, Infant and Early Childhood Home Visiting Grant Program					
Home Visiting Program	93.870	0130017	7/1/2020-6/30/2021	-	121,901
Home Visiting Program	93.870	0130018	7/1/2020-6/30/2021	-	59,120
				-	181,021
National Bioterrorism Hospital Preparedness Program					
HPP & PHEP	93.889	02150019	7/1/2020-6/30/2021	-	5,301
HIV Care Formula Grants					
Ryan White Care Act Title II	93.917	01650020	7/1/2020-6/30/2021	-	2,025
Ryan White Care Act Title II	93.917	01690020	7/1/2020-6/30/2021	-	158,388
Ryan White Care Act Title II	93.917	01690021	7/1/2020-6/30/2021	-	34,919
				-	195,332
HIV Prevention Activities Health Department Based					
KY Integrated HIV Surveillance & Prevention	93.940	015000OL20	7/1/2020-6/30/2021	-	5,018
KY Integrated HIV Surveillance & Prevention	93.940	015000OL21	7/1/2020-6/30/2021	-	5,000
				-	10,018
Preventive Health and Health Service Block Grant					
Preventive Health - CHAT	93.991	01040019	7/1/2020-6/30/2021	-	35,877
Preventive Health - CHAT	93.991	01040020	7/1/2020-6/30/2021	-	20,000
				-	55,877
Maternal and Child Health Services Block Grant to the States:					
MCH Services Block Grant	93.994	01120019	7/1/2020-6/30/2021	-	110,425
MCH Services Block Grant	93.994	01120020	7/1/2020-6/30/2021	-	204,435
				-	314,860
Total U.S. Department of Health and Human Services				-	2,004,684
Grand total federal awards expended				\$ -	\$ 7,093,759

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
for the year ended June 30, 2021**

I. SUMMARY OF AUDITORS' RESULTS

Financial Statements:

Type of auditors' report issued: Unmodified

Internal control over financial reporting:

Material weaknesses identified __Yes XNo

Significant deficiencies identified that are not considered to be material weaknesses __Yes XNone reported

Non-compliance material to financial statements noted __Yes XNo

Federal Awards:

Internal control over major programs:

Material weaknesses identified __Yes XNo

Significant deficiencies identified that are not considered to be material weaknesses __Yes XNone reported

Type of auditors' report issued on compliance for major programs:

Unmodified for all major programs.

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?

__Yes XNo

Major Programs:

AL Number	Name of Federal Program or Cluster
10.557	USDA - WIC Administration
21.019	Coronavirus Relief Fund

Dollar threshold used to distinguish between type A and type B programs: \$ 750,000

Auditee qualified as a low-risk auditee? XYes __No

II. FINDINGS RELATED TO FINANCIAL STATEMENTS

NONE

III. FINDINGS AND QUESTIONED COSTS FOR FEDERAL AWARDS

NONE

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SCHEDULE OF PRIOR AUDIT FINDINGS
June 30, 2021**

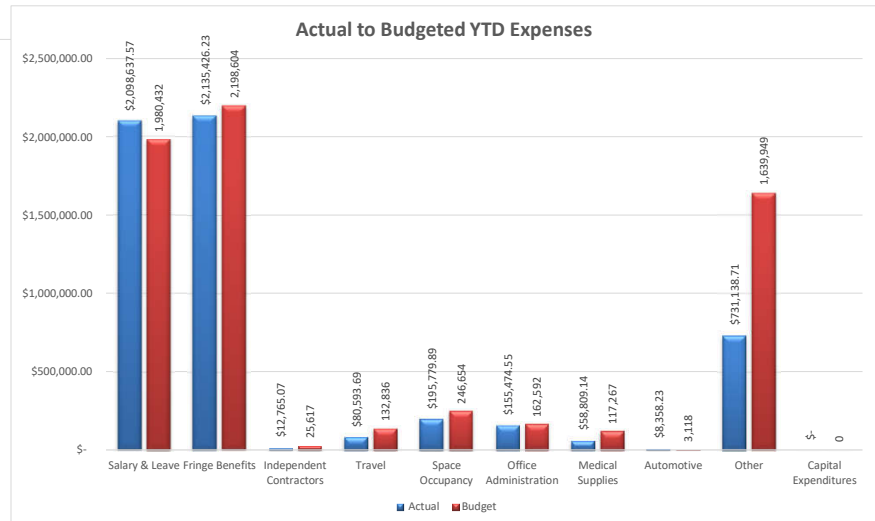
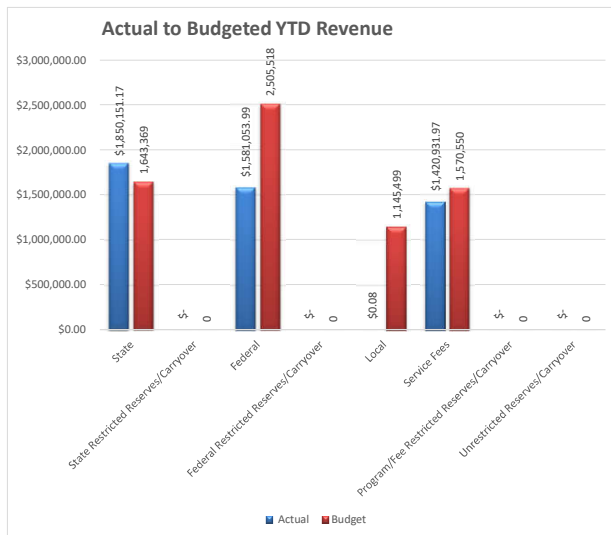
There are no prior audit findings to report.

**LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
SCHEDULE OF AUDIT ADJUSTMENTS
June 30, 2021**

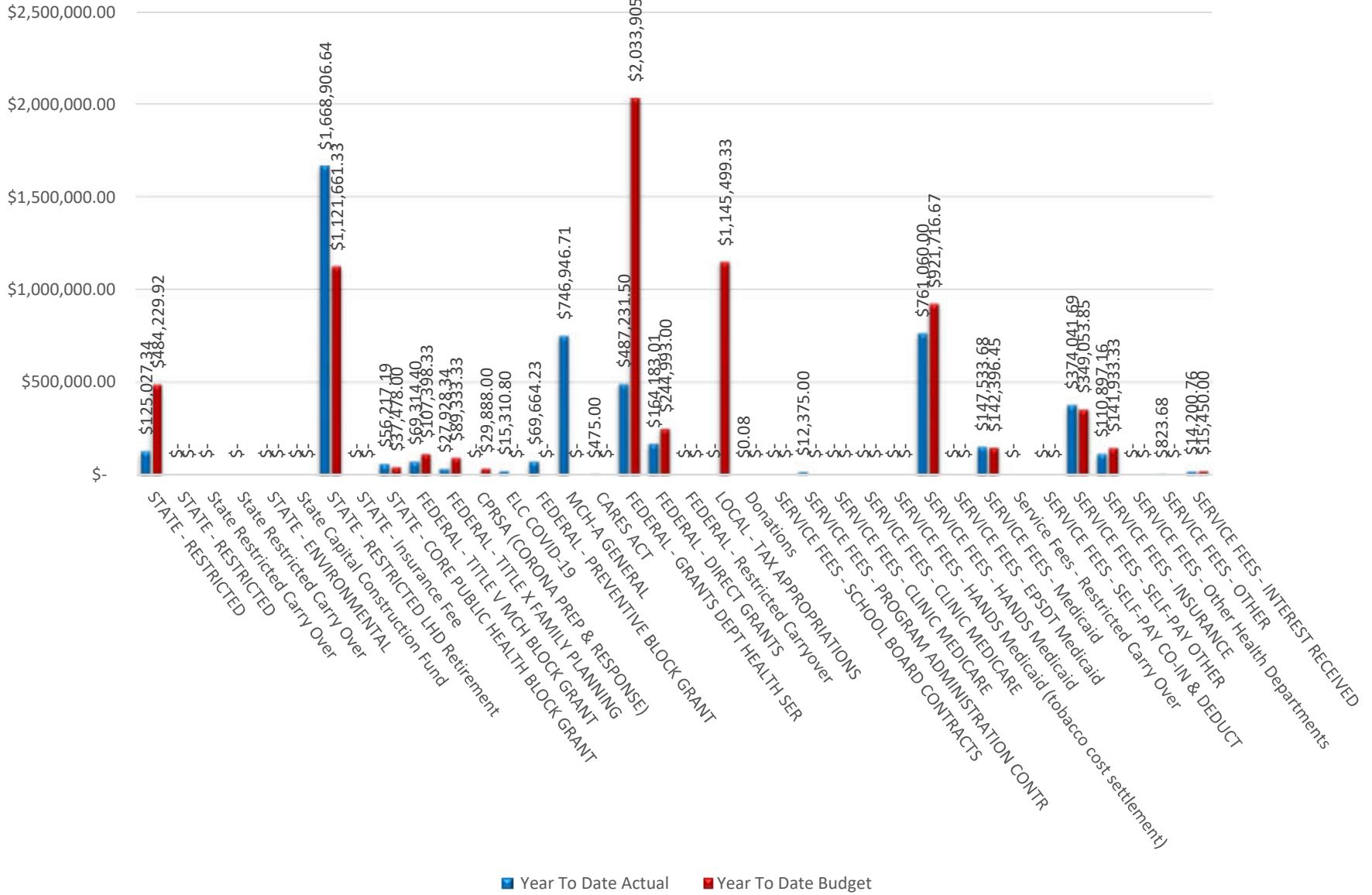
There are no proposed audit adjustments.

Lake Cumberland District Health Department
Summary Statement of Revenue and Expense
As of Period Ending October 31, 2021

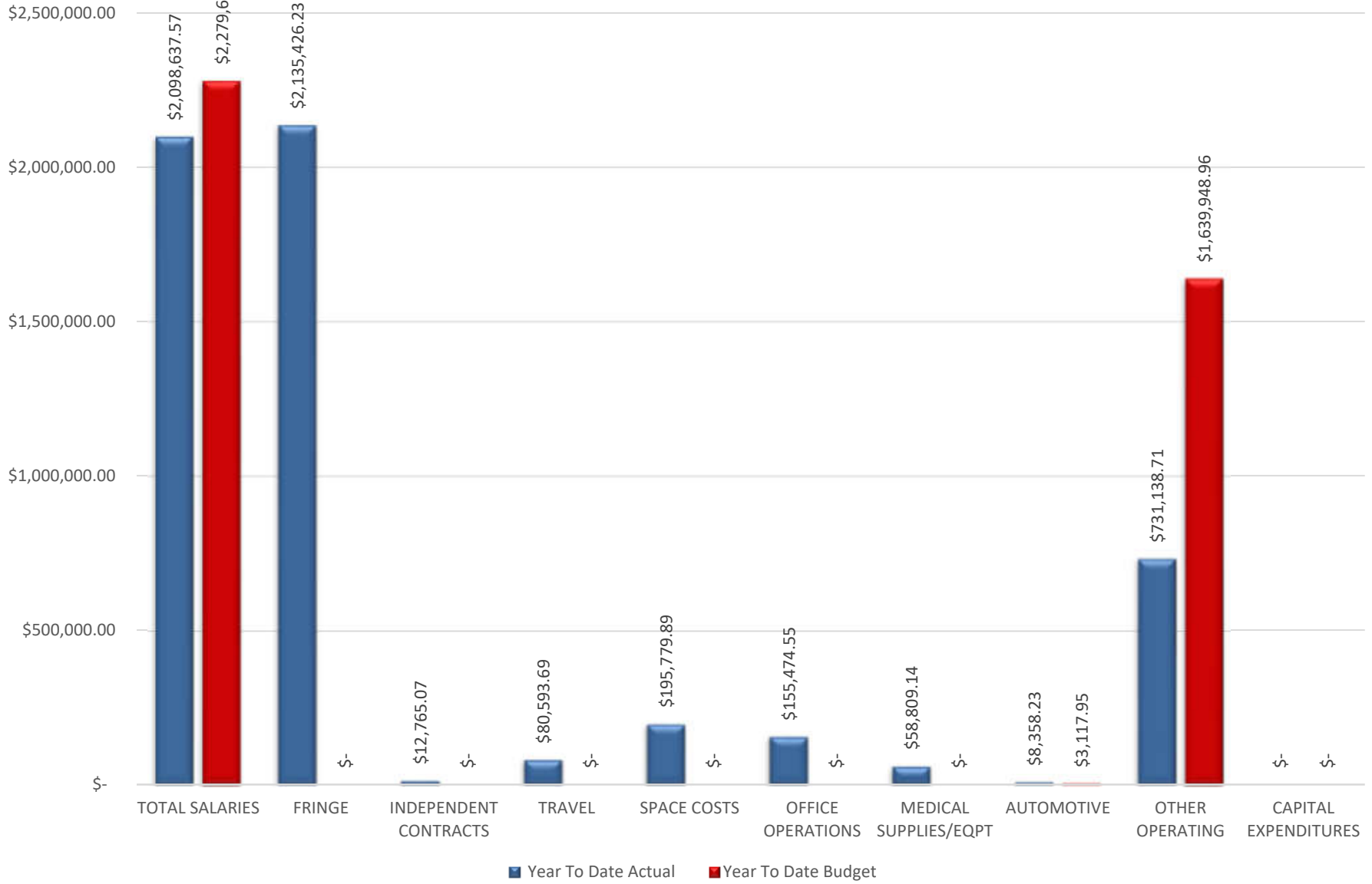
	Current Month					Year to Date				
	Actual	%	Budget	Variance	Variance %	Actual	%	Budget	Variance	Variance %
Revenue:										
State	\$ 1,680,322.07	68.78%	410,842	1,269,480	308.99%	\$ 1,850,151.17	38.13%	1,643,369	206,782	12.58%
State Restricted Reserves/Carryover	\$ -	0.00%	0	0	0.00%	\$ -	0.00%	0	0	0.00%
Federal	\$ 465,219.57	19.04%	626,379	(161,159)	-25.73%	\$ 1,581,053.99	32.58%	2,505,518	(924,464)	-36.90%
Federal Restricted Reserves/Carryover	\$ -	0.00%	0	0	0.00%	\$ -	0.00%	0	0	0.00%
Local	\$ -	0.00%	286,375	(286,375)	-100.00%	\$ 0.08	0.00%	1,145,499	(1,145,499)	-100.00%
Service Fees	\$ 297,540.76	12.18%	392,638	(95,097)	-24.22%	\$ 1,420,931.97	29.28%	1,570,550	(149,618)	-9.53%
Program/Fee Restricted Reserves/Carryover	\$ -	0.00%	0	0	0.00%	\$ -	0.00%	0	0	0.00%
Unrestricted Reserves/Carryover	\$ -	0.00%	0	0	0.00%	\$ -	0.00%	0	0	0.00%
Total Revenue	\$ 2,443,082.40	100.00%	1,716,234	726,848	42.35%	\$ 4,852,137.21	100.00%	6,864,937	(2,012,800)	-29.32%
Expense:										
Salary & Leave	\$ 446,040.78	18.26%	476,771	(30,730)	-6.45%	\$ 2,098,637.57	43.25%	1,980,432	118,205	5.97%
Fringe Benefits	\$ 511,876.21	20.95%	529,294	(17,418)	-3.29%	\$ 2,135,426.23	44.01%	2,198,604	(63,178)	-2.87%
Independent Contractors	\$ 1,916.99	0.08%	6,404	(4,487)	-70.07%	\$ 12,765.07	0.26%	25,617	(12,852)	-50.17%
Travel	\$ 15,823.37	0.65%	33,209	(17,386)	-52.35%	\$ 80,593.69	1.66%	132,836	(52,242)	-39.33%
Space Occupancy	\$ 37,835.51	1.55%	61,664	(23,828)	-38.64%	\$ 195,779.89	4.03%	246,654	(50,875)	-20.63%
Office Administration	\$ 45,944.93	1.88%	40,648	5,297	13.03%	\$ 155,474.55	3.20%	162,592	(7,117)	-4.38%
Medical Supplies	\$ 12,234.01	0.50%	29,317	(17,083)	-58.27%	\$ 58,809.14	1.21%	117,267	(58,458)	-49.85%
Automotive	\$ 550.00	0.02%	779	(229)	-29.40%	\$ 8,358.23	0.17%	3,118	5,240	168.07%
Other	\$ 165,629.76	6.78%	409,987	(244,357)	-59.60%	\$ 731,138.71	15.07%	1,639,949	(908,810)	-55.42%
Capital Expenditures	\$ -	0.00%	0	0	0.00%	\$ -	0.00%	0	0	0.00%
Total Expense	\$ 1,237,851.56	50.67%	1,588,073	(350,221)	-22.05%	\$ 5,476,983.08	112.88%	6,507,069	(1,030,086)	-15.83%
Excess/(Deficit) of Revenue over Expense:	\$ 1,205,230.84	49.33%	128,161	1,077,070	840.40%	\$ (624,845.87)	-12.88%	357,868	(982,714)	-274.60%
Less: Reserve used for Program Deficits						\$ -				
Actual Cash Surplus/(Deficit)						\$ (624,845.87)				



Revenue Period Ending 10/31/21



Expenditures Period Ending 10/31/21



Lake Cumberland District Health Department		
Balance Sheet		
October 31, 2021		
Account	Account Name	Amount
Assets		
104000	LOCAL BANK ACCOUNT	\$ 9,698,541.45
106000	PETTY CASH	\$ 2,100.00
111000	TIME/CERTIFICATE OF DEP	\$ 2,055,426.23
120001	ADAIR TAXING DISTRICT	\$ 407.67
120023	CASEY TAXING DISTRICT	\$ 295.89
120027	CLINTON TAXING DISTRICT	\$ 4,568.68
120029	CUMBERLAND TAXING DISTR	\$ 834.86
120044	GREEN TAXING DISTRICT	\$ 3,396.66
120074	MCCREARY TAXING DISTRIC	\$ 1,835.55
120100	PULASKI TAXING DISTRICT	\$ 6,617.49
120104	RUSSELL TAXING DISTRICT	\$ 931.49
120109	TAYLOR TAXING DISTRICT	\$ 3,773.96
120116	WAYNE TAXING DISTRICT	\$ 10,716.64
	Total Assets	\$ 11,789,446.57
Liabilities & Fund Balance		
Liabilities		
140002	Passport DPH Admin	\$ 5,178.74
140501	ANTHEM ADMIN	\$ 7,277.10
140601	AETNA ADMIN FEES	\$ 15,469.01
140701	KY SPIRIT DPH ADMIN	\$ 15,390.75
140801	WELL CARE DPH ADMIN	\$ 24,359.58
140901	Humana DPH Admin	\$ 7,244.60
147050	Ky Group Life Insurance	\$ 5.52
147096	FEBCO FLEX MEDICAL SPEN	\$ 7,309.09
148009	GREENSBURG CITY TAX	\$ 185.81
148016	RUSSELL COUNTY TAX	\$ 366.34
148030	MCCREARY LOCAL TAX	\$ 563.11
148056	WAYNE COUNTY TAX	\$ 376.07
148062	PULASKI CNTY TAX WITHEL	\$ 1,217.47
148063	JAMESTOWN CITY TAX WITH	\$ 488.46
148065	BURKESVILLE CITY TAX	\$ 216.04
148074	CUMBERLAND COUNTY SCHOO	\$ 103.89
148084	COLUMBIA CITY TAX	\$ 327.43
148086	SOMERSET CITY TAX	\$ 913.09
148096	CLINTON COUNTY TAX	\$ 328.11
148097	TAYLOR COUNTY TAX	\$ 384.12
148098	CUMBERLAND COUNTY TAX	\$ 434.41
149080	COBRA DELTA DENTAL	\$ 0.20
151000	GARNISHMENTS	\$ 314.80
169000	MISCELLANEOUS	\$ (31.32)
	Total Liabilities	\$ 88,422.42
Fund Balance		
171000	UNRESTRICTED FUND BALAN	\$ 6,880,967.26
171766	RESTRICTED-MCH	\$ 3,051.90
171826	URESTR LOCAL COMM HLTH	\$ 150.30
171891	Restricted-Medicaid Mat	\$ 466,169.00
171894	RESTRICTED CAPITAL	\$ 125,000.00
171895	RESTRICTED-EMPLOYER RET	\$ 1,777,536.10
172712	STATE RSTR DENTAL	\$ 621.96
172738	STATE RSTR KCCSP OUTRCH	\$ 5.69
172762	STATE RESTR SMLNG SCHLS	\$ 72,393.90
172764	STATE RESTR HEP A	\$ 15,159.68
172770	STATE RESTR KCCSP	\$ 1,315.28
172809	STATE RESTR DIABETES	\$ 61,373.03
172842	STATE RESTR HIV CNSLNG/	\$ 8,071.02
172853	HANDS PRIMA GRAVIDA PRO	\$ 688,391.00
173725	FED RESTR KWCSPP PINK OU	\$ 3,554.12
173726	FED RESTR PHER	\$ 957.47
173731	OPIOID CRISIS RESPONSE	\$ 564.43
173760	FED RESTR HANDS Multi	\$ 23,707.81
173767	FED RESTR HANDS Multi	\$ 6,692.15
173827	FED RESTR TEEN PREG PRE	\$ 68,706.19
173828	FED RESTR DIABETES STIT	\$ 20,728.95
173830	SEXUAL RISK AVOIDANCE E	\$ 48,533.95
173846	FED RESTR RHOP	\$ 52,885.81
173849	FED RESTR USDA GRANT	\$ 10,905.18
173850	FED RESTR KIPRC SUMMIT	\$ 2,604.83
174500	FEE RESTR FOOD SERVICE	\$ 77,931.62
174520	FEE RESTR PUBLIC FACILI	\$ 67,735.25
174560	FEE RESTR ONSITE SEWAGE	\$ 5,952.22
174590	FOOD LICENSE PROJECT	\$ 30,554.28
174712	FEE RESTR DENTAL	\$ 26,795.88
174747	FEE RESTR RESTR Khref	\$ 15,963.70
174758	FEE RESTR HV/GO365	\$ 629,371.90
174827	FEE RESTR ADAIR SMK FRE	\$ 18.32
174831	FEE RESTR WORKSITE WELL	\$ 2,826.98
174838	FEE RESTR FOUND FOR HEA	\$ 5,000.00
174839	FEE RESTR MARSHALL DIAB	\$ 29,822.41
174853	HANDS PRIMA GRAVIDA PRO	\$ 257,856.69
174858	FEE RESTR SCHL HLTH	\$ 835,980.91
174892	FEE RESTR MINOR RESTRIC	\$ 12.85
	Total Fund Balance	\$ 12,325,870.02
	Total Liabilities and Fund Balance	\$ 12,414,292.44
	Deficit	\$ (624,845.87)
	Cash/CDs/Investments (Assets Less Liabilities)	\$ 11,701,024.15
	Cash/CDs/Investments at 2019-20 Close (Assets Less Liabilities)	\$ 12,325,870.02
	Deficit	\$ (624,845.87)
	Fiscal Year To Date Revenues	\$ 4,852,137.21
	Fiscal Year To Date Expenditures	\$ 5,476,983.08
	Deficit	(\$624,845.87)

Lake Cumberland District Health Department
Revenue & Expense Summary Comparison to Prior Year
As of Period Ending October 31, 2021

	Current YTD Actual	Prior YTD Actual	Change	% Change
Revenue:				
State	\$ 1,850,151.17	\$ 1,078,399.81	\$ 771,751.36	72%
Federal	\$ 1,581,053.99	1,839,423.53	(258,370)	-14%
Local	\$ 0.08	3.04	\$ (2.96)	-97%
Service Fees	\$ 1,420,931.97	1,396,214.98	24,717	2%
Unrestricted Carryover	\$ -	\$ -	\$ -	N/A
Total Revenue	\$ 4,852,137.21	\$ 4,314,041.36	538,096	12%
Expense:				
Salary & Leave	\$ 2,098,637.57	1,969,298.95	129,339	7%
Fringe Benefits	\$ 2,135,426.23	1,248,149.19	887,277	71%
Independent Contractors	\$ 12,765.07	108,688.42	(95,923)	-88%
Travel	\$ 80,593.69	64,913.21	15,680	24%
Space Occupancy	\$ 195,779.89	168,803.31	26,977	16%
Office Administration	\$ 155,474.55	194,066.75	(38,592)	-20%
Medical Supplies	\$ 58,809.14	90,404.04	(31,595)	-35%
Automotive	\$ 8,358.23	2,337.40	6,021	258%
Other	\$ 731,138.71	492,116.53	239,022	49%
Capital Expenditures	\$ -	\$ 102,937.10	\$ (102,937.10)	-100%
Total Expense	\$ 5,476,983.08	\$ 4,441,714.90	1,035,268	23%
Excess/(Deficit) of Revenue over Expense:	\$ (624,845.87)	\$ (127,673.54)	(497,172)	389%

**Lake Cumberland District Health Department
Patient and Services YTD Current vs. Prior Comparison
As of Period Ending October 31, 2021**

	<u>Current Year</u>	<u>Prior Year</u>	<u>Change</u>	<u>% Change</u>
Unduplicated Patients	5,798	5,740	58	1.01%
Services:				
Clinic	22,609	21,146	1,463	6.92%
Laboratory	2,799	2,763	36	1.30%
Supplemental	51	161	(110)	-68.32%
Total Services	<u>25,459</u>	<u>24,070</u>	<u>1,389</u>	<u>5.77%</u>
Encounters for Clinic	27,196	24,985	2,211	8.85%
RBRV's				
Clinic	7,537	7,038	499	7.09%
Laboratory	6,568	6,569	(1)	-0.01%
Total RBRV's	<u>14,105</u>	<u>13,607</u>	<u>498</u>	<u>3.66%</u>
Services per Patient	4.39	4.19	0.20	4.71%
RBRV per Encounter	0.52	0.54	(0.03)	0.57

353 plus 758 report

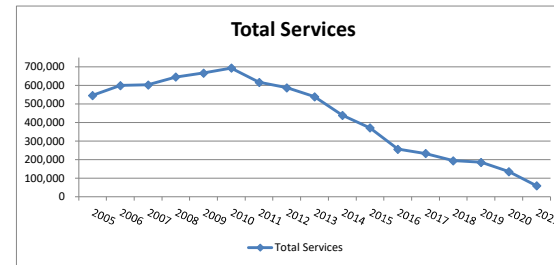
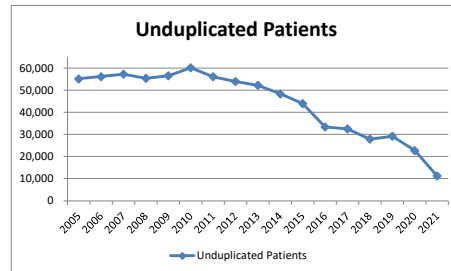
Clinic Services	353 Report		<u>Change</u>	<u>% Change</u>
	<u>Current Year</u>	<u>Prior Year</u>		
712	0	0	0 -	
800	1,822	1,299	523	40%
801	6,274	4,957	1,317	27%
802	3,345	3,718	(373)	-10%
803	0	1	(1)	-100%
804	10,758	10,905	(147)	-1%
805	24	40	(16)	-40%
806	1,779	1,488	291	20%
807	61	80	(19)	-24%
809	6	0	6 -	
810	864	881	(17)	-2%
813	475	540	(65)	-12%
858	0	0	0 -	
Total Clinic Services	<u>25,408</u>	<u>23,909</u>	<u>1,499</u>	<u>6%</u>

Patients	135 Report		<u>Change</u>	<u>% Change</u>
	<u>Current Year</u>	<u>Prior Year</u>		
712	0	0	0	-
800	1,036	812	224	28%
801	1,101	1,026	75	7%
802	709	745	(36)	-5%
803	0	1	(1)	-100%
804	3,372	3,517	(145)	-4%
805	6	13	(7)	-54%
806	507	443	64	14%
807	37	40	(3)	-8%
809	0	0	0	-
810	340	372	(32)	-9%
813	295	334	(39)	-12%
858	0	0	0	-

**Lake Cumberland District Health Department
Patient and Services Fiscal Year Trending Analysis**

	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Unduplicated Patients	55,123	56,152	57,175	55,291	56,459	60,109	56,085	53,874	52,157	48,307	43,923	33,311	32,479	27,834	29,140	22,710	11,198
Services:																	
Clinic	471,632	530,939	528,654	562,190	585,521	613,565	551,349	528,326	488,401	397,651	339,918	228,370	201,426	172,348	165,842	120,060	51,535
Laboratory	73,390	67,581	73,739	82,009	80,520	78,634	64,526	58,501	49,872	40,739	30,416	27,752	22,498	20,297	18,692	14,539	6,548
Supplemental	0												8,609	903	734	614	450
Total Services	545,022	598,520	602,393	644,199	666,041	692,199	615,875	586,827	538,273	438,390	370,334	256,122	232,533	193,548	185,268	135,213	58,533
Encounters for Clinic	487,283	545,055	580,767	616,281	640,742	663,299	597,270	577,400	540,174	440,548	373,098	259,694	226,337	168,156	193,105	132,057	53,842
RBRV's																	
Clinic	173,695	191,444	220,244	240,947	265,036	267,943	252,792	259,908	263,838	181,067	148,794	102,022	97,865	68,014	78,768	49,661	17,618
Laboratory	282,952	307,172	396,760	375,144	588,419	903,902	230,018	208,696	211,587	195,440	142,286	109,408	83,104	62,403	63,897	47,855	15,044
Total RBRV's	456,647	498,616	617,004	616,091	853,455	1,171,845	482,809	468,604	475,424	376,506	291,080	211,429	180,969	130,418	142,665	97,516	32,662
Services per Patient	9.89	10.66	10.54	11.65	11.80	11.52	10.98	10.89	10.32	9.08	8.43	7.69	7.16	6.95	6.36	5.95	5.23
RBRV per Encounter	0.94	0.91	1.06	1.00	1.33	1.77	0.81	0.81	0.88	0.85	0.78	0.81	0.80	0.78	0.74	0.74	0.61
Service Fee Revenue			6,445,928	7,318,486	8,163,604	7,541,994	8,152,690	5,610,809	5,677,521	4,451,357	4,273,794	2,498,350	2,987,957	2,258,573	1,843,173	1,499,625	318,622
SF Revenue per Patient	0.00	0.00	112.74	132.36	144.59	125.47	145.36	104.15	108.85	92.15	97.30	75.00	92.00	81.14	63.25	66.03	28.45
SF Revenue per Encounter	0.00	0.00	11.10	11.88	12.74	11.37	13.65	9.72	10.51	10.10	11.45	9.62	13.20	13.43	9.54	11.36	5.92
SF Revenue per RBRV	0.00	0.00	10.45	11.88	9.57	6.44	16.89	11.97	11.94	11.82	14.68	11.82	16.51	17.32	12.92	15.38	9.76

% Increase/(Decrease)	<u>2005</u>	<u>2006</u>	<u>2007</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>	<u>2016</u>	<u>2017</u>	<u>2018</u>	<u>2019</u>	<u>2020</u>	<u>2021</u>
Unduplicated Patients	8.30%	1.87%	1.82%	-3.30%	2.11%	6.46%	-6.69%	-3.94%	-3.19%	-7.38%	-9.08%	-24.16%	-2.50%	-14.30%	4.69%	-22.07%	-50.69%
Services:																	
Clinic	-7.96%	12.57%	-0.43%	6.34%	4.15%	4.79%	-10.14%	-4.18%	-7.56%	-18.58%	-14.52%	-32.82%	-11.80%	-14.44%	-3.77%	-27.61%	-57.08%
Laboratory	1.59%	-7.92%	9.11%	11.22%	-1.82%	-2.34%	-17.94%	-9.34%	-14.75%	-18.31%	-25.34%	-8.76%	-18.93%	-9.78%	-7.91%	-22.22%	-54.96%
Supplemental																	
Total Services	-6.78%	9.82%	0.65%	6.94%	3.39%	3.93%	-11.03%	-4.72%	-8.27%	-18.56%	-15.52%	-30.84%	-9.21%	-16.77%	-4.28%	-27.02%	-56.71%
Encounters for Clinic	6.24%	11.86%	6.55%	6.12%	3.97%	3.52%	-9.95%	-3.33%	-6.45%	-18.44%	-15.31%	-30.40%	-12.84%	-25.71%	14.84%	-31.61%	-59.23%
RBRV's																	
Clinic	1.29%	10.22%	15.04%	9.40%	10.00%	1.10%	-5.65%	2.82%	1.51%	-31.37%	-17.82%	-31.43%	-4.07%	-30.50%	15.81%	-36.95%	-64.52%
Laboratory	17.14%	8.56%	29.17%	-5.45%	56.85%	53.62%	-74.55%	-9.27%	1.39%	-7.63%	-27.20%	-23.11%	-24.04%	-24.91%	2.39%	-25.11%	-68.56%
Total RBRV's	10.56%	9.19%	23.74%	-0.15%	38.53%	37.31%	-58.80%	-2.94%	1.46%	-20.81%	-22.69%	-27.36%	-14.41%	-27.93%	9.39%	-31.65%	-66.51%
Services per Patient	-13.92%	7.80%	-1.15%	10.58%	1.25%	-2.38%	-4.64%	-0.81%	-5.25%	-12.07%	-7.09%	-8.81%	-6.88%	-2.87%	-8.57%	-6.35%	-12.21%
RBRV per Encounter	4.06%	-2.38%	16.13%	-5.90%	33.24%	32.64%	-54.24%	0.40%	8.45%	-2.90%	-8.71%	4.36%	-1.79%	-3.00%	-4.74%	-0.05%	-17.85%



Lake Cumberland District Health Department														
Financial Analysis														
Fiscal Year-to-Date as of October 31, 2021														
Cost Center	CC#	Revenue	Actual			Revenue Budget YTD			Expense Budget YTD			% Over/(Under) Budget		
			Expense	Excess		Revenue	Expense	Expense	Revenue	Expense	Excess	Revenue	Expense	Excess
Food Service	500	\$ 12,086.00	\$ 57,988.72	(45,903)	127,795	127,795	383,386	(115,709)	(69,807)	(45,903)	-90.54%	-54.62%	-35.92%	
Public Facilities	520	\$ 27,344.70	\$ 12,674.54	14,670	28,877	28,877	86,632	(1,533)	(16,203)	14,670	-5.31%	-56.11%	50.80%	
General Sanitation	540	\$ -	\$ 48,561.54	(48,562)	62,233	62,233	186,700	(62,233)	(13,672)	(48,562)	-100.00%	-21.97%	-78.03%	
Onsite Sewage	560	\$ 248,416.77	\$ 251,792.57	(3,376)	187,795	187,795	563,385	60,622	63,998	(3,376)	32.28%	34.08%	-1.80%	
Tanning Beds	580	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Food License Project	590	\$ 76,764.44	\$ 75,933.20	831	71,667	71,667	215,000	5,098	4,267	831	7.11%	5.95%	1.16%	
Radon	591	\$ -	\$ -	0	1,000	1,000	3,000	(1,000)	(1,000)	0	-100.00%	-100.00%	0.00%	
Retail Food Standards Grant	592	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
West Nile Virus	595	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Healthy Homes & Lead Poison P	598	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Winter Storm Resp-Local	599	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Dental Services	712	\$ 10.28	\$ 12.78	(3)	2,905	2,905	8,715	(2,895)	(2,892)	(3)	-99.65%	-99.56%	-0.09%	
Asthma Education	722	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
ELC Covid Mini-Grant	723	\$ -	\$ 602.81	(603)	0	0	0	0	603	(603)	0.00%	0.00%	0.00%	
KWSCP Pink County Outreach	725	\$ -	\$ 47.91	(48)	0	0	0	0	48	(48)	0.00%	0.00%	0.00%	
Zika Preparedness and Respons	726	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Harm Reduction/Needle Exchang	727	\$ 16,875.00	\$ 17,945.88	(1,071)	50,885	50,885	152,656	(34,010)	(32,939)	(1,071)	-66.84%	-64.73%	-2.10%	
Diabetes Disease Management	728	\$ -	\$ 1.65	(2)	0	0	0	0	2	(2)	0.00%	0.00%	0.00%	
Vector Surveillance	729	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Breast Cancer R&E Trust Fund	730	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Opioid Crisis Response	731	\$ -	\$ -	0	981	981	2,942	(981)	(981)	0	-100.00%	-100.00%	0.00%	
DIABETES PREVENTION PROG	732	\$ -	\$ -	0	981	981	2,942	(981)	(981)	0	-100.00%	-100.00%	0.00%	
Oral Health Coalition	735	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Community Health Action Team	736	\$ 69,664.23	\$ 75,357.18	(5,693)	59,776	29,888	89,664	9,888	45,469	(35,581)	16.54%	76.07%	-59.52%	
EMERGING INFECTIOUS DISEA	737	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
COVID-19 IMMUNIZATION SUP	738	\$ 53,619.06	\$ 86,489.24	(32,870)	96,205	96,205	288,616	(42,586)	(9,716)	(32,870)	-44.27%	-10.10%	-34.17%	
Coordinated School Health	740	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Passport Referrals	741	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
EnviroHealth Link	742	\$ 10,000.00	\$ 11,533.74	(1,534)	3,333	0	0	6,667	11,534	(4,867)	200.00%	346.01%	-146.01%	
Federal Hands Special Project	743	\$ -	\$ 53,953.80	(53,954)	0	0	0	0	53,954	(53,954)	0.00%	0.00%	0.00%	
Winter Storm	745	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Environmental Strike Team	746	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
KHREF	747	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
IEP School Services	748	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Regional EPI HAI Activities	749	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Accreditation	750	\$ -	\$ 1,912.26	(1,912)	21,493	21,493	64,478	(21,493)	(19,580)	(1,912)	-100.00%	-91.10%	-8.90%	
HANDS GF Services	752	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
PHEP	753	\$ -	\$ 15,017.26	(15,017)	41,710	23,161	69,484	(41,710)	(8,144)	(33,566)	-100.00%	-19.53%	-80.47%	
Zika Vector Control	755	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
PERSONAL RESPNSBLTY EDC	756	\$ 5,829.63	\$ 17,560.74	(11,731)	44,603	21,103	63,310	(38,774)	(3,543)	(35,231)	-86.93%	-7.94%	-78.99%	
Regional EPI	757	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
GO365 (HUMANA VITALITY)	758	\$ 89,940.50	\$ 13,497.20	76,443	117,833	117,833	353,500	(27,893)	(104,336)	76,443	-23.67%	-88.55%	64.87%	
ELC Surveillance Activities	759	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
HANDS - Federal Home Visiting	760	\$ 20,470.00	\$ 23,223.99	(2,754)	120,400	120,400	361,200	(99,930)	(97,176)	(2,754)	-83.00%	-80.71%	-2.29%	
Diabetes Telehealth	761	\$ 2,886.00	\$ 2,582.21	304	3,849	1,000	3,000	(963)	1,582	(2,545)	-25.01%	41.11%	-66.12%	
Smiling Schools Program	762	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
HEP A Outbreak Activities	764	\$ -	\$ 278.36	(278)	0	0	0	0	278	(278)	0.00%	0.00%	0.00%	
Tobacco Program Federal Funds	765	\$ 90.60	\$ 121.51	(31)	8,333	8,333	25,000	(8,243)	(8,212)	(31)	-98.91%	-98.54%	-0.37%	
MCH Coordinator	766	\$ 64,783.17	\$ 77,414.77	(12,632)	88,118	88,118	264,355	(23,335)	(10,704)	(12,632)	-26.48%	-12.15%	-14.33%	
HANDS Expanded Multi-Gravida	767	\$ -	\$ 6,888.70	(6,889)	0	0	0	0	6,889	(6,889)	0.00%	0.00%	0.00%	
HANDS Expansion/Outreach	768	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
ELC ENHANCING DETECTION	769	\$ 2,122.77	\$ 2,440.38	(318)	175,233	0	0	(173,110)	2,440	(175,551)	-98.79%	1.39%	-100.18%	
Kentucky Colon Cancer Screenin	770	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
PHEP Special Project	771	\$ -	\$ 56,575.06	(56,575)	0	0	0	0	56,575	(56,575)	0.00%	0.00%	0.00%	
HBE Assistance	772	\$ -	\$ 1,276.32	(1,276)	0	0	0	0	1,276	(1,276)	0.00%	0.00%	0.00%	
Contract Tracing	773	\$ 693,327.65	\$ 936,032.44	(242,705)	1,076,063	1,076,063	3,228,190	(382,736)	(140,031)	(242,705)	-35.57%	-13.01%	-22.55%	
Child Fatality Prevention	774	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
ECD School Projects	775	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	
Pediatric/Adolescent	800	\$ 35,544.69	\$ 57,759.31	(22,215)	0	0	0	35,545	57,759	(22,215)	0.00%	0.00%	0.00%	
Immunizations	801	\$ 59,839.98	\$ 191,546.22	(131,706)	0	0	0	59,840	191,546	(131,706)	0.00%	0.00%	0.00%	
Family Planning	802	\$ 81,351.00	\$ 217,687.17	(136,336)	0	0	0	81,351	217,687	(136,336)	0.00%	0.00%	0.00%	
Maternity Services	803	\$ -	\$ -	0	9,650	9,650	28,951	(9,650)	(9,650)	0	-100.00%	-100.00%	0.00%	
WIC Services	804	\$ 288,970.33	\$ 363,873.84	(74,904)	488,251	488,251	1,464,752	(199,280)	(124,377)	(74,904)	-40.82%	-25.47%	-15.34%	
Medical Nutrition	805	\$ 4,743.41	\$ 3,942.42	801	20,053	20,053	60,158	(15,309)	(16,110)	801	-76.35%	-80.34%	3.99%	
TB	806	\$ 23,753.72	\$ 120,421.06	(96,667)	65,101	65,101	195,303	(41,347)	55,320	(96,667)	-63.51%	84.98%	-148.49%	
STD Services	807	\$ 1,293.57	\$ 6,521.58	(5,228)	8,007	8,007	24,022	(6,714)	(1,486)	(5,228)	-83.85%	-18.55%	-65.29%	
Diabetes	809	\$ 49,906.98	\$ 53,313.80	(3,407)	74,333	74,333	223,000	(24,426)	(21,020)	(3,407)	-32.86%	-28.28%	-4.58%	
Adult Services	810	\$ 9,532.04	\$ 58,622.40	(49,090)	73,796	73,796	221,387	(64,264)	(15,173)	(49,090)	-87.08%	-20.56%	-66.52%	

Lake Cumberland District Health Department																	
Financial Analysis																	
Fiscal Year-to-Date as of October 31, 2021																	
Cost Center	CC#	Revenue	Actual			Revenue Budget YTD			Expense Budget YTD			Over/(Under) Budget			% Over/(Under) Budget		
			Expense	Excess		Revenue Budget YTD	Expense Budget YTD	Expense Budget Year	Revenue	Expense	Excess	Revenue	Expense	Excess			
Lead Poisoning Prevention	811	\$ -	\$ -	0	0	0	0	0	0	0	0	0	0.00%	0.00%	0.00%		
Breast & Cervical Cancer	813	\$ 6,479.78	\$ 17,054.25	(10,574)	28,138	28,138	84,415	(21,659)	(11,084)	(10,574)	-76.97%						
MCH Forum	816	\$ -	\$ 54,935.59	(54,936)	0	0	0	0	54,936	(54,936)	0.00%	0.00%	0.00%	0.00%	0.00%		
Healthy Communities - Tobacco	817	\$ -	\$ -	0	0	0	0	0	0	0	0.00%						
Community Based Services	818	\$ -	\$ -	0	0	0	0	0	0	0	0.00%						
PREPAREDNESS COORDINTN	821	\$ 24,504.39	\$ 35,577.84	(11,073)	33,853	33,853	101,558	(9,348)	1,725	(11,073)	-27.61%						
PREPAREDNESS EPIDEM & SU	822	\$ 27,276.17	\$ 30,620.66	(3,344)	33,442	33,442	100,327	(6,166)	(2,822)	(3,344)	-18.44%	-8.44%	-10.00%				
PREPAREDNESS MEDICAL RSI	823	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Bioterrorism - Focus Area F	824	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Bioterrorism - Focus Area G	825	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Local Community Public Health	826	\$ -	\$ 2,707.41	(2,707)	6,333	6,333	19,000	(6,333)	(3,626)	(2,707)	-100.00%	-57.25%	-42.75%				
Teen Pregnancy Prevention	827	\$ 56,194.70	\$ 36,696.18	19,499	91,002	91,002	273,006	(34,807)	(54,306)	19,499	-38.25%	-59.68%	21.43%				
Addressing Barriers to DSMES	828	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Heart4Change	829	\$ 52,065.96	\$ 29,264.08	22,802	63,995	63,995	191,986	(11,929)	(34,731)	22,802	-18.64%	-54.27%	35.63%				
Sexual Risk Avoidance Education	830	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Worksite Wellness Project	831	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Worksite Wellness	832	\$ 40,636.81	\$ 58,819.16	(18,182)	56,662	56,662	169,987	(16,026)	2,157	(18,182)	-28.28%	3.81%	-32.09%				
Breastfeeding	833	\$ 8,559.42	\$ 9,537.74	(978)	22,500	22,500	67,500	(13,941)	(12,962)	(978)	-61.96%	-57.61%	-4.35%				
KIRP	834	\$ -	\$ 900.00	(900)	0	0	0	0	900	(900)	0.00%	0.00%	0.00%	0.00%	0.00%		
HPP Activity Support	835	\$ 1,215.00	\$ 1,620.00	(405)	1,800	1,800	5,400	(585)	(180)	(405)	-32.50%	-10.00%	-22.50%				
Tobacco Prevention Project	836	\$ 5,244.67	\$ 6,614.10	(1,369)	52,500	33,333	100,000	(47,255)	(26,719)	(20,536)	-90.01%	-50.89%	-39.12%				
Abstinence Education	837	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Foundation for Health KY-CHIP	838	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Marshall Univ. Diabetes Grant	839	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Breastfeeding Peer Counselor	840	\$ 14,766.18	\$ 19,058.56	(4,292)	20,000	20,000	60,000	(5,234)	(941)	(4,292)	-26.17%	-4.71%	-21.46%				
Federal Diabetes Today	841	\$ 69.57	\$ 69.57	0	8,000	8,000	24,000	(7,930)	(7,930)	0	-99.13%	-99.13%	0.00%				
HIV Counseling & Testing	842	\$ -	\$ -	0	5,333	5,333	16,000	(5,333)	(5,333)	0	-100.00%	-100.00%	0.00%				
Ryan White	844	\$ 37,149.39	\$ 54,222.50	(17,073)	116,667	116,667	350,000	(79,517)	(62,444)	(17,073)	-68.16%	-53.52%	-14.63%				
Ryan White	845	\$ 64,317.95	\$ 79,922.95	(15,605)	166,667	166,667	500,000	(102,349)	(86,744)	(15,605)	-61.41%	-52.05%	-9.36%				
Rural Health Opioid Grant	846	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
KIPRC JAIL EDUCATION GRAN	847	\$ 15,285.54	\$ 24,526.00	(9,240)	33,333	33,333	100,000	(18,048)	(8,807)	(9,240)	-54.14%	-26.42%	-27.72%				
Healthy Start Project	848	\$ 2,482.21	\$ 2,288.27	194	17,000	17,000	51,000	(14,518)	(14,712)	194	-85.40%	-86.54%	1.14%				
USDA Rural Bus. Dev. Grant	849	\$ -	\$ 6,231.66	(6,232)	0	0	0	0	6,232	(6,232)	0.00%	0.00%	0.00%	0.00%	0.00%		
KIPRC HARM REDUCTION SUM	850	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Pandemic Flu Summit	851	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
HANDS PRIMA GRAVIDA PROG	853	\$ 789,930.00	\$ 914,118.44	(124,188)	1,145,330	1,145,330	3,435,990	(355,400)	(231,212)	(124,188)	-31.03%	-20.19%	-10.84%				
Arthritis	856	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Physical Activity	857	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Supplemental School Health	858	\$ (240.40)	\$ -	(240)	0	0	0	(240)	0	(240)	0.00%	0.00%	0.00%	0.00%	0.00%		
KHELP	871	\$ -	\$ 8.70	(9)	0	0	0	0	9	(9)	0.00%	0.00%	0.00%	0.00%	0.00%		
TLC - Obesity Grant	872	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
HPP Coordinators	875	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Hands Program Expansion	877	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Ryan White COVID-19 Cares	882	\$ -	\$ 600.00	(600)	0	0	0	0	600	(600)	0.00%	0.00%	0.00%	0.00%	0.00%		
EPSDT Verbal Notification	883	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
WIC Operational Adjust Funding	886	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Core Assessment & Policy Dev.	890	\$ 720.00	\$ 2,014.81	(1,295)	3,512	3,512	10,536	(2,792)	(1,497)	(1,295)	-79.50%	-42.63%	-36.87%				
Medicaid Match	891	\$ -	\$ 46,479.69	(46,480)	27,116	27,116	81,348	(27,116)	19,364	(46,480)	-100.00%	71.41%	-171.41%				
Minor Receipts	892	\$ 593.76	\$ -	594	0	0	0	594	0	594	0.00%	0.00%	0.00%	0.00%	0.00%		
Capital	894	\$ -	\$ -	0	0	0	0	0	0	0	0.00%	0.00%	0.00%	0.00%	0.00%		
Allocable Direct	895	\$ 1,755,719.59	\$ 1,121,690.36	634,029	1,558,056	1,558,056	4,674,169	197,663	(436,366)	634,029	12.69%	-28.01%	40.69%				
Total		\$ 4,852,137.21	\$ 5,476,983.08	(624,846)	5,064,446	5,064,446	14,375,781	(212,309)	685,056	(897,365)	-4.19%	13.53%	-17.72%				

Lake Cumberland District Health Department
Actual versus Earned Revenue
Fiscal Year-to-Date as of October 31, 2021

Cost Center	CC #	Actual Revenue	Earned Revenue	Variance	% Variance	Months Equivalent Uncollected
Food Service	500	\$ 12,086.00	57,989	(45,903)	-79%	3.17
Public Facilities	520	\$ 27,344.70	40,019	(12,675)	-32%	1.27
General Sanitation	540	\$ -	48,562	(48,562)	-100%	4.00
Onsite Sewage	560	\$ 248,416.77	258,008	(9,591)	-4%	0.15
Tanning Beds	580	\$ -	0	0	NA	
Food License Project	590	\$ 76,764.44	75,933	831	1%	
Radon	591	\$ -	0	0	NA	
Retail Food Standards Grant	592	\$ -	0	0	NA	
West Nile Virus	595	\$ -	0	0	NA	
Healthy Homes & Lead Poison Prev	598	\$ -	0	0	NA	
Winter Storm Resp-Local	599	\$ -	0	0	NA	
Dental Services	712	\$ 10.28	13	(3)	-20%	0.78
Asthma Education	722	\$ -	0	0	NA	
ELC Covid Mini-Grant	723	\$ -	603	(603)	-100%	4.00
KWSCP Pink County Outreach	725	\$ -	48	(48)	-100%	4.00
Zika Preparedness and Response	726	\$ -	0	0	NA	
Harm Reduction/Needle Exchange	727	\$ 16,875.00	30,321	(13,446)	-44%	1.77
Diabetes Disease Management	728	\$ -	2	(2)	-100%	4.00
Vector Surveillance	729	\$ -	0	0	NA	
Opioid Crisis Response	731	\$ -	0	0	NA	
DIABETES PREVENTION PROGRAM	732	\$ -	0	0	NA	
Oral Health Coalition	735	\$ -	0	0	NA	
Community Health Action Team	736	\$ 69,664.23	75,357	(5,693)	-8%	0.30
EMERGING INFECTIOUS DISEASE	737	\$ -	0	0	NA	
COVID-19 IMMUNIZATION SUPP.	738	\$ 53,619.06	86,489	(32,870)	-38%	1.52
Coordinated School Health	740	\$ -	0	0	NA	
Passport Referrals	741	\$ -	0	0	NA	
EnviroHealth Link	742	\$ 10,000.00	11,534	(1,534)	-13%	0.53
Federal Hands Special Project	743	\$ -	0	0	NA	
Winter Storm	745	\$ -	0	0	NA	
Environmental Strike Team	746	\$ -	0	0	NA	
KHREF	747	\$ -	0	0	NA	
IEP School Services	748	\$ -	0	0	NA	
Regional EPI HAI Activities	749	\$ -	0	0	NA	
Accreditation	750	\$ -	1,912	(1,912)	-100%	4.00
HANDS GF Services	752	\$ -	0	0	NA	
PHEP	753	\$ -	15,017	(15,017)	-100%	4.00
Zika Vector Control	755	\$ -	0	0	NA	
PERSONAL RESPNSBLTY EDCTN PRG	756	\$ 5,829.63	17,561	(11,731)	-67%	2.67
Regional EPI	757	\$ -	0	0	NA	
GO365 (HUMANA VITALITY)	758	\$ 89,940.50	13,497	76,443	566%	
ELC Surveillance Activities	759	\$ -	0	0	NA	
HANDS - Federal Home Visiting	760	\$ 20,470.00	27,970	(7,500)	-27%	1.07
Diabetes Telehealth	761	\$ 2,886.00	2,582	304	12%	
Smiling Schools Program	762	\$ -	0	0	NA	
HEP A Outbreak Activities	764	\$ -	278	(278)	-100%	4.00
Tobacco Program Federal Funds	765	\$ 90.60	122	(31)	-25%	1.02
MCH Coordinator	766	\$ 64,783.17	77,415	(12,632)	-16%	0.65
HANDS Expanded Multi-Gravida Families	767	\$ -	6,889	(6,889)	-100%	4.00
HANDS Expansion/Outreach	768	\$ -	0	0	NA	
ELC ENHANCING DETECTION	769	\$ 2,122.77	2,440	(318)	-13%	0.52
Kentucky Colon Cancer Screening Project	770	\$ -	0	0	NA	
PHEP Special Project	771	\$ -	56,575	(56,575)	-100%	4.00
HBE Assistance	772	\$ -	1,276	(1,276)	-100%	4.00
Contract Tracing	773	\$ 693,327.65	936,032	(242,705)	-26%	1.04
Child Fatality Prevention	774	\$ -	0	0	NA	
ECD School Projects	775	\$ -	0	0	NA	
Pediatric/Adolescent	800	\$ 35,544.69	57,759	(22,215)	-38%	1.54
Immunizations	801	\$ 59,839.98	255,251	(195,411)	-77%	3.06
Family Planning	802	\$ 81,351.00	301,895	(220,544)	-73%	2.92

Lake Cumberland District Health Department
Actual versus Earned Revenue
Fiscal Year-to-Date as of October 31, 2021

Cost Center	CC #	Actual Revenue	Earned Revenue	Variance	% Variance	Months Equivalent Uncollected
Maternity Services	803	\$ -	0	0	NA	
WIC Services	804	\$ 288,970.33	363,874	(74,904)	-21%	0.82
Medical Nutrition	805	\$ 4,743.41	4,306	437	10%	
TB	806	\$ 23,753.72	120,421	(96,667)	-80%	3.21
STD Services	807	\$ 1,293.57	7,880	(6,587)	-84%	3.34
Diabetes	809	\$ 49,906.98	53,314	(3,407)	-6%	0.26
Adult Services	810	\$ 9,532.04	66,668	(57,136)	-86%	3.43
Lead Poisoning Prevention	811	\$ -	0	0	NA	
Breast & Cervical Cancer	813	\$ 6,479.78	19,234	(12,754)	-66%	2.65
MCH Forum	816	\$ -	54,936	(54,936)	-100%	4.00
Healthy Communities - Tobacco	817	\$ -	0	0	NA	
Community Based Services	818	\$ -	0	0	NA	
PREPAREDNESS COORDINTN & TRNG	821	\$ 24,504.39	35,578	(11,073)	-31%	1.24
PREPAREDNESS EPIDEM & SURVLLNC	822	\$ 27,276.17	30,621	(3,344)	-11%	0.44
PREPAREDNESS MEDICAL RSRV CORP	823	\$ -	0	0	NA	
Bioterrorism - Focus Area F	824	\$ -	0	0	NA	
Bioterrorism - Focus Area G	825	\$ -	0	0	NA	
Local Community Public Health Projects	826	\$ -	2,707	(2,707)	-100%	4.00
Teen Pregnancy Prevention	827	\$ 56,194.70	36,696	19,499	53%	
Addressing Barriers to DSMES	828	\$ -	0	0	NA	
Heart4Change	829	\$ 52,065.96	29,264	22,802	78%	
Sexual Risk Avoidance Education Direct Grant	830	\$ -	0	0	NA	
Worksite Wellness Project	831	\$ -	0	0	NA	
Worksite Wellness	832	\$ 40,636.81	58,819	(18,182)	-31%	1.24
Breastfeeding	833	\$ 8,559.42	9,538	(978)	-10%	0.41
KIRP	834	\$ -	900	(900)	-100%	4.00
HPP Activity Support	835	\$ 1,215.00	1,620	(405)	-25%	1.00
Tobacco Prevention Project	836	\$ 5,244.67	6,614	(1,369)	-21%	0.83
Abstinence Education	837	\$ -	0	0	NA	
Foundation for Health KY-CHIP	838	\$ -	0	0	NA	
Marshall Univ. Diabetes Grant	839	\$ -	0	0	NA	
Breastfeeding Peer Counselor	840	\$ 14,766.18	19,059	(4,292)	-23%	0.90
Federal Diabetes Today	841	\$ 69.57	70	0	0%	
HIV Counseling & Testing	842	\$ -	0	0	NA	
Ryan White	844	\$ 37,149.39	54,223	(17,073)	-31%	1.26
Ryan White	845	\$ 64,317.95	79,923	(15,605)	-20%	0.78
Rural Health Opioid Grant	846	\$ -	0	0	NA	
KIPRC JAIL EDUCATION GRANT	847	\$ 15,285.54	24,526	(9,240)	-38%	1.51
Healthy Start Project	848	\$ 2,482.21	2,288	194	8%	
USDA Rural Bus. Dev. Grant	849	\$ -	6,232	(6,232)	-100%	4.00
KIPRC HARM REDUCTION SUMMIT	850	\$ -	0	0	NA	
Pandemic Flu Summit	851	\$ -	0	0	NA	
HANDS PRIMA GRAVIDA PROGRAM	853	\$ 789,930.00	914,118	(124,188)	-14%	0.54
Arthritis	856	\$ -	0	0	NA	
Physical Activity	857	\$ -	0	0	NA	
Supplemental School Health	858	\$ (240.40)	0	(240)	NA	#DIV/0!
KHELP	871	\$ -	9	(9)	-100%	4.00
TLC - Obesity Grant	872	\$ -	0	0	NA	
HPP Coordinators	875	\$ -	0	0	NA	
Hands Program Expansion	877	\$ -	0	0	NA	
Ryan White COVID-19 Cares	882	\$ -	600	(600)	-100%	4.00
EPSDT Verbal Notification	883	\$ -	0	0	NA	
WIC Operational Adjust Funding	886	\$ -	0	0	NA	
Core Assessment & Policy Dev.	890	\$ 720.00	2,015	(1,295)	-64%	2.57
Medicaid Match	891	\$ -	46,480	(46,480)	-100%	4.00
Minor Receipts	892	\$ 593.76	594	0		
Capital	894	\$ -	0	0		
Allocable Direct	895	\$ 1,755,719.59	1,135,891	619,828	55%	
Total		\$ 4,852,137.21	5,648,365	(796,228)	-14%	0.56

Lake Cumberland District Health Department
Earned Revenue/Expense Analysis
Fiscal Year-to-Date as of October 31, 2021

Cost Center	CC #	Earned Revenue	Budget Variance	Expense	Budget Variance	Excess/(Deficit) before General Distribution	General & Local Distribution	% of General & Local Distribution	Excess/(Deficit) after General & Local Distribution	YTD Budget %		Beginning Budget	Budget Modifications
										Total Budget	33.33%		
Food Service	500	\$ 57,631.33	-55%	57,989	-55%	(357)	357	0.03%	0	383,386	127,795	383,386	0
Public Facilities	520	\$ 40,019.24	39%	12,675	-56%	27,345	0	0.00%	27,345	86,632	28,877	86,632	0
General Sanitation	540	\$ 48,561.54	-22%	48,562	-22%	0	0	0.00%	0	186,700	62,233	186,700	0
Onsite Sewage	560	\$ 258,007.77	37%	251,793	34%	6,215	0	0.00%	6,215	563,385	187,795	563,385	0
Tanning Beds	580	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Food License Project	590	\$ 75,933.20	6%	75,933	6%	0	0	0.00%	0	215,000	71,667	215,000	0
Radon	591	\$ -	-100%	0	\$ -	0	0	0.00%	0	3,000	1,000	3,000	0
Retail Food Standards Grant	592	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
West Nile Virus	595	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Healthy Homes & Lead Poison Prev	598	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Winter Storm Resp-Local	599	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Dental Services	712	\$ 12.78	-100%	13	-100%	0	0	0.00%	0	8,715	2,905	8,715	0
Asthma Education	722	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
ELC Covid Mini-Grant	723	\$ -	No Budget	603	No Budget	(603)	603	0.05%	0	0	0	0	0
KWSCP Pink County Outreach	725	\$ -	No Budget	48	No Budget	(48)	48	0.00%	0	0	0	0	0
Zika Preparedness and Response	726	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Harm Reduction/Needle Exchange	727	\$ 30,320.88	-40%	17,946	-65%	12,375	0	0.00%	12,375	152,656	50,885	152,656	0
Diabetes Disease Management	728	\$ -	No Budget	2	No Budget	(2)	2	0.00%	0	0	0	0	0
Vector Surveillance	729	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Breast Cancer R&E Trust Fund	730	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Opioid Crisis Response	731	\$ -	-100%	0	-100%	0	0	0.00%	0	2,942	981	2,942	0
DIABETES PREVENTION PROGRAM	732	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Oral Health Coalition	735	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Community Health Action Team	736	\$ 75,357.18	26%	75,357	26%	0	0	0.00%	0	179,328	59,776	89,664	89,664
EMERGING INFECTIOUS DISEASE	737	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
KCCSP Outreach & Education	738	\$ 86,489.24	-10%	86,489	-10%	0	0	0.00%	0	288,616	96,205	288,616	0
Coordinated School Health	740	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Passport Referrals	741	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
EnviroHealth Link	742	\$ 10,000.00	200%	11,534	246%	(1,534)	1,534	0.13%	0	10,000	3,333	0	10,000
Federal Hands Special Project	743	\$ -	No Budget	53,954	No Budget	(53,954)	0	0.00%	(53,954)	0	0	0	0
Winter Storm	745	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Environmental Strike Team	746	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
KHREF	747	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
IEP School Services	748	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Regional EPI HAI Activities	749	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Accreditation	750	\$ 1,912.26	-91%	1,912	-91%	0	0	0.00%	0	64,478	21,493	64,478	0
HANDS GF Services	752	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
PHEP	753	\$ 15,017.26	-64%	15,017	-64%	0	0	0.00%	0	125,131	41,710	69,484	55,647
Zika Vector Control	755	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
PERSONAL RESPNSBLTY EDCTN PRG	756	\$ 17,560.74	-61%	17,561	-61%	0	0	0.00%	0	133,810	44,603	63,310	70,500
Regional EPI	757	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
GO365 (HUMANA VITALITY)	758	\$ 404.00	-100%	13,497	-89%	(13,093)	13,093	1.14%	0	353,500	117,833	353,500	0
ELC Surveillance Activities	759	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
HANDS - Federal Home Visiting	760	\$ 27,970.00	-77%	23,224	-81%	4,746	0	0.00%	4,746	361,200	120,400	361,200	0
Diabetes Telehealth	761	\$ 2,582.21	-33%	2,582	-33%	0	0	0.00%	0	11,546	3,849	3,000	8,546
Smiling Schools Program	762	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
HEP A Outbreak Activities	764	\$ -	No Budget	278	No Budget	(278)	278	0.02%	0	0	0	0	0
Tobacco Program Federal Funds	765	\$ 121.51	-99%	122	-99%	0	0	0.00%	0	25,000	8,333	25,000	0
MCH Coordinator	766	\$ 77,414.77	-12%	77,415	-12%	0	0	0.00%	0	264,355	88,118	264,355	0
HANDS Expanded Multi-Gravida Families	767	\$ -	No Budget	6,889	No Budget	(6,889)	6,889	0.60%	0	0	0	0	0
HANDS Expansion/Outreach	768	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
ELC ENHANCING DETECTION	769	\$ 2,440.38	-99%	2,440	-99%	0	0	0.00%	0	525,699	175,233	0	525,699
Kentucky Colon Cancer Screening Project	770	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
PHEP Special Project	771	\$ -	No Budget	56,575	No Budget	(56,575)	56,575	4.94%	0	0	0	0	0
HBE Assistance	772	\$ -	No Budget	1,276	No Budget	(1,276)	1,276	0.11%	0	0	0	0	0

Cost Center	CC #	Earned Revenue	Budget Variance	Expense	Budget Variance	Excess/(Deficit) before General Distribution	General & Local Distribution	% of General & Local Distribution	Excess/(Deficit) after General & Local Distribution	YTD Budget %		Beginning Budget	Budget Modifications
										Total Budget	33.33%		
Contract Tracing	773	\$ 936,032.44	-13%	936,032	-13%	0	0	0.00%	0	3,228,190	1,076,063	3,228,190	0
Child Fatality Prevention	774	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
ECD School Projects	775	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Pediatric/Adolescent	800	\$ 56,704.61	488%	57,759	499%	(1,055)	1,055	0.09%	0	28,951	9,650	28,951	0
Immunizations	801	\$ 255,250.73	15%	191,546	-14%	63,705	0	0.00%	63,705	664,393	221,464	664,393	0
Family Planning	802	\$ 301,894.92	3%	217,687	-26%	84,208	0	0.00%	84,208	883,409	294,470	883,409	0
Maternity Services	803	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
WIC Services	804	\$ 363,873.84	-25%	363,874	-25%	0	0	0.00%	0	1,464,752	488,251	1,464,752	0
Medical Nutrition	805	\$ 4,306.39	-79%	3,942	-80%	364	0	0.00%	364	60,158	20,053	60,158	0
TB	806	\$ 76,601.41	18%	120,421	85%	(43,820)	43,820	3.83%	0	195,303	65,101	195,303	0
STD Services	807	\$ 7,880.18	-2%	6,522	-19%	1,359	0	0.00%	1,359	24,022	8,007	24,022	0
Diabetes	809	\$ 53,313.80	-28%	53,314	-28%	0	0	0.00%	0	223,000	74,333	223,000	0
Adult Services	810	\$ 66,667.97	-10%	58,622	-21%	8,046	0	0.00%	8,046	221,387	73,796	221,387	0
Lead Poisoning Prevention	811	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Breast & Cervical Cancer	813	\$ 19,234.19	-32%	17,054	-39%	2,180	0	0.00%	2,180	84,415	28,138	84,415	0
MCH Forum	816	\$ -	No Budget	54,936	No Budget	(54,936)	54,936	4.80%	0	0	0	0	0
Healthy Communities - Tobacco	817	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Community Based Services	818	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
PREPAREDNESS COORDINTN & TRNG	821	\$ 33,852.67	0%	35,578	5%	(1,725)	1,725	0.15%	0	101,558	33,853	101,558	0
PREPAREDNESS EPIDEM & SURVLLNC	822	\$ 30,620.66	-8%	30,621	-8%	0	0	0.00%	0	100,327	33,442	100,327	0
PREPAREDNESS MEDICAL RSRV CORP	823	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Bioterrorism - Focus Area F	824	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Bioterrorism - Focus Area G	825	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Local Community Public Health Projects	826	\$ 2,707.41	-57%	2,707	-57%	0	0	0.00%	0	19,000	6,333	19,000	0
Teen Pregnancy Prevention	827	\$ 36,696.18	-60%	36,696	-60%	0	0	0.00%	0	273,006	91,002	273,006	0
Addressing Barriers to DSMES	828	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Heart4Change	829	\$ 29,284.08	-54%	29,264	-54%	0	0	0.00%	#VALUE!	191,986	63,995	191,986	0
Sexual Risk Avoidance Education Direct Grant	830	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Worksite Wellness Project	831	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Worksite Wellness	832	\$ 58,819.16	4%	58,819	4%	0	0	0.00%	0	169,987	56,662	169,987	0
Breastfeeding	833	\$ 9,537.74	-58%	9,538	-58%	0	0	0.00%	0	67,500	22,500	67,500	0
KIRP	834	\$ 900.00	No Budget	900	No Budget	0	0	0.00%	0	0	0	0	0
HPP Activity Support	835	\$ 1,215.00	-33%	1,620	-10%	(405)	405	0.04%	0	5,400	1,800	5,400	0
Tobacco Prevention Project	836	\$ 6,614.10	-87%	6,614	-87%	0	0	0.00%	0	157,500	52,500	100,000	57,500
Abstinence Education	837	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Foundation for Health KY-CHIP	838	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Marshall Univ. Diabetes Grant	839	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Breastfeeding Peer Counselor	840	\$ 19,058.56	-5%	19,059	-5%	0	0	0.00%	0	60,000	20,000	60,000	0
Federal Diabetes Today	841	\$ 69.57	-99%	70	-99%	0	0	0.00%	0	24,000	8,000	24,000	0
HIV Counseling & Testing	842	\$ -	-100%	0	-100%	0	0	0.00%	0	16,000	5,333	16,000	0
Ryan White	844	\$ 54,222.50	-54%	54,223	-54%	0	0	0.00%	0	350,000	116,667	350,000	0
Ryan White	845	\$ 79,922.95	-52%	79,923	-52%	0	0	0.00%	0	500,000	166,667	500,000	0
Rural Health Opioid Grant	846	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
KIPRC JAIL EDUCATION GRANT	847	\$ 24,526.00	-26%	24,526	-26%	0	0	0.00%	0	100,000	33,333	100,000	0
Healthy Start Project	848	\$ 2,288.27	-87%	2,288	-87%	0	0	0.00%	0	51,000	17,000	51,000	0
USDA Rural Bus. Dev. Grant	849	\$ 6,231.66	No Budget	6,232	No Budget	0	0	0.00%	0	0	0	0	0
KIPRC HARM REDUCTION SUMMIT	850	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Pandemic Flu Summit	851	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
HANDS PRIMA GRAVIDA PROGRAM	853	\$ 749,710.00	-35%	914,118	-20%	(164,408)	164,408	14.35%	0	3,435,990	1,145,330	3,435,990	0
Arthritis	856	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Physical Activity	857	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Supplemental School Health	858	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
KHELP	871	\$ -	No Budget	9	No Budget	(9)	9	0.00%	0	0	0	0	0
TLC - Obesity Grant	872	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
HPP Coordinators	875	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Hands Program Expansion	877	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Ryan White COVID-19 Cares	882	\$ -	No Budget	600	No Budget	(600)	600	0.05%	0	0	0	0	0
EPSDT Verbal Notification	883	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0

Cost Center	CC #	Earned Revenue	Budget Variance	Expense	Budget Variance	Excess/(Deficit) before General Distribution	General & Local Distribution	% of General & Local Distribution	Excess/(Deficit) after General & Local Distribution	YTD Budget %		Beginning Budget	Budget Modifications
										Total Budget	33.33%		
WIC Operational Adjust Funding	886	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Core Assessment & Policy Dev.	890	\$ 2,014.81	-43%	2,015	-43%	0	0	0.00%	0	10,536	3,512	10,536	0
Medicaid Match	891	\$ 27,116.00	0%	46,480	71%	(19,364)	19,364	1.69%	0	81,348	27,116	81,348	0
Minor Receipts	892	\$ 593.68	No Budget	0	No Budget	594	0	0.00%	594	0	0	0	0
Capital	894	\$ -	No Budget	0	No Budget	0	0	0.00%	0	0	0	0	0
Allocable Direct	895	\$ 1,135,891.12	-27%	1,121,690	-28%	14,201	0	0.00%	14,201	4,674,169	1,558,056	4,674,169	0
Total		\$ 5,281,388.89	-26%	\$ 5,476,983.08	-23%	\$ (195,594.19)	1,145,499	32.04%	#VALUE!	\$ 21,412,366.58	\$ 7,137,455.53	\$ 20,594,810.00	\$ 817,556.58

Lake Cumberland District Health Department
 Allowable Unrestricted Reserve Calculation
 As of Period Ending June 30, 2021

CC#	Cost Center	Expense	Service Fees	Service Fee % of Total Expense	Non-Fee Program Expense	Fee for Service Program Expense
500	Food Service	103,016	180,948	175.65%	0	103,015
520	Public Facilities	35,441	103,177	291.12%	0	35,442
540	General Sanitation	110,031	0	0.00%	110,031	0
560	Onsite Sewage	579,292	585,241	101.03%	0	579,290
590	Food License Project	209,657	227,976	108.74%	0	209,657
591	Radon	4,651		0.00%	4,651	0
712	Dental Services	147	19	12.60%	147	0
723	Osteoporosis	74,550		0.00%	74,550	0
727	Harm Reduction/Needle Exchange	125,574	0	0.00%	125,574	0
728	Diabetes Disease Management	97		0.00%	97	0
732	DIABETES PREVENTION PROGRAM	439		0.00%	439	0
736	Community Health Action Team	84,419		0.00%	84,419	0
738	COVID-19 IMMUNIZATION SUPP.	114,089		0.00%	114,089	0
742	EnviroHealth Link	19,584		0.00%	19,584	0
746	Environmental Strike Team	19		0.00%	19	0
750	Accreditation	6,351		0.00%	6,351	0
752	HANDS GF Services	39,186	0	0.00%	39,186	0
753	PHEP	36,667		0.00%	36,667	0
756	PERSONAL RESPNSBLTY EDCTN PRO	36,055		0.00%	36,055	0
758	GO365 (HUMANA VITALITY)	108,940	108,940	100.00%	0	108,940
760	HANDS - Federal Home Visiting	142,476	142,476.34	100.00%	0	142,476
761	Diabetes Telehealth	22,588		0.00%	22,588	0
764	HEP A Outbreak Activities	334		0.00%	334	0
765	Tobacco Program Federal Funds	25,616		0.00%	25,616	0
766	MCH Coordinator	209,256		0.00%	209,256	0
767	HANDS Expanded Multi-Gravida Families	137		0.00%	137	0
769	ELC ENHANCING DETECTION	0		0.00%	0	0
771	PHEP Special Project	1,300,375		0.00%	1,300,375	0
773	Contract Tracing	2,532,687		0.00%	2,532,687	0
774	Child Fatality Prevention	124		0.00%	124	0
800	Pediatric/Adolescent	111,674	43,425	38.89%	111,674	0
801	Immunizations	266,988	73,746	27.62%	266,988	0
802	Family Planning	550,474	128,550	23.35%	550,474	0
803	Maternity Services	225	0	0.00%	225	0
804	WIC Services	1,059,619	7	0.00%	1,059,619	0
805	Medical Nutrition	44,532	1,665	3.74%	44,532	0
806	TB	207,605	37,446	18.04%	207,605	0
807	STD Services	16,899	2,868	16.97%	16,899	0
809	Diabetes	135,733	0	0.00%	135,733	0
810	Adult Services	185,170	24,508	13.24%	185,170	0
813	Breast & Cervical Cancer	57,396	6,395	11.14%	57,396	0
816	MCH Forum	398,434	52,541	13.19%	398,434	0
821	PREPAREDNESS COORDINTN & TRNC	95,256		0.00%	95,256	0
822	PREPAREDNESS EPIDEM & SURVLLN	96,620		0.00%	96,620	0
823	PREPAREDNESS MEDICAL RSRV COF	1		0.00%	1	0
827	Teen Pregnancy Prevention	171,380		0.00%	171,380	0
829	Heart4Change	90,404		0.00%	90,404	0
830	Sexual Risk Avoidance Education Direct	0		0.00%	0	0
831	Worksite Wellness Project	84	0	0.00%	84	0
832	Worksite Wellness	93,266		0.00%	93,266	0
833	Breastfeeding	34,511		0.00%	34,511	0
835	HPP Activity Support	5,301		0.00%	5,301	0
836	Tobacco Prevention Project	78,397	10,000	12.76%	78,397	0
839	Marshall Univ. Diabetes Grant	3,223	0	0.00%	3,223	0
840	Breastfeeding Peer Counselor	42,386		0.00%	42,386	0
841	Federal Diabetes Today	23,308		0.00%	23,308	0
844	Ryan White	129,282		0.00%	129,282	0
845	Ryan White	188,916		0.00%	188,916	0
846	Rural Health Opioid Grant	83,291		0.00%	83,291	0

Lake Cumberland District Health Department
 Allowable Unrestricted Reserve Calculation
 As of Period Ending June 30, 2021

CC#	Cost Center	Expense	Service Fees	Service Fee % of Total Expense	Non-Fee Program Expense	Fee for Service Program Expense
847	KIPRC JAIL EDUCATION GRANT	48,939		0.00%	48,939	0
848	Healthy Start Project	16,664		0.00%	16,664	0
849	USDA Rural Bus. Dev. Grant	7,497		0.00%	7,497	0
850	KIPRC HARM REDUCTION SUMMIT	21,104		0.00%	21,104	0
853	HANDS PRIMA GRAVIDA PROGRAM	1,800,225	1,834,920	101.93%	0	1,800,225
858	Supplemental School Health	98,251	0	0.00%	98,251	0
875	HPP Coordinators	1		0.00%	1	0
882	Ryan White COVID-19 Cares	2,025		0.00%	2,025	0
890	Core Assessment & Policy Dev.	6,909	2,192	31.73%	6,909	0
891	Medicaid Match	156,313	0	0.00%	156,313	0
894	Capital	120,153		0.00%	120,153	0
895	Allocable Direct	1,603,617		0.00%	1,603,617	0
	Total	13,973,870		0.00%	10,994,823	2,979,045

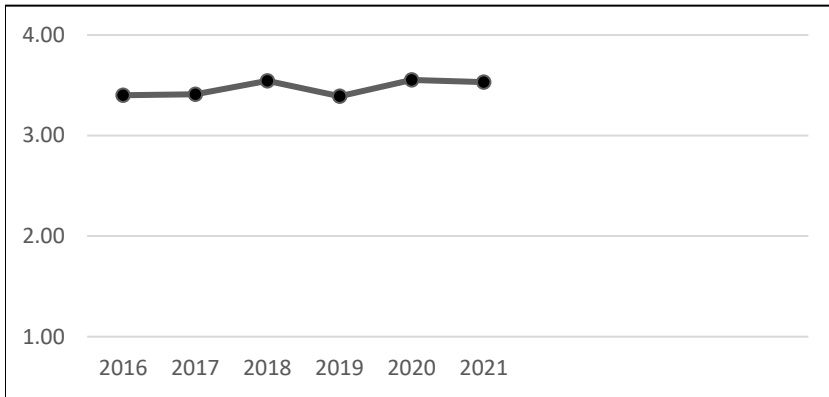
Multiplier for Allowed Unrestricted Reserve	30%	40%
Allowed Non-Fee for Service Unrestricted Reserve & Fee for Service Unrestricted Reserve	<u>\$ 3,298,447.01</u>	<u>\$ 1,191,617.97</u>
Allowed Non-Service Fee Restricted Reserves (30% of Total Non-Service Fee Expenses)		3,298,447
Allowed Service Fee Restricted Reserves (40% of Total Service Fee Expenses)		<u>1,191,618</u>
Total Allowed Unrestricted Reserve		4,490,065
Fiscal Year End Actual Unrestricted Reserve		<u>6,880,967</u>
Remaining Allowable Unrestricted Reserve		<u>(2,390,902)</u>

Description	FY2020		FY 2021	
Current Allowed Unrestricted Reserve	\$ 4,922,719.59	100%	4,490,064.98	100%
Fiscal Year End Actual Unrestricted Reserve	5,674,908.39	121%	6,880,967.26	153%
Remaining Allowable Unrestricted Reserve	<u>\$ (752,188.80)</u>	-21%	<u>(2,390,902.28)</u>	-53%
Total Program Restricted Reserves	<u>\$ 3,935,724.38</u>		<u>5,444,902.76</u>	
Total Reserves	<u><u>9,610,632.77</u></u>		<u><u>12,325,870.02</u></u>	

2021 LCDHD Employee Satisfaction Survey

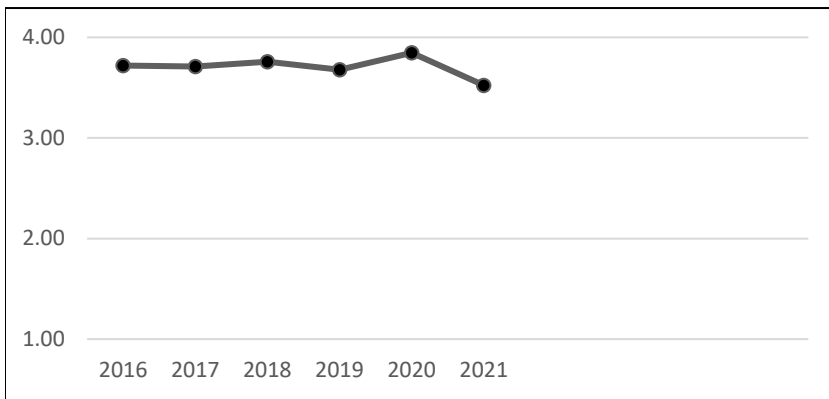
Year	Res	Res Rate	Year	Res	Res Rate	Selection Option	Score
2016	98 of 166	59.0%	2021	97 of 138	70.3%	Strongly Satisfied (SS)	4
2017	80 of 161	49.7%				Satisfied (S)	3
2018	68 of 148	45.9%				Disatisfied (D)	2
2019	69 of 135	51.1%				Strongly Disatisfied (SD)	1
2020	76 of 143	53.1%					

1 Over the last year, have you been satisfied with how Amy C. Tomlinson communicates with employees district-wide?



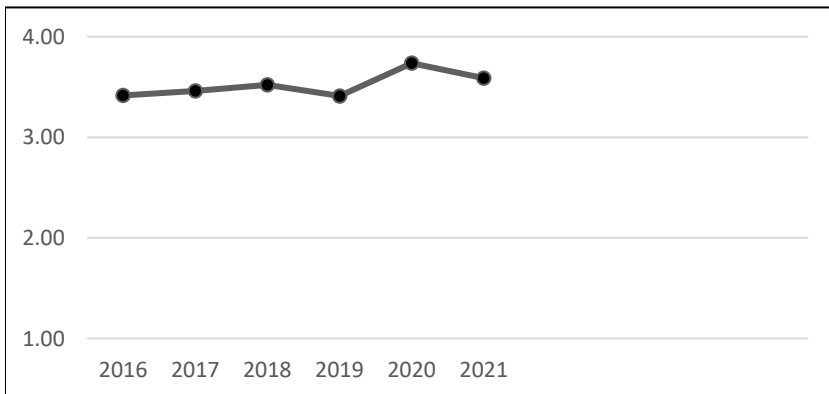
Year	Resp	μ	2021		
			Score	Score	Resp
2016	97	3.40	SS=4	63%	58
2017	78	3.41	S=3	32%	29
2018	66	3.55	D=2	1%	1
2019	64	3.39	SD=1	4%	4
2020	76	3.55			
2021	92	3.53			

2 Over the last year, have you been satisfied in regards to how timely Amy C. Tomlinson has responded to your questions and requests?



Year	Resp	μ	2021		
			Score	Score	Resp
2016	43	3.72	SS=4	67%	28
2017	31	3.71	S=3	24%	10
2018	29	3.76	D=2	5%	2
2019	31	3.68	SD=1	5%	2
2020	39	3.85			
2021	42	3.52			

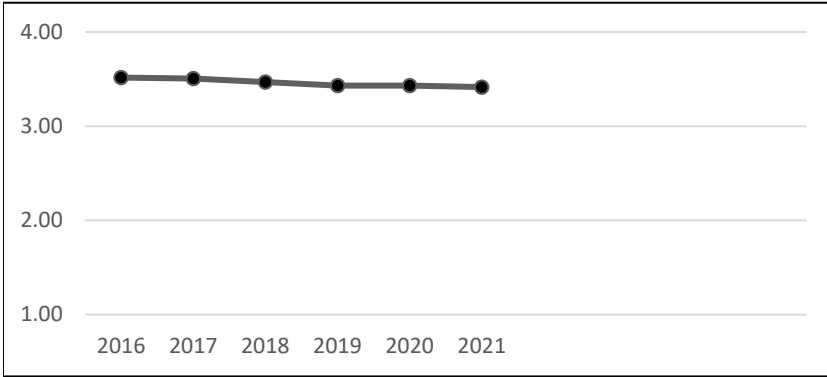
3 Over the last year, have you been satisfied that Amy C. Tomlinson has done a good job?



Year	Resp	μ	2021		
			Score	Score	Resp
2016	96	3.42	SS=4	67%	62
2017	78	3.46	S=3	28%	26
2018	67	3.52	D=2		0
2019	68	3.41	SD=1	4%	4
2020	76	3.74			
2021	92	3.59			

2021 LCDHD Employee Satisfaction Survey

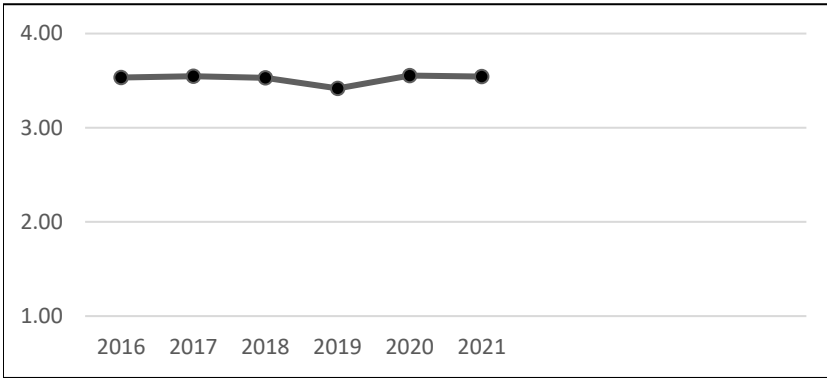
4 Over the last year, have you been satisfied with how your Division Director has communicated within your Division?



Year	Resp	μ
2016	91	3.52
2017	77	3.51
2018	66	3.47
2019	67	3.43
2020	74	3.43
2021	89	3.42

2021		
Score	Score	Resp
SS=4	55%	49
S=3	36%	32
D=2	4%	4
SD=1	4%	4

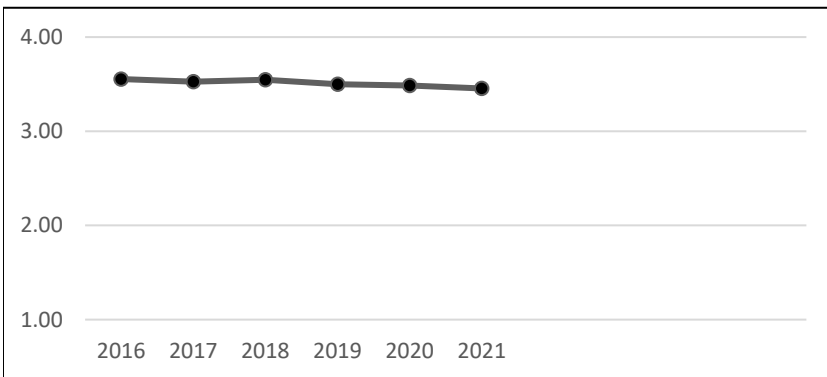
5 Over the last year, have you been satisfied in regards to how timely your Division Director has responded to your questions or requests?



Year	Resp	μ
2016	90	3.53
2017	77	3.55
2018	64	3.53
2019	67	3.42
2020	74	3.55
2021	90	3.54

2021		
Score	Score	Resp
SS=4	60%	54
S=3	37%	33
D=2	1%	1
SD=1	2%	2

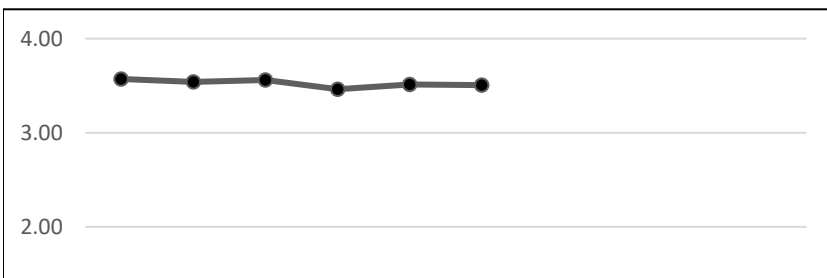
6 I am satisfied that your Division Director appreciates my work.



Year	Resp	μ
2016	92	3.55
2017	76	3.53
2018	64	3.55
2019	66	3.50
2020	74	3.49
2021	88	3.45

2021		
Score	Score	Resp
SS=4	58%	51
S=3	34%	30
D=2	3%	3
SD=1	5%	4

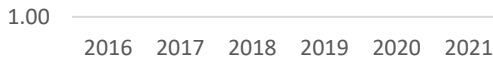
7 Over the last year, have you been satisfied that your Division Director has done a good job?



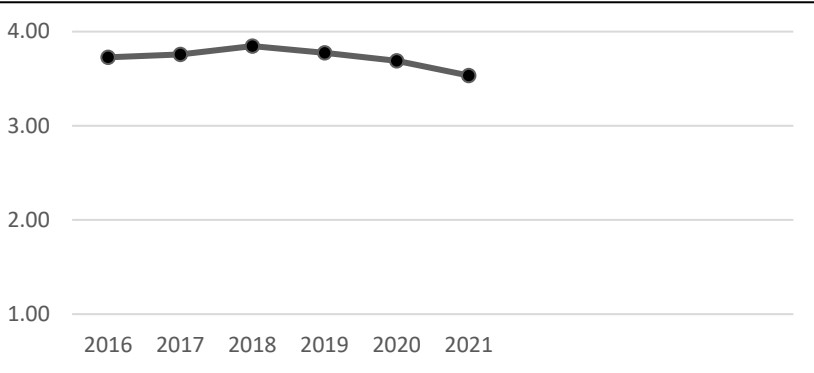
Year	Resp	μ
2016	91	3.57
2017	76	3.54
2018	66	3.56
2019	67	3.46
2020	74	3.51
2021	87	3.51

2021		
Score	Score	Resp
SS=4	60%	52
S=3	34%	30
D=2	2%	2
SD=1	3%	3

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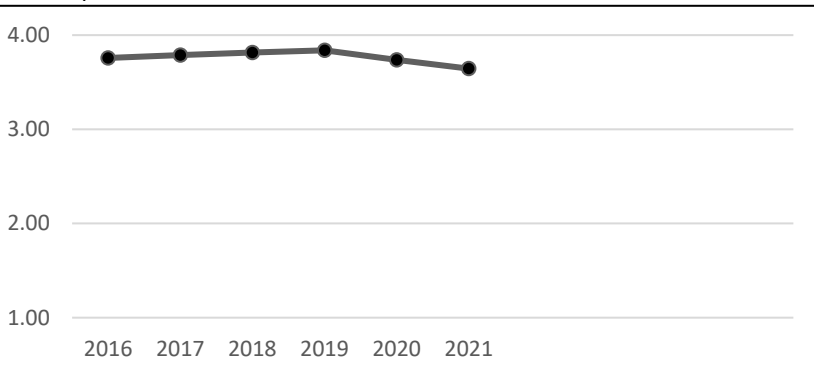
8 Over the last year, have you been satisfied with how your Immediate Supervisor has communicated with you?



Year	Resp	μ
2016	33	3.73
2017	33	3.76
2018	26	3.85
2019	31	3.77
2020	42	3.69
2021	45	3.53

2021		
Score	Score	Resp
SS=4	67%	30
S=3	24%	11
D=2	4%	2
SD=1	4%	2

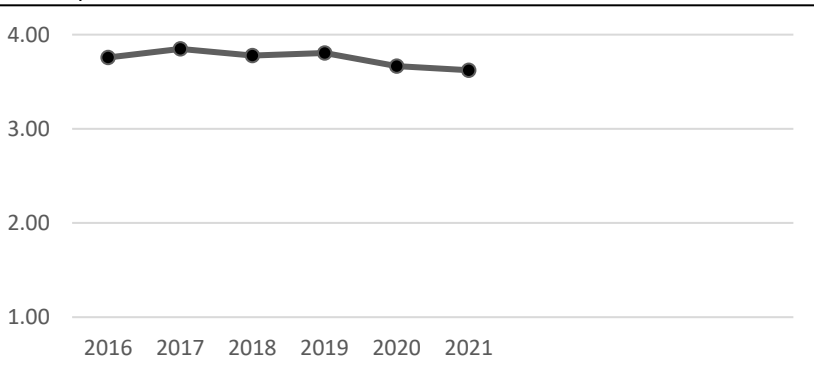
9 Over the last year, have you been satisfied in regards to how timely your Immediate Supervisor has responded to your questions and requests?



Year	Resp	μ
2016	33	3.76
2017	33	3.79
2018	27	3.81
2019	31	3.84
2020	42	3.74
2021	45	3.64

2021		
Score	Score	Resp
SS=4	71%	32
S=3	24%	11
D=2	2%	1
SD=1	2%	1

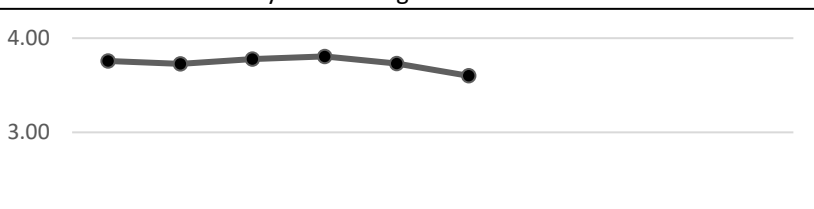
10 Over the last year, have you been satisfied with the comfort level you have felt when making suggestions to your Immediate Supervisor ?



Year	Resp	μ
2016	33	3.76
2017	33	3.85
2018	27	3.78
2019	31	3.81
2020	42	3.67
2021	45	3.62

2021		
Score	Score	Resp
SS=4	73%	33
S=3	20%	9
D=2	2%	1
SD=1	4%	2

11 Over the last year, how satisfied have you been with how your Immediate Supervisor promotes teamwork and comradery across all the divisions within your building?



Year	Resp	μ
2016	33	3.76
2017	33	3.73
2018	27	3.78
2019	31	3.81
2020	41	3.73

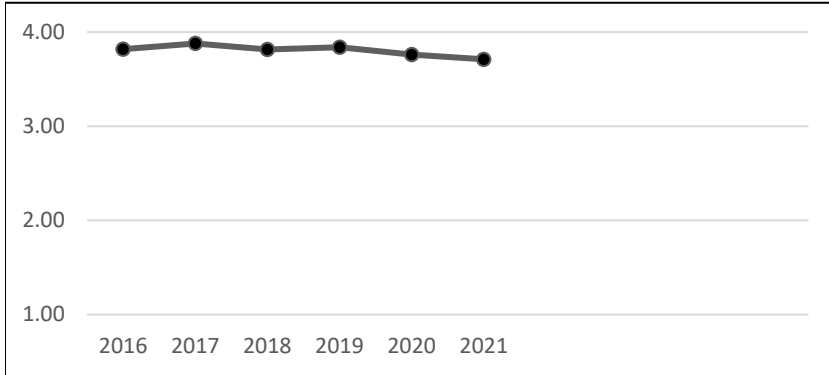
2021		
Score	Score	Resp
SS=4	71%	32
S=3	22%	10
D=2	2%	1
SD=1	4%	2

2021 LCDHD Employee Satisfaction Survey



2021 45 3.60

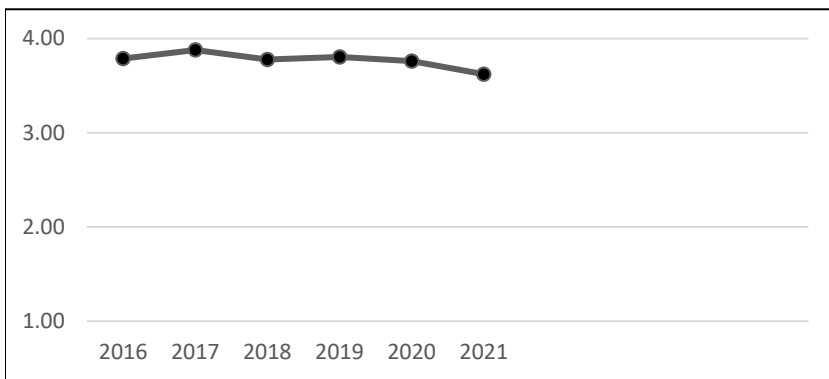
12 Over the last year, how satisfied have you been with your Immediate Supervisor in regards to being understanding of your family and personal issues?



Year	Resp	μ
2016	33	3.82
2017	33	3.88
2018	27	3.81
2019	31	3.84
2020	42	3.76
2021	45	3.71

2021		
Score	Score	Resp
SS=4	78%	35
S=3	18%	8
D=2	2%	1
SD=1	2%	1

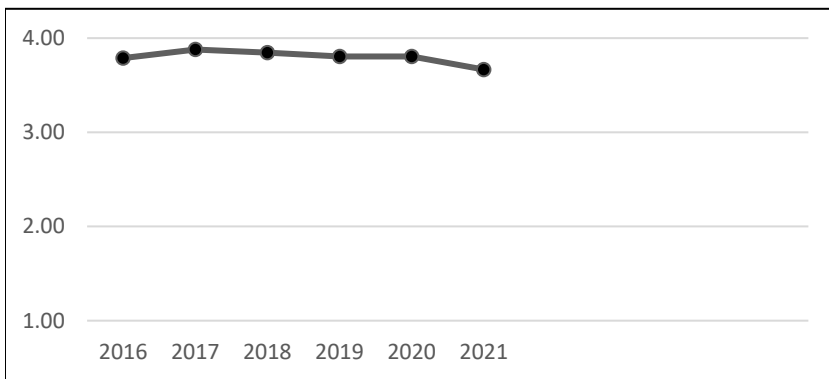
13 I am satisfied that your Immediate Supervisor appreciates my work.



Year	Resp	μ
2016	33	3.79
2017	33	3.88
2018	27	3.78
2019	31	3.81
2020	42	3.76
2021	45	3.62

2021		
Score	Score	Resp
SS=4	76%	34
S=3	18%	8
D=2		0
SD=1	7%	3

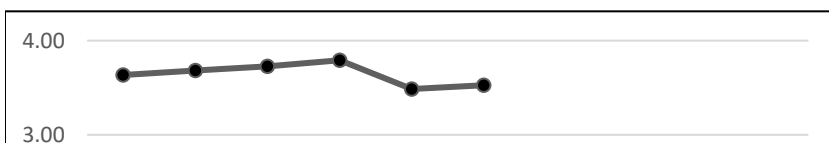
14 Over the last year, have you been satisfied that your Immediate Supervisor is doing a good job?



Year	Resp	μ
2016	33	3.79
2017	33	3.88
2018	26	3.85
2019	31	3.81
2020	41	3.80
2021	45	3.67

2021		
Score	Score	Resp
SS=4	78%	35
S=3	16%	7
D=2	2%	1
SD=1	4%	2

15 Over the last year, how satisfied have you been that your Office Manager has been fair handling building matters.



Year	Resp	μ
2016	22	3.64
2017	22	3.68
2018	22	3.73

2021		
Score	Score	Resp
SS=4	58%	21
S=3	39%	14

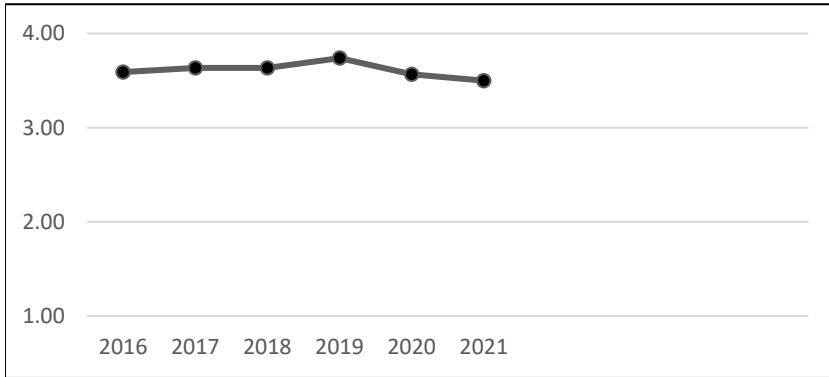
2021 LCDHD Employee Satisfaction Survey



2019	24	3.79
2020	37	3.49
2021	36	3.53

2021		
Score	Score	Resp
D=2		0
SD=1	3%	1

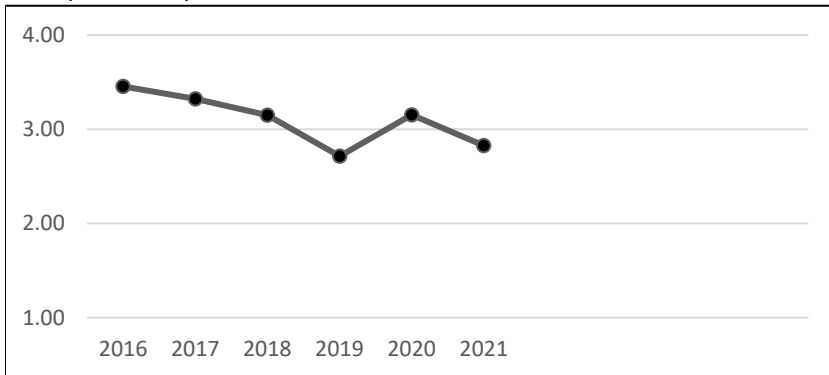
16 Over the last year, how satisfied have you been with how your Office Manager promotes teamwork and comradery across all the divisions within your building?



Year	Resp	μ
2016	22	3.59
2017	22	3.64
2018	22	3.64
2019	23	3.74
2020	37	3.57
2021	34	3.50

2021		
Score	Score	Resp
SS=4	56%	19
S=3	38%	13
D=2	6%	2
SD=1		0

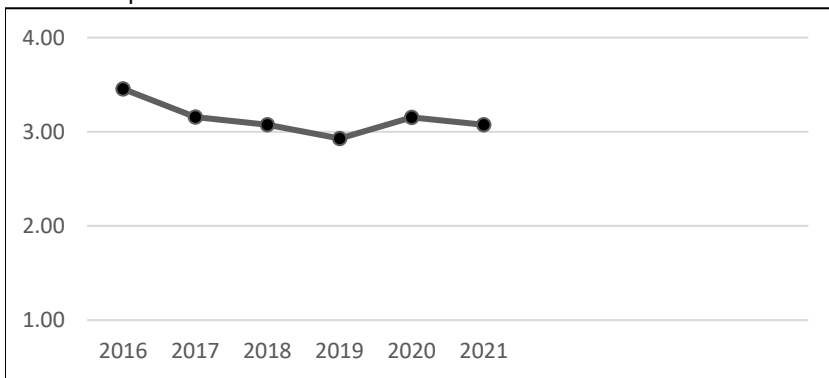
17 Over the last year, how satisfied have you been with the maintenance services provided (filters, heating/cooling, plumbing, etc.) at your headquarters?



Year	Resp	μ
2016	33	3.45
2017	31	3.32
2018	27	3.15
2019	28	2.71
2020	26	3.15
2021	40	2.83

2021		
Score	Score	Resp
SS=4	23%	9
S=3	40%	16
D=2	35%	14
SD=1	3%	1

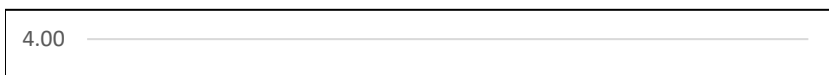
18 Over the last year, how satisfied have you been with the level of housekeeping (daily cleaning) of the equipment and facilities at your headquarters?



Year	Resp	μ
2016	33	3.45
2017	32	3.16
2018	27	3.07
2019	28	2.93
2020	26	3.15
2021	41	3.07

2021		
Score	Score	Resp
SS=4	29%	12
S=3	54%	22
D=2	12%	5
SD=1	5%	2

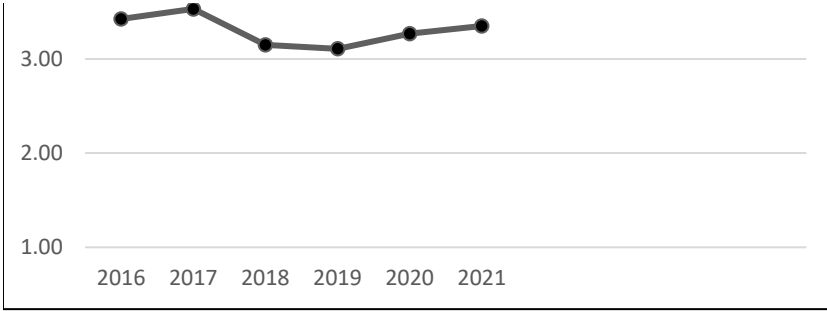
19 Over the last year, how satisfied have you been with the grounds keeping (lawn, shrubs, weeds, etc.) at your headquarters?



Year	Resp	μ
2016	33	3.42

2021		
Score	Score	Resp
D=2		0
SD=1		0

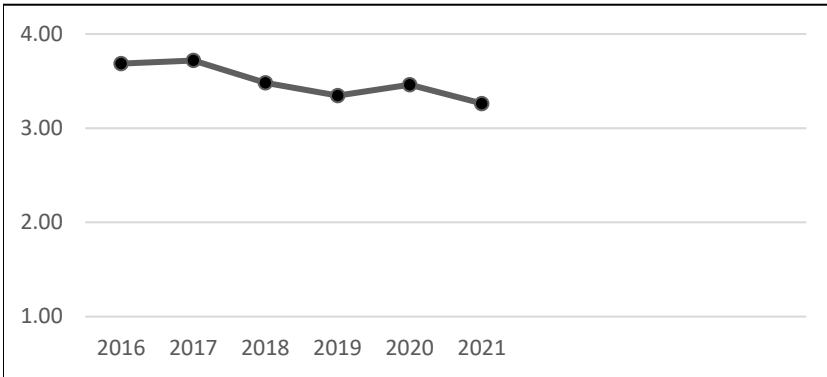
2021 LCDHD Employee Satisfaction Survey



2017	32	3.53
2018	27	3.15
2019	28	3.11
2020	26	3.27
2021	40	3.35

2021		
Score	Score	Resp
SS=4	40%	16
S=3	58%	23
D=2		0
SD=1	3%	1

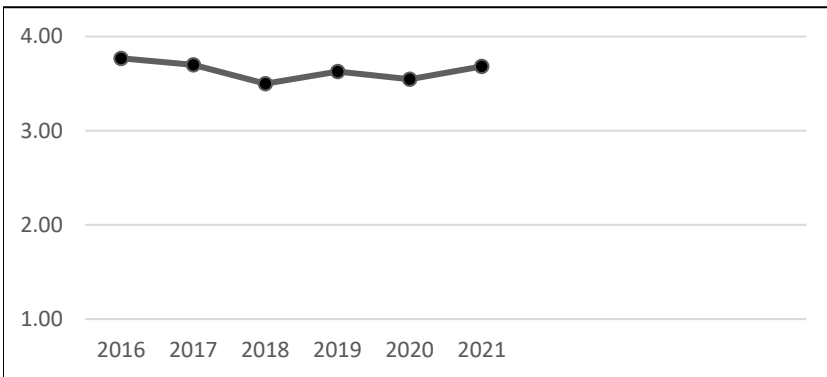
20 Over the past year, how satisfied have you been with the courtesy and professionalism of the maintenance/janitorial/cleaning staff?



Year	Resp	μ
2016	32	3.69
2017	32	3.72
2018	27	3.48
2019	26	3.35
2020	26	3.46
2021	38	3.26

2021		
Score	Score	Resp
SS=4	37%	14
S=3	55%	21
D=2	5%	2
SD=1	3%	1

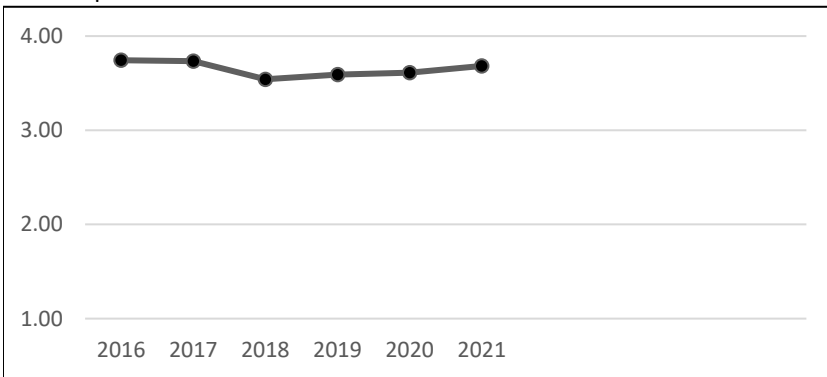
21 Over the last year, have you been satisfied with how the Financial Office has communicated with you?



Year	Resp	μ
2016	39	3.77
2017	30	3.70
2018	24	3.50
2019	27	3.63
2020	31	3.55
2021	41	3.68

2021		
Score	Score	Resp
SS=4	68%	28
S=3	32%	13
D=2		0
SD=1		0

22 Over the last year, have you been satisfied in regards to how timely the Financial Office has responded to your questions and requests?

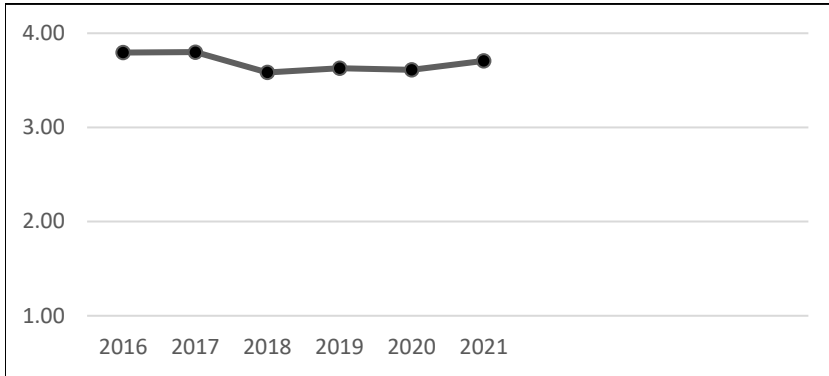


Year	Resp	μ
2016	39	3.74
2017	30	3.73
2018	24	3.54
2019	27	3.59
2020	31	3.61
2021	41	3.68

2021		
Score	Score	Resp
SS=4	68%	28
S=3	32%	13
D=2		0
SD=1		0

23 Over the past year, how satisfied have you been with the courtesy and professionalism of the Financial Office?

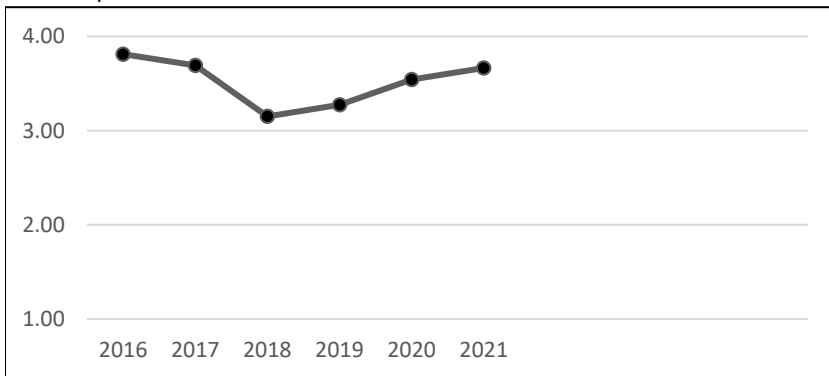
2021 LCDHD Employee Satisfaction Survey



Year	Resp	μ
2016	39	3.79
2017	30	3.80
2018	24	3.58
2019	27	3.63
2020	31	3.61
2021	41	3.71

2021		
Score	Score	Resp
SS=4	71%	29
S=3	29%	12
D=2		0
SD=1		0

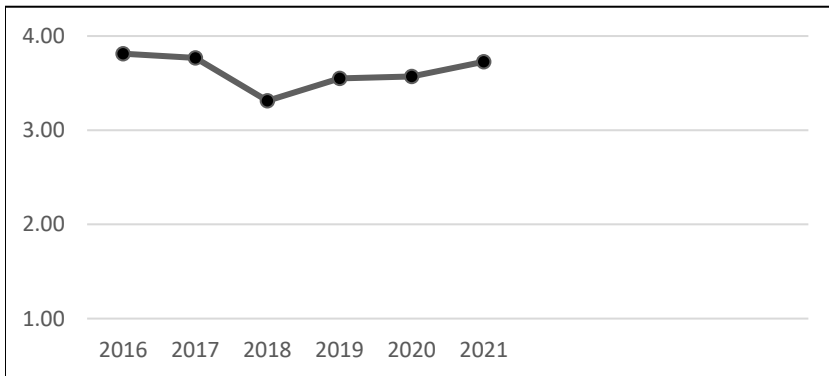
24 Over the last year, have you been satisfied in regards to how timely the Purchasing Department has responded to your questions and requests?



Year	Resp	μ
2016	48	3.81
2017	39	3.69
2018	33	3.15
2019	29	3.28
2020	35	3.54
2021	51	3.67

2021		
Score	Score	Resp
SS=4	67%	34
S=3	33%	17
D=2		0
SD=1		0

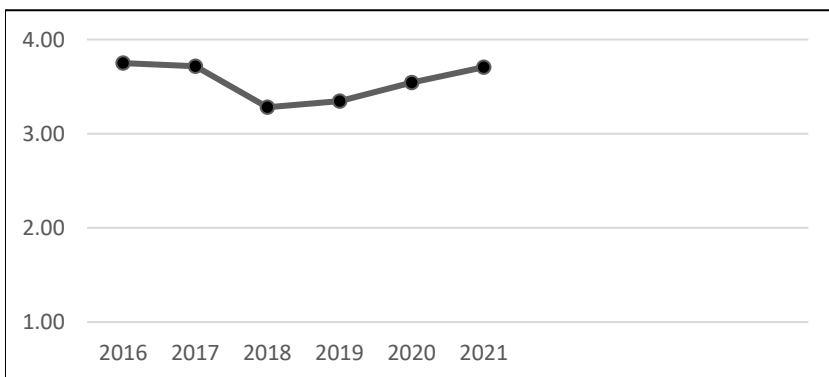
25 Over the past year, how satisfied have you been with the courtesy and professionalism of the Purchasing Department?



Year	Resp	μ
2016	48	3.81
2017	39	3.77
2018	32	3.31
2019	29	3.55
2020	35	3.57
2021	51	3.73

2021		
Score	Score	Resp
SS=4	73%	37
S=3	27%	14
D=2		0
SD=1		0

26 Over the past year, have you been satisfied the Purchasing Department has done a good job?

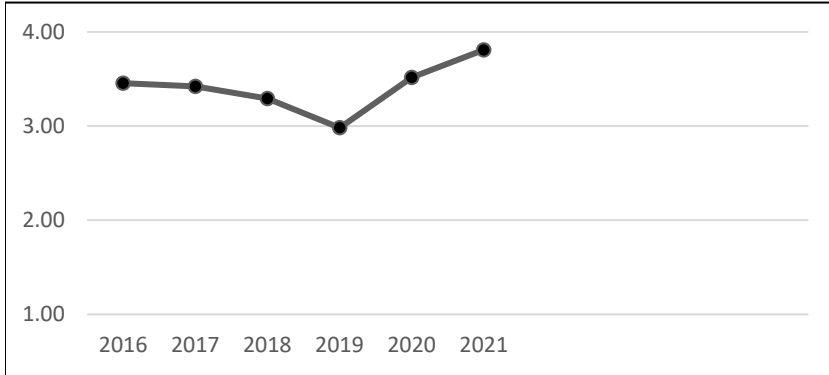


Year	Resp	μ
2016	48	3.75
2017	39	3.72
2018	32	3.28
2019	29	3.34
2020	35	3.54
2021	51	3.71

2021		
Score	Score	Resp
SS=4	71%	36
S=3	29%	15
D=2		0
SD=1		0

2021 LCDHD Employee Satisfaction Survey

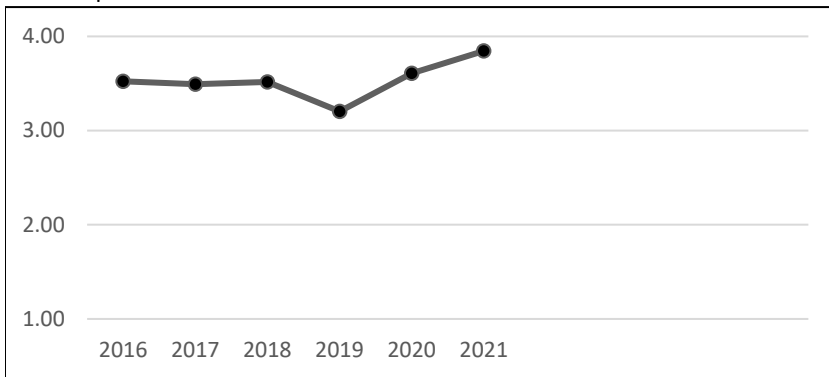
27 Over the last year, have you been satisfied in regards to how timely the Information Technology (I.T.) Department has responded to your questions and requests?



Year	Resp	μ
2016	92	3.46
2017	69	3.42
2018	58	3.29
2019	54	2.98
2020	56	3.52
2021	84	3.81

2021		
Score	Score	Resp
SS=4	82%	69
S=3	17%	14
D=2	1%	1
SD=1		0

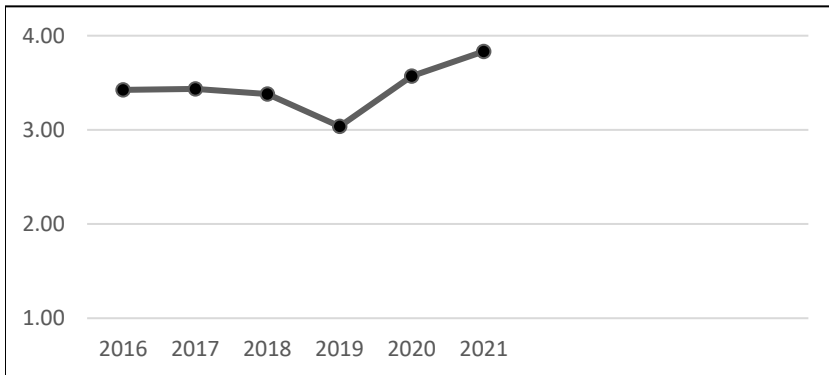
28 Over the past year, how satisfied have you been with the courtesy and professionalism of the Information Technology (I.T.) Department?



Year	Resp	μ
2016	92	3.52
2017	69	3.49
2018	58	3.52
2019	54	3.20
2020	56	3.61
2021	84	3.85

2021		
Score	Score	Resp
SS=4	85%	71
S=3	15%	13
D=2		0
SD=1		0

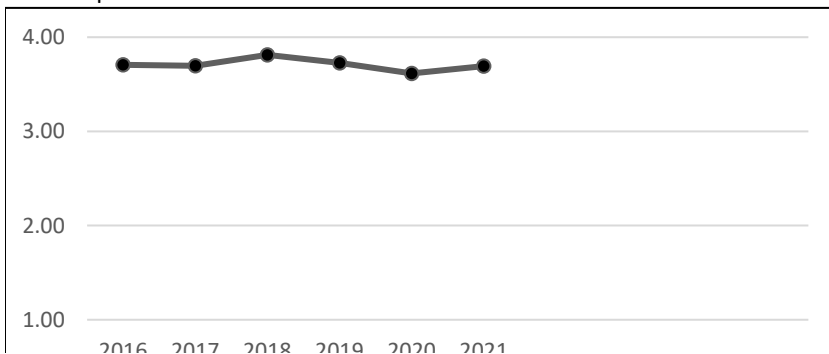
29 Over the past year, have you been satisfied the Information Technology (I.T.) Department has done a good job?



Year	Resp	μ
2016	92	3.42
2017	69	3.43
2018	58	3.38
2019	54	3.04
2020	56	3.57
2021	84	3.83

2021		
Score	Score	Resp
SS=4	85%	71
S=3	14%	12
D=2	1%	1
SD=1		0

30 Over the last year, have you been satisfied in regards to how timely the Payroll Department has responded to your questions and requests?



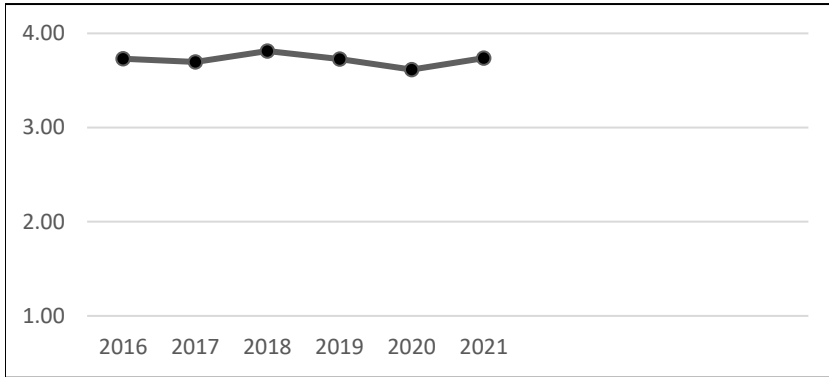
Year	Resp	μ
2016	41	3.71
2017	33	3.70
2018	32	3.81
2019	22	3.73
2020	26	3.62
2021	39	3.69

2021		
Score	Score	Resp
SS=4	69%	27
S=3	31%	12
D=2		0
SD=1		0

2021 LCDHD Employee Satisfaction Survey

2016 2017 2018 2019 2020 2021

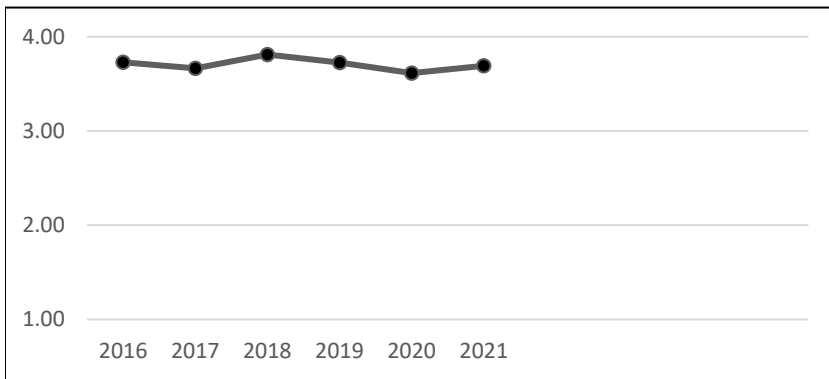
31 Over the past year, how satisfied have you been with the courtesy and professionalism of the Payroll Department?



Year	Resp	μ
2016	41	3.73
2017	33	3.70
2018	32	3.81
2019	22	3.73
2020	26	3.62
2021	38	3.74

2021		
Score	Score	Resp
SS=4	74%	28
S=3	26%	10
D=2		0
SD=1		0

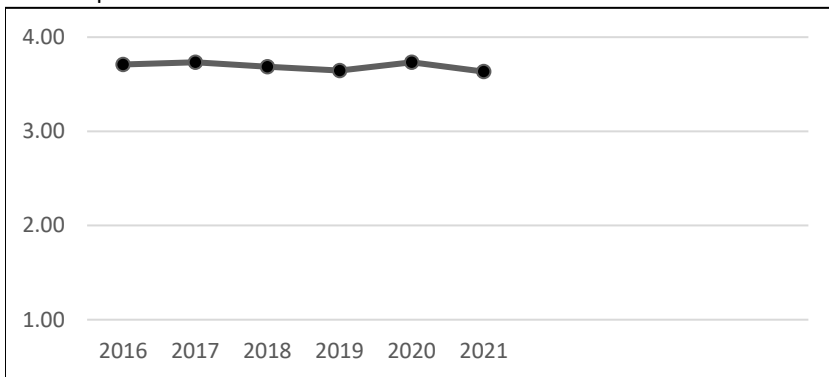
32 Over the past year, have you been satisfied the Payroll Department has done a good job?



Year	Resp	μ
2016	41	3.73
2017	33	3.67
2018	32	3.81
2019	22	3.73
2020	26	3.62
2021	39	3.69

2021		
Score	Score	Resp
SS=4	69%	27
S=3	31%	12
D=2		0
SD=1		0

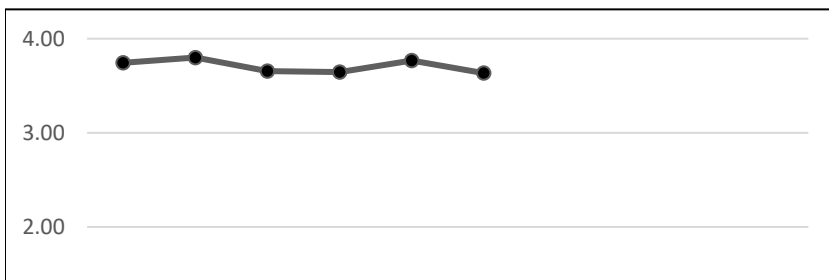
33 Over the last year, have you been satisfied in regards to how timely the Personnel Department has responded to your questions and requests?



Year	Resp	μ
2016	55	3.71
2017	45	3.73
2018	35	3.69
2019	31	3.65
2020	30	3.73
2021	41	3.63

2021		
Score	Score	Resp
SS=4	63%	26
S=3	37%	15
D=2		0
SD=1		0

34 Over the past year, how satisfied have you been with the courtesy and professionalism of the Personnel Department?



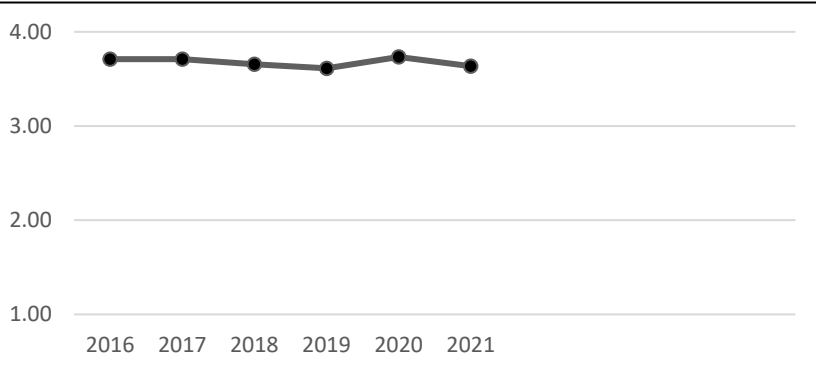
Year	Resp	μ
2016	55	3.75
2017	45	3.80
2018	35	3.66
2019	31	3.65
2020	30	3.77
2021	41	3.63

2021		
Score	Score	Resp
SS=4	63%	26
S=3	37%	15
D=2		0
SD=1		0

2021 LCDHD Employee Satisfaction Survey

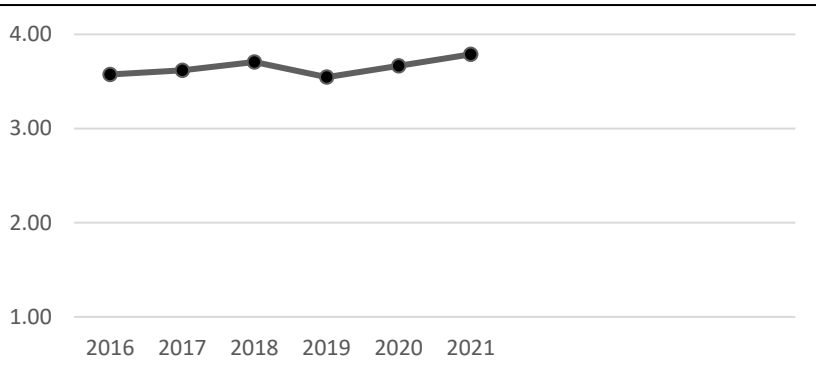


35 Over the past year, have you been satisfied the Personnel Department has done a good job?



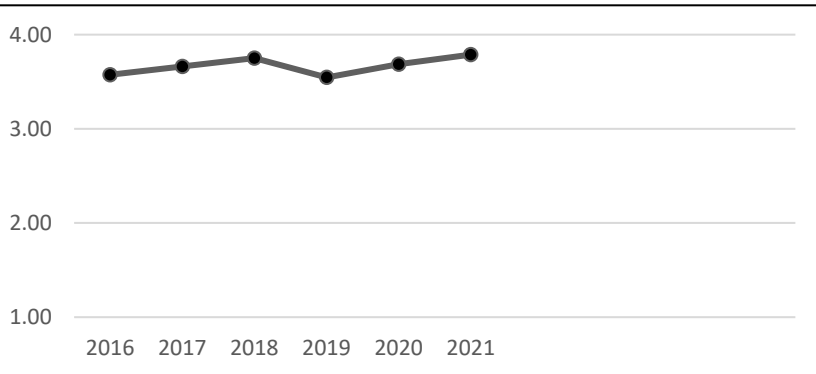
2021		
Score	Score	Resp
SS=4	63%	26
S=3	37%	15
D=2		0
SD=1		0

36 Over the past year, how satisfied have you been with the courtesy and professionalism of the Clinic Nursing Staff?



2021		
Score	Score	Resp
SS=4	79%	52
S=3	21%	14
D=2		0
SD=1		0

37 Over the past year, have you been satisfied the Clinic Nursing Staff have done a good job?



2021		
Score	Score	Resp
SS=4	79%	52
S=3	21%	14
D=2		0
SD=1		0

38 Are you satisfied the Clinic Nursing Staff are making a positive impact in your community?



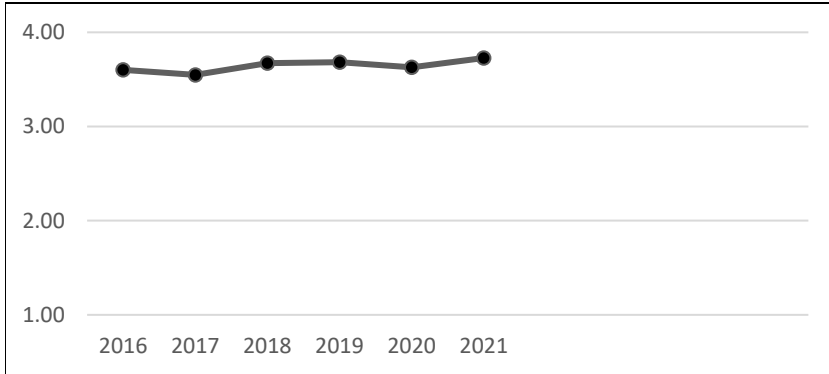
2021		
Score	Score	Resp
SS=4	77%	51
S=3	23%	15
D=2		0
SD=1		0

2021 LCDHD Employee Satisfaction Survey



2021 66 3.77

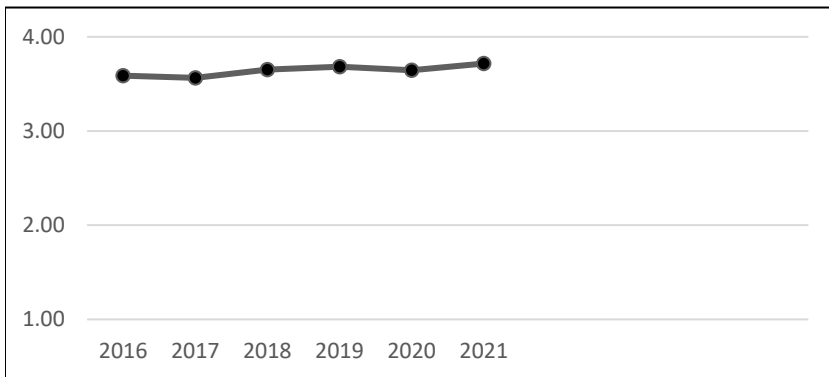
39 Over the past year, how satisfied have you been with the courtesy and professionalism of the Clinic Clerical Staff?



Year	Resp	μ
2016	73	3.60
2017	62	3.55
2018	46	3.67
2019	41	3.68
2020	51	3.63
2021	66	3.73

2021		
Score	Score	Resp
SS=4	73%	48
S=3	27%	18
D=2		0
SD=1		0

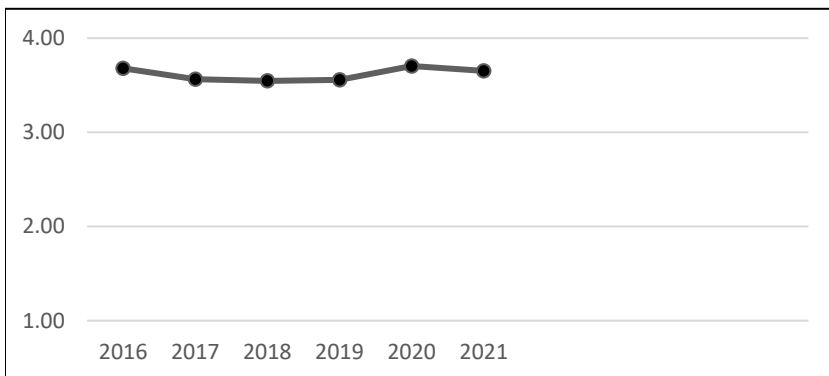
40 Over the past year, have you been satisfied the Clinic Clerical Staff have done a good job?



Year	Resp	μ
2016	73	3.59
2017	62	3.56
2018	46	3.65
2019	41	3.68
2020	51	3.65
2021	67	3.72

2021		
Score	Score	Resp
SS=4	72%	48
S=3	28%	19
D=2		0
SD=1		0

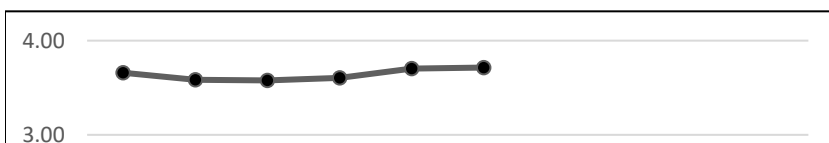
41 Over the past year, how satisfied have you been with the courtesy and professionalism of the HANDS Staff?



Year	Resp	μ
2016	56	3.68
2017	48	3.56
2018	44	3.55
2019	43	3.56
2020	54	3.70
2021	63	3.65

2021		
Score	Score	Resp
SS=4	65%	41
S=3	35%	22
D=2		0
SD=1		0

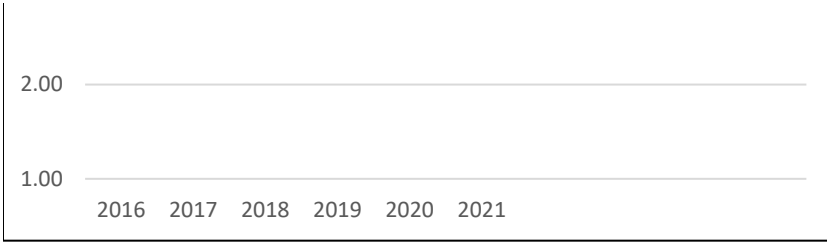
42 Over the past year, have you been satisfied the HANDS Staff have done a good job?



Year	Resp	μ
2016	56	3.66
2017	48	3.58
2018	45	3.58

2021		
Score	Score	Resp
SS=4	71%	45
S=3	29%	18

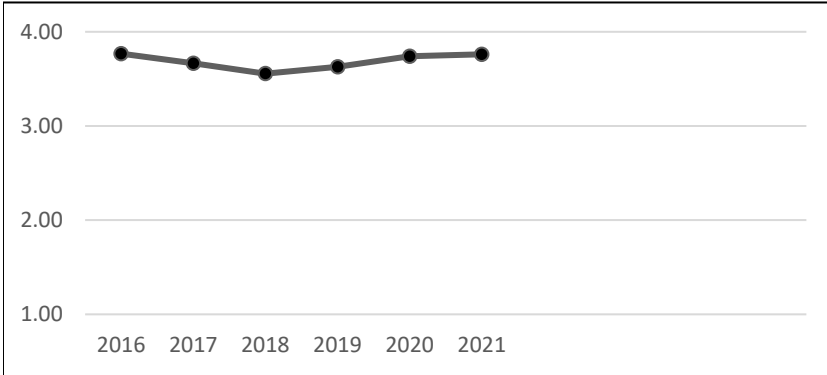
2021 LCDHD Employee Satisfaction Survey



2019	43	3.60
2020	54	3.70
2021	63	3.71

2021		
Score	Score	Resp
D=2		0
SD=1		0

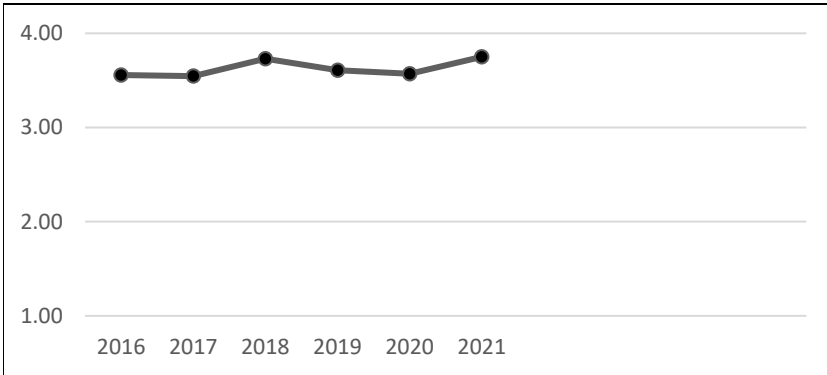
43 Are you satisfied the HANDS Staff are making a positive impact in your community?



Year	Resp	μ
2016	56	3.77
2017	48	3.67
2018	45	3.56
2019	43	3.63
2020	54	3.74
2021	63	3.76

2021		
Score	Score	Resp
SS=4	76%	48
S=3	24%	15
D=2		0
SD=1		0

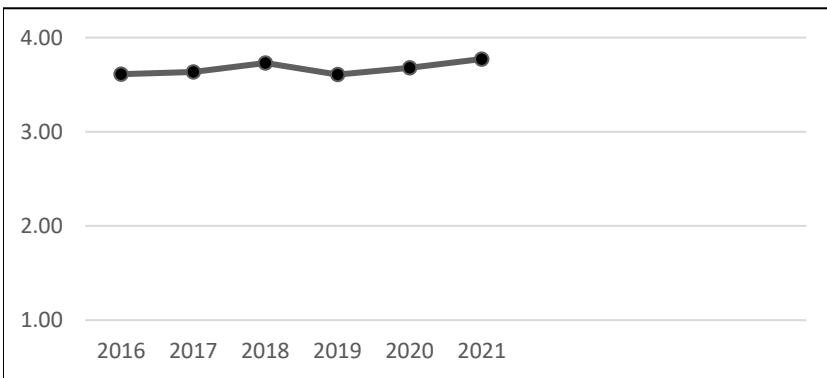
44 Over the past year, how satisfied have you been with the courtesy and professionalism of the Health Policy and Promotion (Health Education) Staff?



Year	Resp	μ
2016	36	3.56
2017	33	3.55
2018	37	3.73
2019	28	3.61
2020	28	3.57
2021	44	3.75

2021		
Score	Score	Resp
SS=4	80%	35
S=3	18%	8
D=2		0
SD=1	2%	1

45 Over the past year, have you been satisfied the Health Policy and Promotion (Health Education) Staff have done a good job?



Year	Resp	μ
2016	36	3.61
2017	33	3.64
2018	37	3.73
2019	28	3.61
2020	28	3.68
2021	44	3.77

2021		
Score	Score	Resp
SS=4	77%	34
S=3	23%	10
D=2		0
SD=1		0

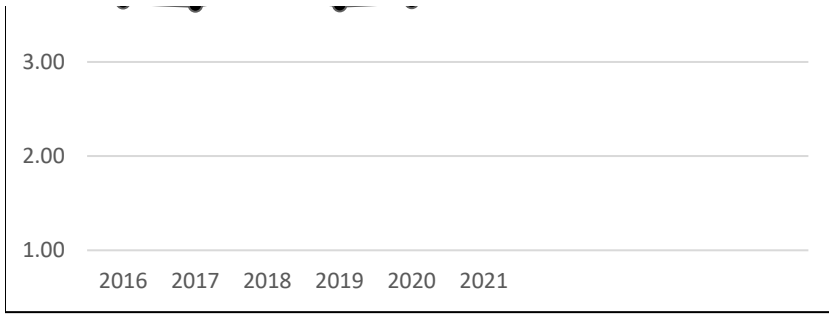
46 Are you satisfied the Health Policy and Promotion (Health Education) Staff are making a positive impact in your community?



Year	Resp	μ
2016	36	3.64

2021		
Score	Score	Resp
D=2		0
SD=1		0

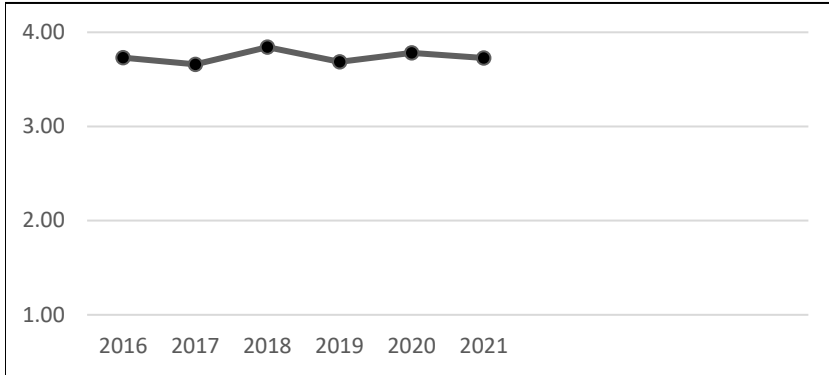
2021 LCDHD Employee Satisfaction Survey



2017	33	3.61
2018	37	3.73
2019	28	3.61
2020	28	3.64
2021	44	3.73

2021		
Score	Score	Resp
SS=4	75%	33
S=3	23%	10
D=2	2%	1
SD=1		0

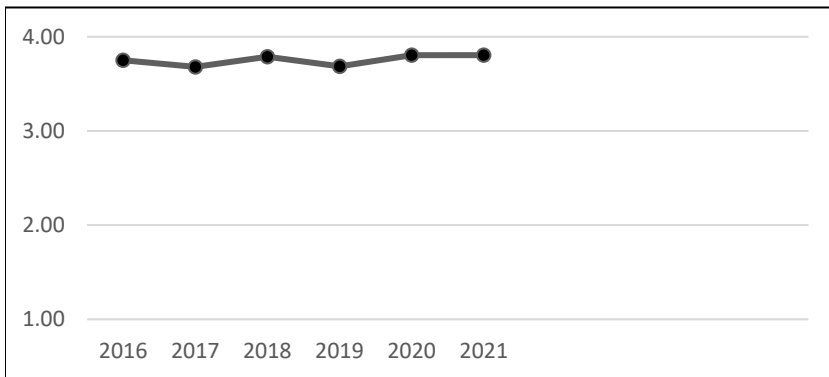
47 Over the past year, how satisfied have you been with the courtesy and professionalism of the Environmental Staff?



Year	Resp	μ
2016	48	3.73
2017	47	3.66
2018	38	3.84
2019	35	3.69
2020	41	3.78
2021	51	3.73

2021		
Score	Score	Resp
SS=4	73%	37
S=3	27%	14
D=2		0
SD=1		0

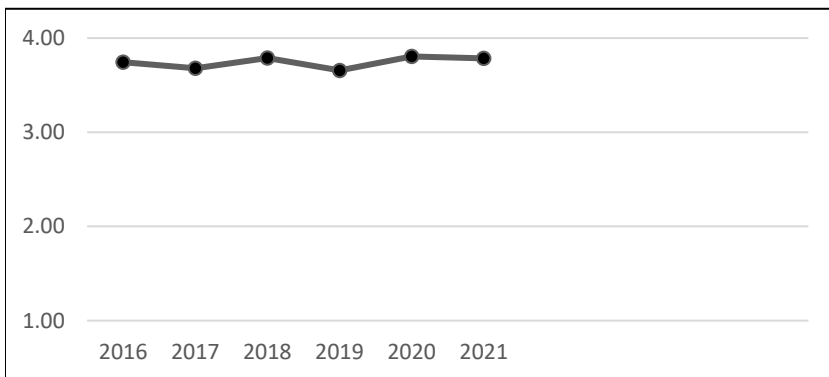
48 Over the past year, have you been satisfied the Environmental Staff have done a good job?



Year	Resp	μ
2016	48	3.75
2017	47	3.68
2018	38	3.79
2019	35	3.69
2020	41	3.80
2021	51	3.80

2021		
Score	Score	Resp
SS=4	80%	41
S=3	20%	10
D=2		0
SD=1		0

49 Are you satisfied the Environmental Staff are making a positive impact in your community?

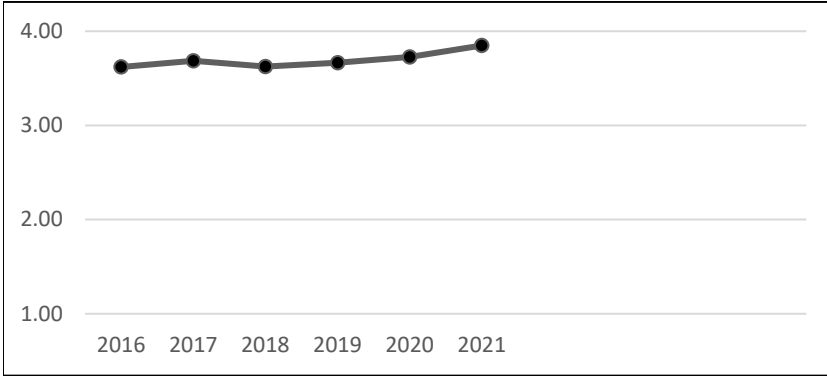


Year	Resp	μ
2016	47	3.74
2017	47	3.68
2018	38	3.79
2019	35	3.66
2020	41	3.80
2021	51	3.78

2021		
Score	Score	Resp
SS=4	78%	40
S=3	22%	11
D=2		0
SD=1		0

50 Over the past year, how satisfied have you been with the courtesy and professionalism of the Diabetes Staff?

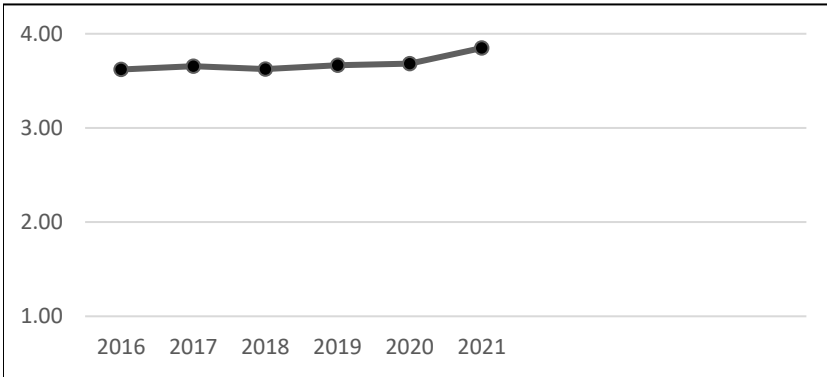
2021 LCDHD Employee Satisfaction Survey



Year	Resp	μ
2016	29	3.62
2017	32	3.69
2018	24	3.63
2019	21	3.67
2020	22	3.73
2021	33	3.85

2021		
Score	Score	Resp
SS=4	85%	28
S=3	15%	5
D=2		0
SD=1		0

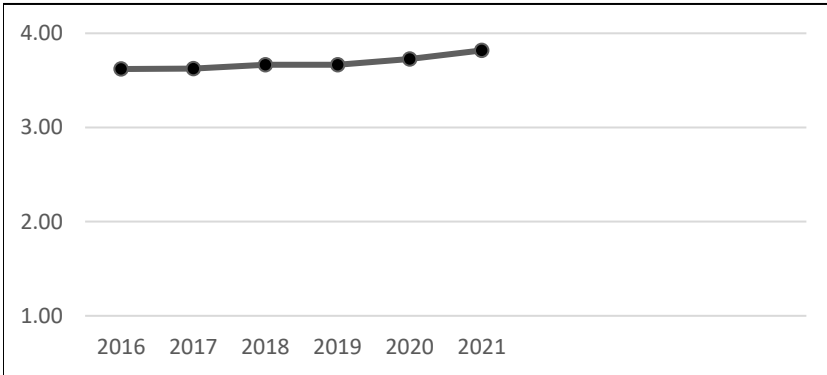
51 Over the past year, have you been satisfied the Diabetes Staff have done a good job?



Year	Resp	μ
2016	29	3.62
2017	32	3.66
2018	24	3.63
2019	21	3.67
2020	22	3.68
2021	33	3.85

2021		
Score	Score	Resp
SS=4	85%	28
S=3	15%	5
D=2		0
SD=1		0

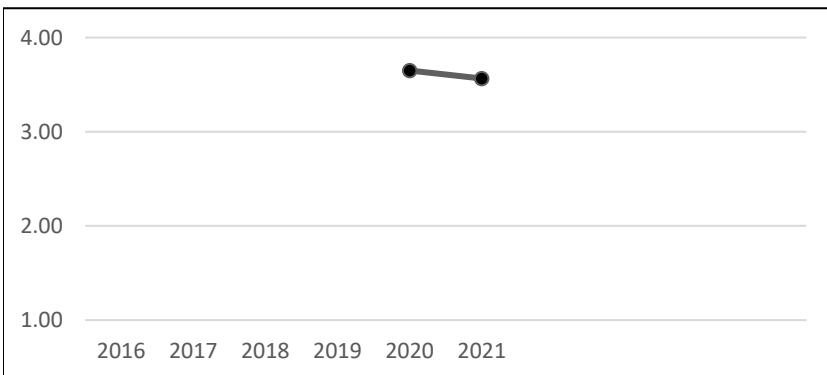
52 Are you satisfied the Diabetes Staff are making a positive impact in your community?



Year	Resp	μ
2016	29	3.62
2017	32	3.63
2018	24	3.67
2019	21	3.67
2020	22	3.73
2021	33	3.82

2021		
Score	Score	Resp
SS=4	82%	27
S=3	18%	6
D=2		0
SD=1		0

53 Over the past year, how satisfied have you been with the courtesy and professionalism of the RHOP Staff?

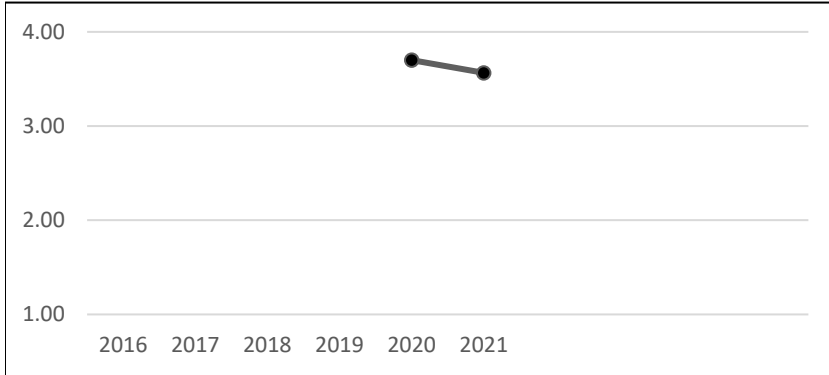


Year	Resp	μ
2016		
2017		
2018		
2019		
2020	20	3.65
2021	23	3.57

2021		
Score	Score	Resp
SS=4	57%	13
S=3	43%	10
D=2		0
SD=1		0

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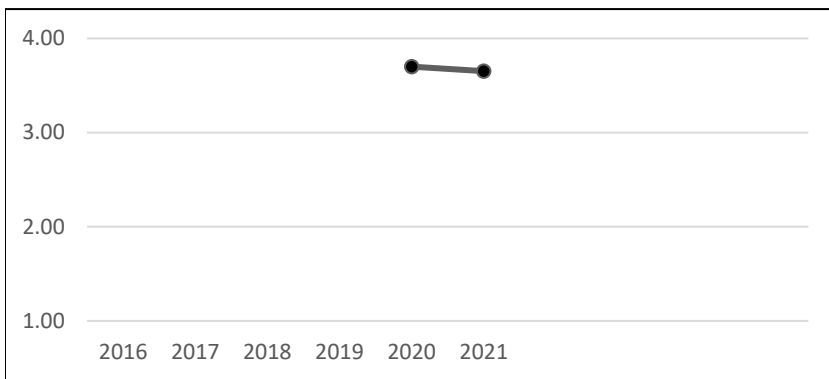
54 Over the past year, have you been satisfied the RHOP Staff have done a good job?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	20	3.70
2021	23	3.57

2021		
Score	Score	Resp
SS=4	57%	13
S=3	43%	10
D=2		0
SD=1		0

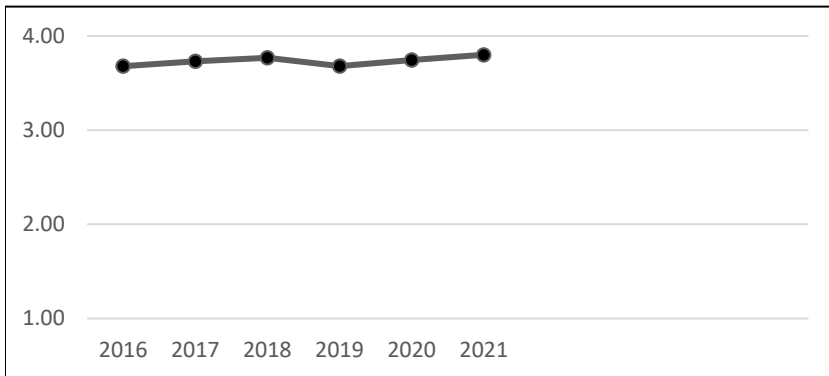
55 Are you satisfied the RHOP Staff are making a positive impact in your community?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	20	3.70
2021	23	3.65

2021		
Score	Score	Resp
SS=4	65%	15
S=3	35%	8
D=2		0
SD=1		0

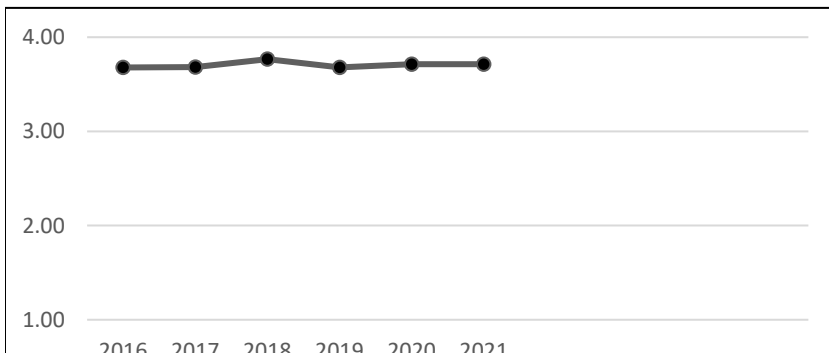
56 Over the past year, how satisfied have you been with the courtesy and professionalism of the Preparedness Staff?



Year	Resp	μ
2016	28	3.68
2017	41	3.73
2018	30	3.77
2019	25	3.68
2020	35	3.74
2021	35	3.80

2021		
Score	Score	Resp
SS=4	80%	28
S=3	20%	7
D=2		0
SD=1		0

57 Over the past year, have you been satisfied the Preparedness Staff have done a good job?



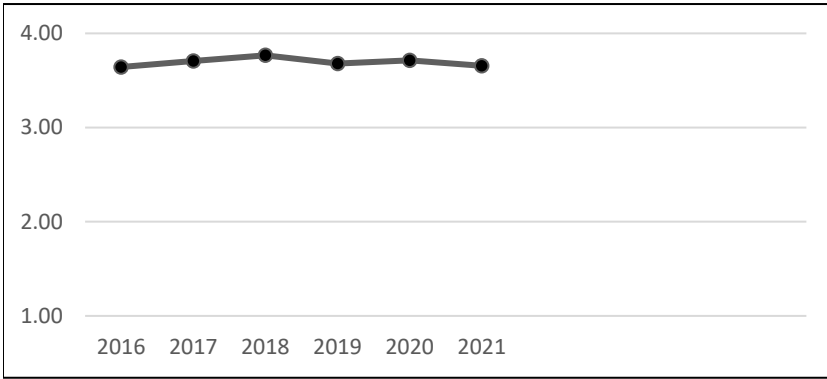
Year	Resp	μ
2016	28	3.68
2017	41	3.68
2018	30	3.77
2019	25	3.68
2020	35	3.71
2021	35	3.71

2021		
Score	Score	Resp
SS=4	77%	27
S=3	20%	7
D=2		0
SD=1	3%	1

2021 LCDHD Employee Satisfaction Survey

2016 2017 2018 2019 2020 2021

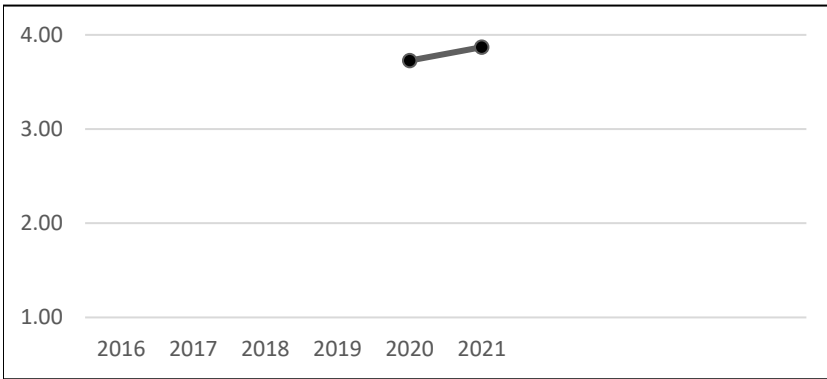
58 Are you satisfied the Preparedness Staff are making a positive impact in your community?



Year	Resp	μ
2016	28	3.64
2017	41	3.71
2018	30	3.77
2019	25	3.68
2020	35	3.71
2021	35	3.66

2021		
Score	Score	Resp
SS=4	71%	25
S=3	26%	9
D=2		0
SD=1	3%	1

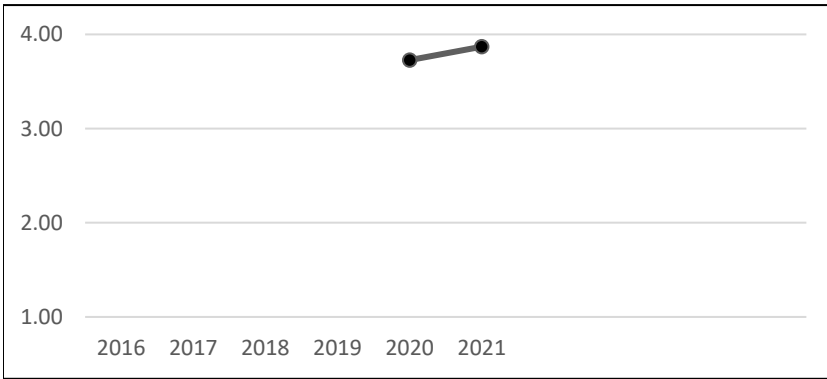
59 Over the past year, how satisfied have you been with the courtesy and professionalism of the Ryan White Staff?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	22	3.73
2021	23	3.87

2021		
Score	Score	Resp
SS=4	87%	20
S=3	13%	3
D=2		0
SD=1		0

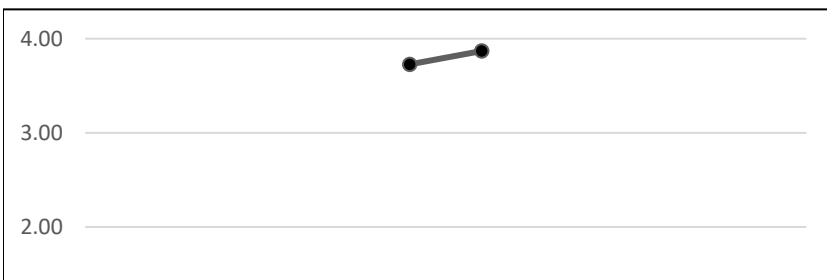
60 Over the past year, have you been satisfied the Ryan White Staff have done a good job?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	22	3.73
2021	23	3.87

2021		
Score	Score	Resp
SS=4	87%	20
S=3	13%	3
D=2		0
SD=1		0

61 Are you satisfied the Ryan White Staff are making a positive impact in your community?



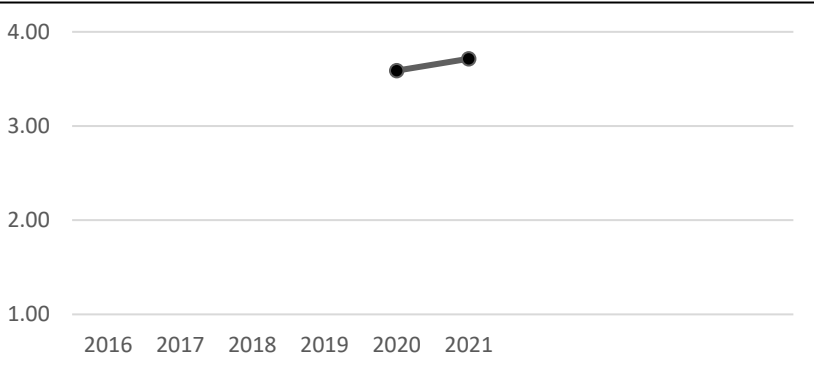
Year	Resp	μ
2016		
2017		
2018		
2019		
2020	22	3.73
2021	23	3.87

2021		
Score	Score	Resp
SS=4	87%	20
S=3	13%	3
D=2		0
SD=1		0

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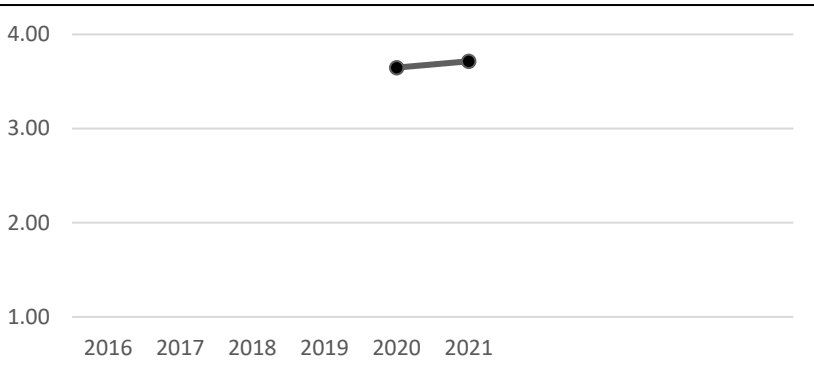
62 Over the past year, how satisfied have you been with the courtesy and professionalism of the Accreditation/QI Staff?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	17	3.59
2021	21	3.71

2021		
Score	Score	Resp
SS=4	71%	15
S=3	29%	6
D=2		0
SD=1		0

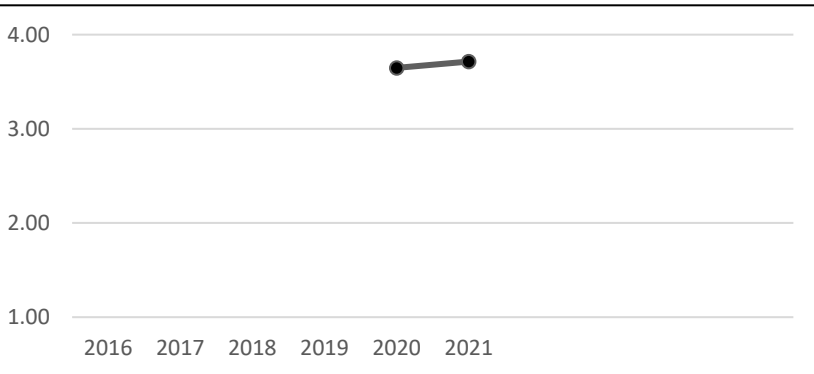
63 Over the past year, have you been satisfied the Accreditation/QI Staff have done a good job?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	17	3.65
2021	21	3.71

2021		
Score	Score	Resp
SS=4	71%	15
S=3	29%	6
D=2		0
SD=1		0

64 Are you satisfied the Accreditation/QI Staff are making a positive impact in your community?



Year	Resp	μ
2016		
2017		
2018		
2019		
2020	17	3.65
2021	21	3.71

2021		
Score	Score	Resp
SS=4	71%	15
S=3	29%	6
D=2		0
SD=1		0

65 Over the past year, have you been satisfied with the physical facilities where you work?



Year	Resp	μ
2016	98	3.40
2017	79	3.42
2018	68	3.43
2019	69	3.25
2020	75	3.51

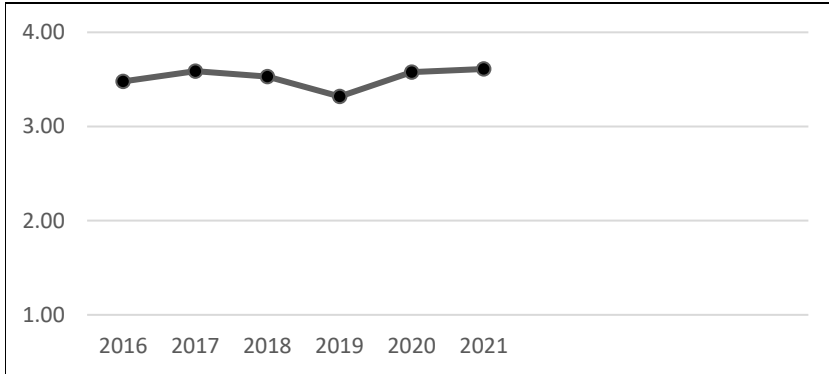
2021		
Score	Score	Resp
SS=4	48%	45
S=3	48%	45
D=2	2%	2
SD=1	2%	2

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2021 94 3.41

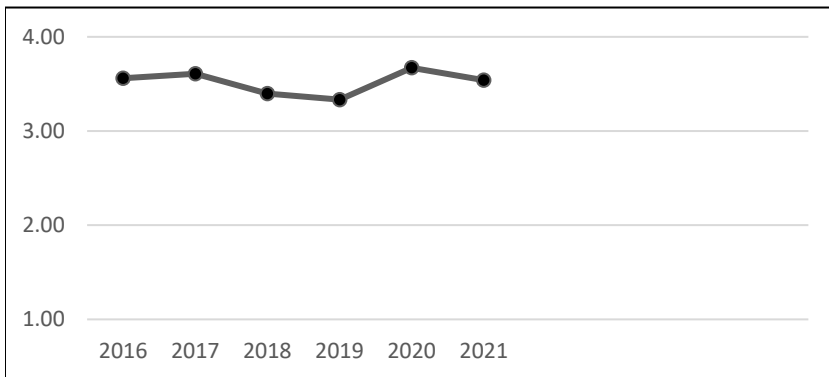
66 Over the past year, have you been satisfied you have been provided the supplies necessary to do your job?



Year	Resp	μ
2016	98	3.48
2017	80	3.59
2018	68	3.53
2019	69	3.32
2020	76	3.58
2021	95	3.61

2021		
Score	Score	Resp
SS=4	62%	59
S=3	37%	35
D=2	1%	1
SD=1		0

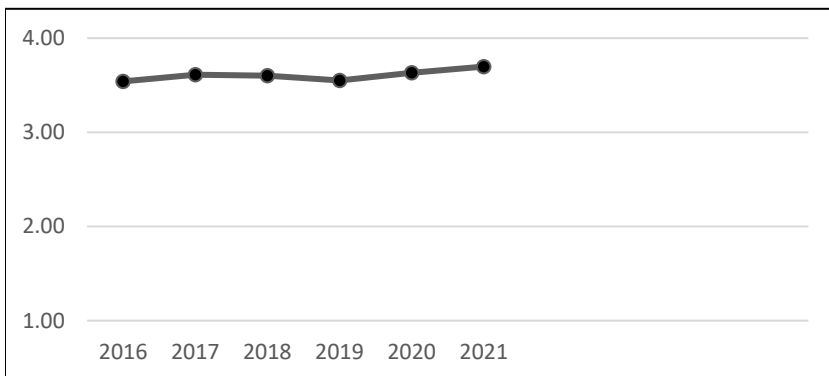
67 Over the past year, have you been satisfied you have been provided a safe work environment?



Year	Resp	μ
2016	98	3.56
2017	79	3.61
2018	68	3.40
2019	69	3.33
2020	76	3.67
2021	96	3.54

2021		
Score	Score	Resp
SS=4	58%	56
S=3	38%	36
D=2	4%	4
SD=1		0

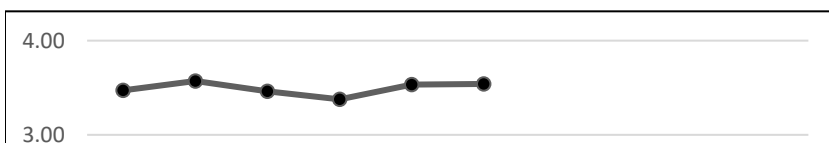
68 Over the past year, have you been satisfied the agency has been understanding of your family and personal issues?



Year	Resp	μ
2016	98	3.54
2017	80	3.61
2018	68	3.60
2019	69	3.55
2020	76	3.63
2021	96	3.70

2021		
Score	Score	Resp
SS=4	72%	69
S=3	27%	26
D=2		0
SD=1	1%	1

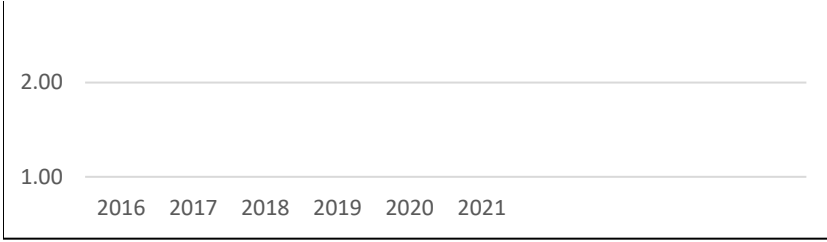
69 Over the past year, have you been satisfied the agency has taken a supportive role in your professional growth and development?



Year	Resp	μ
2016	95	3.47
2017	77	3.57
2018	67	3.46

2021		
Score	Score	Resp
SS=4	55%	53
S=3	44%	42

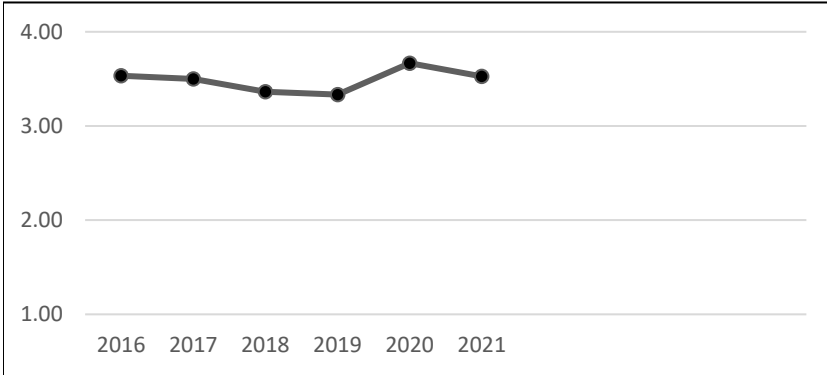
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2019	69	3.38
2020	75	3.53
2021	96	3.54

2021		
Score	Score	Resp
D=2	1%	1
SD=1		0

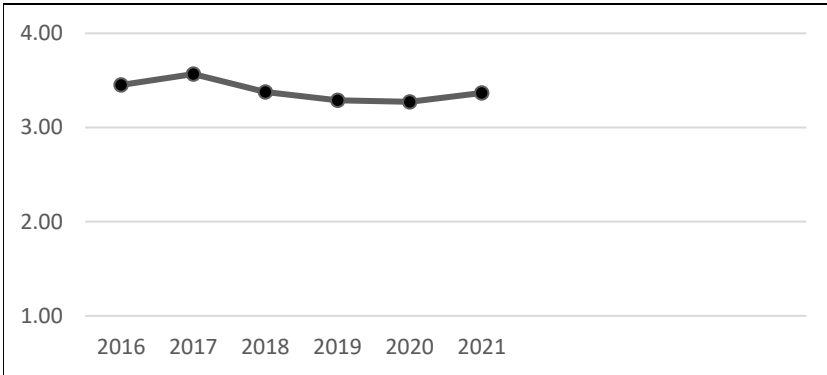
70 Were you satisfied with the training your received upon entering your current position?



Year	Resp	μ
2016	15	3.53
2017	8	3.50
2018	11	3.36
2019	6	3.33
2020	9	3.67
2021	19	3.53

2021		
Score	Score	Resp
SS=4	53%	10
S=3	47%	9
D=2		0
SD=1		0

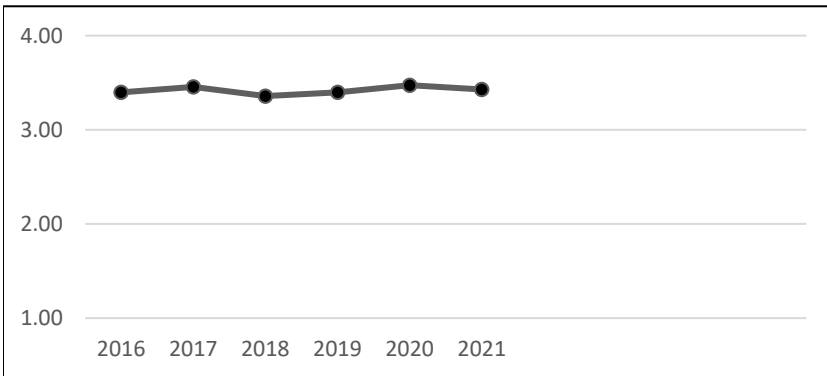
71 Over the past year, have you been satisfied with the additional training and CEU offerings made available to you?



Year	Resp	μ
2016	91	3.45
2017	74	3.57
2018	61	3.38
2019	62	3.29
2020	66	3.27
2021	87	3.37

2021		
Score	Score	Resp
SS=4	41%	36
S=3	54%	47
D=2	5%	4
SD=1		0

72 Over the past year, have you been satisfied the agency has appreciated your work?



Year	Resp	μ
2016	96	3.40
2017	77	3.45
2018	67	3.36
2019	68	3.40
2020	76	3.47
2021	96	3.43

2021		
Score	Score	Resp
SS=4	46%	44
S=3	52%	50
D=2	1%	1
SD=1	1%	1

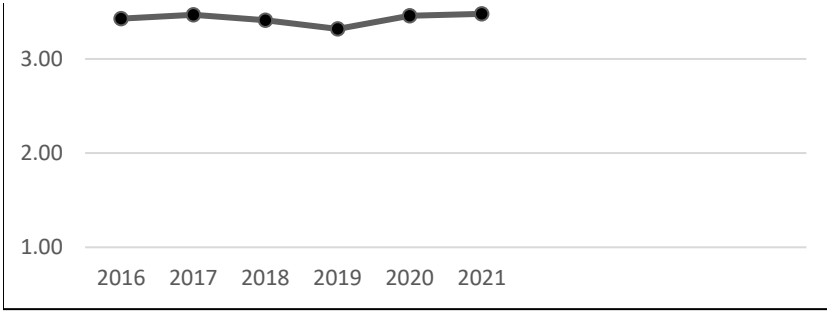
73 Over the past year, have you been satisfied with the time and location of required meetings?



Year	Resp	μ
2016	98	3.43

2021		
Score	Score	Resp

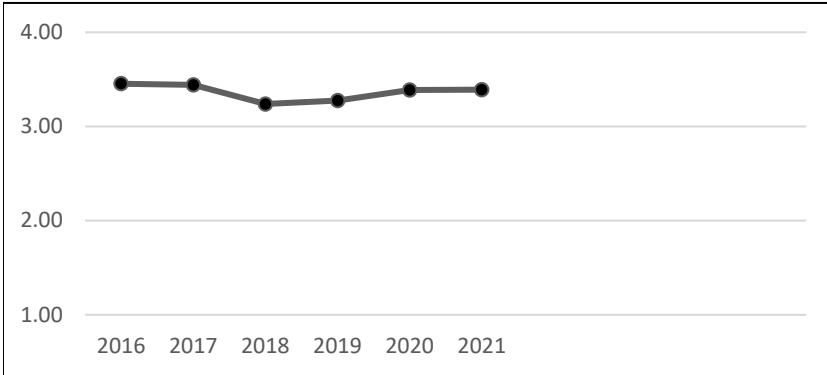
2021 LCDHD Employee Satisfaction Survey



2017	79	3.47
2018	68	3.41
2019	69	3.32
2020	72	3.46
2021	94	3.48

2021		
Score	Score	Resp
SS=4	50%	47
S=3	48%	45
D=2	2%	2
SD=1		0

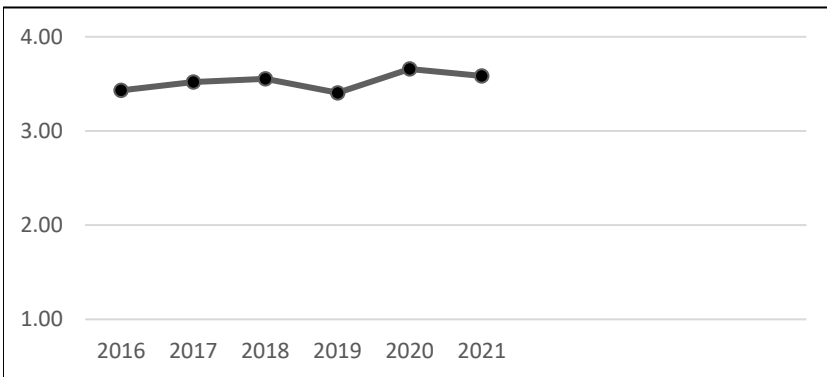
74 Over the past year, have you been satisfied with the image of the Health Department in your community?



Year	Resp	μ
2016	97	3.45
2017	79	3.44
2018	67	3.24
2019	69	3.28
2020	75	3.39
2021	95	3.39

2021		
Score	Score	Resp
SS=4	47%	45
S=3	44%	42
D=2	8%	8
SD=1		0

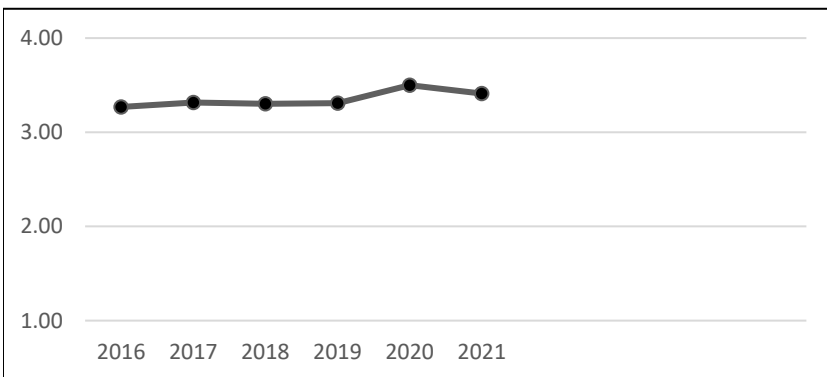
75 Over the past year, have you been satisfied the employees in your county have worked well as a team?



Year	Resp	μ
2016	95	3.43
2017	77	3.52
2018	65	3.55
2019	69	3.41
2020	76	3.66
2021	96	3.58

2021		
Score	Score	Resp
SS=4	61%	59
S=3	36%	35
D=2	1%	1
SD=1	1%	1

76 Over the past year, have you been satisfied that the policies and procedures were consistently followed district-wide?

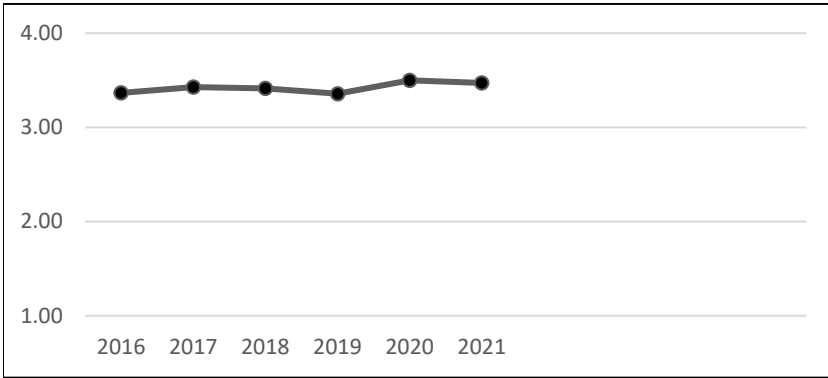


Year	Resp	μ
2016	93	3.27
2017	76	3.32
2018	66	3.30
2019	68	3.31
2020	74	3.50
2021	95	3.41

2021		
Score	Score	Resp
SS=4	45%	43
S=3	53%	50
D=2		0
SD=1	2%	2

77 Over the past year, have you been satisfied all employees have been given a fair opportunity to succeed within the agency?

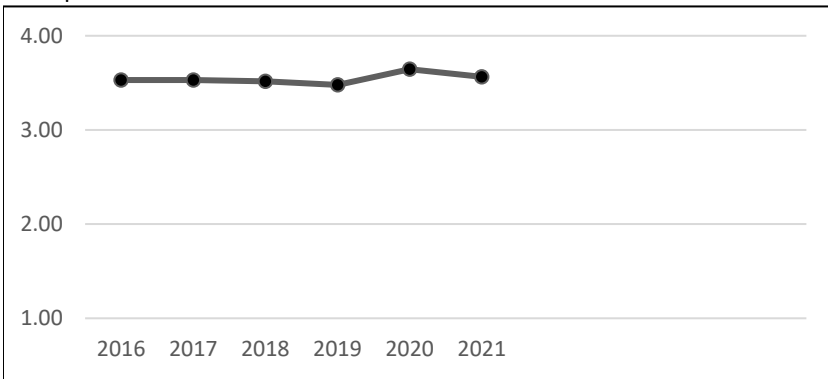
2021 LCDHD Employee Satisfaction Survey



Year	Resp	μ
2016	93	3.37
2017	75	3.43
2018	65	3.42
2019	67	3.36
2020	74	3.50
2021	95	3.47

2021		
Score	Score	Resp
SS=4	48%	46
S=3	51%	48
D=2	1%	1
SD=1		0

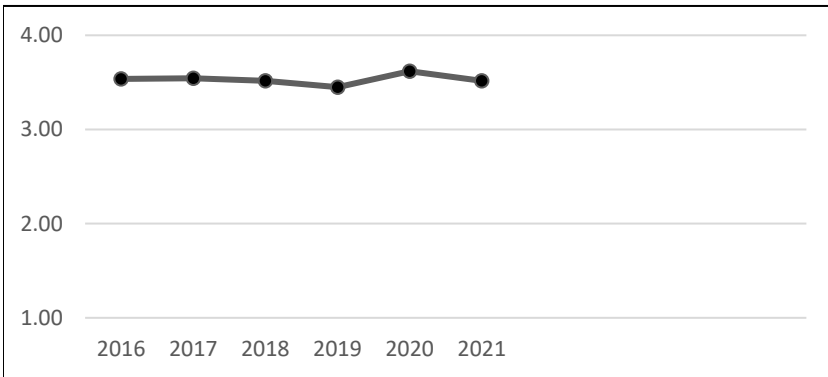
78 Over the past year, have you been satisfied the Health Department and its employees are helping to make the communities better places to live?



Year	Resp	μ
2016	98	3.53
2017	79	3.53
2018	68	3.51
2019	69	3.48
2020	76	3.64
2021	96	3.56

2021		
Score	Score	Resp
SS=4	57%	55
S=3	42%	40
D=2	1%	1
SD=1		0

79 Over the past year, have you been satisfied working for this agency?



Year	Resp	μ
2016	97	3.54
2017	79	3.54
2018	66	3.52
2019	69	3.45
2020	76	3.62
2021	95	3.52

2021		
Score	Score	Resp
SS=4	57%	54
S=3	39%	37
D=2	3%	3
SD=1	1%	1

Lake Cumberland District Health Department Personnel Report

Executive Staff Meeting Notes

November 2021

HR Report:

Natiah is leaving us. Her last day is November 30th. We have advertised the position. Wilma is going to return on November 29th to help out.

I am working on the workforce development plan – have completed some narratives for PHAB accreditation. Have sent those to Janae for review.

Staffing Report:

Open Positions- currently hiring:

- HR Assistant
- CHW (2 grant funded position),
- JEP CHW (1- grant funded position)

On Duty- 14

Merit – 3

- Jessica Wells, Local Health Nurse in Adair County
- Connie Mann-Polston- Public Health HANDS Specialist – Russell County
- Madison Price- Environmentalist 1 – Taylor County

Contract-2

- Pam Acey- Part-time contract – Adair County
- Elizabeth McWhorter – Full-time contract –JEP Program - Clinton County

Crown -9

- Cortney Ryan – McCreary County
- Leslie York – Cumberland County
- Rosanna Eads – Russell County
- Lytha Hughes – District
- Michael Jones – District
- Brandy Wright – Cumberland County
- Don Perry – McCreary County
- Amanda Singleton – District
- Stacy Weddle – Wayne County

Lake Cumberland District Health Department Personnel Report

Executive Staff Meeting Notes

November 2021

Off Duty Total – 10

Contract - 2

- Jessica Jones – JEP program
- Misty May – JEP Program

Merit - 2

- Kathie Keltner – Adair Clinic
- Connie Mann Polston- HANDS program

Crown - 6

- Jeff Adams
- Patricia Cooper
- Laura Lewis
- Tisha Sears
- Jessica Smith
- Jared Spradlin

Grant Report:

We have for applied for and received three new grants this quarter.

Foundation for a Healthy Ky grant - to create a social media campaign to encourage vaccine confidence among unvaccinated population. It will be wrapping up soon. - \$1,500.

- Syringe Services Program Expansion grant- we will use it to do some community awareness events and provide Fentanyl testing strips through the syringe exchange program. - \$33,002 x 5 counties = \$165,010
- Office of Health Equity CHW grant – hire two CHWs to work in the diabetes program. - \$127,740

Lake Cumberland District Health Department

COVID-19 Vaccination, Testing and Face Covering Policy

Purpose:

Vaccination is a vital tool to reduce the presence and severity of COVID-19 cases in the workplace, in communities, and in the nation as a whole. Lake Cumberland District Health Department (LCDHD) encourages all employees to receive a COVID-19 vaccination to protect themselves and other employees. However, should an employee choose not to be vaccinated, this policy's sections on testing and face coverings will apply. This policy complies with OSHA's Emergency Temporary Standard on Vaccination and Testing (29 CFR 1910.501).

Policy:

This COVID-19 Policy on vaccination, testing, and face covering use applies to all employees of Lake Cumberland District Health Department. All employees are encouraged to be fully vaccinated. Employees are considered fully vaccinated two weeks after completing the primary series of COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses. Employees who are not fully vaccinated will be required to provide proof of weekly COVID-19 testing and wear a face covering at the workplace. All employees will be required to have or obtain a COVID-19 vaccination or follow the masking and testing guidelines as a term and condition of employment at LCDHD. All employees are required to report their vaccination status and, if vaccinated, provide proof of vaccination. Employees must provide truthful and accurate information about their COVID-19 vaccination status, and, if not fully vaccinated, their testing results. Employees not in compliance with this policy will be subject to discipline up to and including dismissal.

Employees also may be legally entitled to a reasonable accommodation if they cannot be vaccinated and/or wear a face covering (as otherwise required by this policy) because of a disability, or if the provisions in this policy for vaccination, and/or testing for COVID-19, and/or wearing a face covering conflict with a sincerely held religious belief, practice, or observance. Requests for exceptions and reasonable accommodations must be initiated by completing and returning to HR the appropriate accommodation request form (Religious Accommodation Request Form or the Medical Exemption from Vaccination Form) which can be found on the agency's Wiki Employee Forms page. All such requests will be handled in accordance with applicable laws and regulations.

Procedures:

Overview and General Information

Vaccination

Any LCDHD employee that chooses to be vaccinated against COVID-19 must be fully vaccinated no later than January 4, 2022. Any employee not fully vaccinated by January 4, 2022 will be subject to the regular testing and face covering requirements of the policy.

To be fully vaccinated by [January 4, 2022](#) an employee must:

- Obtain the first dose of a two-dose vaccine no later than [November 21, 2021](#) and the second dose no later December 21, 2021 or
- Obtain one dose of a single dose vaccine no later than [December 21, 2021](#).

Employees will be considered fully vaccinated two weeks after receiving the requisite number of doses of a COVID-19 vaccine as stated above. An employee will be considered partially vaccinated if they have received only one dose of a two-dose vaccine.

Employees may schedule their vaccination appointment through their own medical provider or at the health department. Employees should send proof of vaccination to Human Resources office. This information will be kept confidential.

The HR office will be maintaining this policy, any related questions should be directed to the HR department.

Testing and Face Coverings

All employees who are not fully vaccinated as of [January 4, 2022](#) will be required to undergo regular COVID-19 testing and wear a face covering when in the workplace. Policies and procedures for testing and face coverings are described in the relevant sections of this policy.

Vaccination Status and Acceptable Forms of Proof of Vaccination

Vaccinated Employees

All vaccinated employees are required to provide proof of COVID-19 vaccination, regardless of where they received vaccination. Proof of vaccination status can be submitted via interdepartmental mail, fax, secure email, or in-person at the HR office.

Acceptable proof of vaccination status is:

1. The record of immunization from a health care provider or pharmacy;
2. A copy of the COVID-19 Vaccination Record Card;
3. A copy of medical records documenting the vaccination;
4. A copy of immunization records from a public health, state, or tribal immunization information system; or
5. A copy of any other official documentation that contains the type of vaccine administered, date(s) of administration, and the name of the health care professional(s) or clinic site(s) administering the vaccine(s).

Proof of vaccination generally should include the employee's name, the type of vaccine administered, the date(s) of administration, and the name of the health care professional(s) or clinic site(s) that administered the vaccine. In some cases, state immunization records may not include one or more of these data fields, such as clinic site; in those circumstances LCDHD will still accept the state immunization record as acceptable proof of vaccination.

If an employee is unable to produce one of these acceptable forms of proof of vaccination, despite attempts to do so (e.g., by trying to contact the vaccine administrator or state health department), the

employee can provide a signed and dated statement attesting to their vaccination status (fully vaccinated or partially vaccinated); attesting that they have lost and are otherwise unable to produce one of the other forms of acceptable proof; and including the following language:

“I declare (or certify, verify, or state) that this statement about my vaccination status is true and accurate. I understand that knowingly providing false information regarding my vaccination status on this form may subject me to criminal penalties.”

An employee who attests to their vaccination status in this way should to the best of their recollection, include in their attestation the type of vaccine administered, the date(s) of administration, and the name of the health care professional(s) or clinic site(s) administering the vaccine.

Employees who do not have a vaccination status on record in the HR department, will be considered unvaccinated and must comply with the testing and masking portion of this policy. Employees who are partially vaccinated, should submit proof of first vaccination to HR by interdepartmental mail or in-person.

All Employees

All employees, both vaccinated and unvaccinated, must inform LCDHD of their vaccination status. The following table outlines the requirements for submitting vaccination status documentation.

Vaccination Status	Instructions	Deadline(s)
Employees who are fully vaccinated.	Submit proof of vaccination that indicates full vaccination.	December 5, 2021
Employees who are partially vaccinated (i.e., one dose of a two dose vaccine series).	Submit proof of vaccination that indicates when the first dose of vaccination was received, followed by proof of the second dose when it is obtained.	December 5, 2021
Employees who are not vaccinated.	Submit statement that you are unvaccinated, but are planning to receive a vaccination by the deadline.	December 5, 2021
	Submit statement that you are unvaccinated and not planning to receive a vaccination.	December 5, 2021

*OSHA requires employers to collect all information about employee vaccination status by 30 days after publication of the ETS.

Supporting COVID-19 Vaccination

An employee may take up to four hours of duty time per dose to travel to the vaccination site, receive a vaccination, and return to work. This would mean a maximum of eight hours of duty time for employees receiving two doses. If an employee spends less time getting the vaccine, only the necessary amount of duty time will be granted. Employees who take longer than four hours to get the vaccine must send their supervisor and HR an email documenting the reason for the additional time (e.g., they may need to

travel long distances to get the vaccine). Any additional time requested will be granted, if reasonable, but will not be paid; in that situation, the employee can elect to use accrued leave, e.g., sick leave, to cover the additional time. If an employee is vaccinated outside of their approved duty time they will not be compensated.

Employees may utilize up to two workdays of sick leave immediately following each dose if they have side effects from the COVID-19 vaccination that prevent them from working. Employees who have no sick leave will be granted up to two days of additional sick leave immediately following each dose if necessary.

The following procedures apply for requesting and granting duty time to obtain the COVID-19 vaccine or sick leave to recover from side effects:

1. Employee must submit request to obtain COVID-19 vaccination to supervisor for approval; provide date and time of leave request.
2. Employee must notify supervisor of the need to take sick leave due to side effects of the vaccination.
3. Employee must contact HR for appropriate coding if employee has no sick leave available.

Employee Notification of COVID-19 and Removal from the Workplace

Lake Cumberland District Health Department will require employees to promptly notify their supervisor and the Human Resources Department when they have tested positive for COVID-19 or have been diagnosed with COVID-19 by a licensed healthcare provider.

Furthermore, employees who are sick or experiencing symptoms either while at home or at work, should notify their supervisor immediately.

When appropriate, LCDHD will designate Family Medical Leave in conjunction with sick leave related to a positive COVID-19 diagnosis or test.

Medical Removal from the Workplace

LCDHD has also implemented a policy for keeping COVID-19 positive employees from the workplace in certain circumstances. LCDHD will immediately remove an employee from the workplace if they have received a positive COVID-19 test or have been diagnosed with COVID-19 by a licensed healthcare provider (i.e., immediately send them home or to seek medical care, as appropriate).

LCDHD will follow the ETS Guidance for Employers Flowchart to determine when an employee needs to be removed from the workplace (see Screening and Sick Leave During COVID-19 Event policy for more information).

Return to Work Criteria

For any employee removed because they are COVID-19 positive, LCDHD will keep them removed from the workplace until the employee receives a negative result on a COVID-19 nucleic acid amplification test (NAAT) following a positive result on a COVID-19 antigen test if the employee chooses to seek a NAAT test for confirmatory testing; meets the return- to- work criteria in CDC's "Isolation Guidance"; or receives a recommendation to return to work from a licensed healthcare provider.

Under CDC's "[Isolation Guidance](#)," asymptomatic employees may return to work once 10 days have passed since the positive test, and symptomatic employees may return to work after all the following are true:

- At least 10 days have passed since symptoms first appeared, and
- At least 24 hours have passed with no fever without fever-reducing medication, and
- Other symptoms of COVID-19 are improving (loss of taste and smell may persist for weeks or months and need not delay the end of isolation).

If an employee has severe COVID-19 or an immune disease, LCDHD will follow the guidance of a licensed healthcare provider regarding return to work.

LCDHD will follow the CDC guidance above for guidance for allowing an employee to return to work (see Screening and Sick Leave During COVID-19 Event policy for more information).

COVID-19 Testing

All employees who are not fully vaccinated will be required to comply with this policy for testing.

Employees who report to the workplace at least once every seven days:

(A) must be tested for COVID-19 at least once every seven days; and

(B) must provide documentation of the most recent COVID-19 test result to Human Resources Department no later than the seventh day following the date on which the employee last provided a test result.

Any employee who does not report to the workplace during a period of seven or more days (e.g., if they were teleworking for two weeks prior to reporting to the workplace):

(A) must be tested for COVID-19 within seven days prior to returning to the workplace; and

(B) must provide documentation of that test result to [the supervisor] upon return to the workplace.

If an employee does not provide documentation of a COVID-19 test result as required by this policy, they will be removed from the workplace until they provide a test result.

Employees who have received a positive COVID-19 test, or have been diagnosed with COVID-19 by a licensed healthcare provider, are not required to undergo COVID-19 testing for 90 days following the date of their positive test or diagnosis.

Employees who opted for the testing option of this policy will be responsible for coordinating and paying for their test. LCDHD will continue to provide tests for those employees who are symptomatic.

Face Coverings

LCDHD will require all employees ~~who are not fully vaccinated~~ to wear a face covering. Face coverings must: (i) completely cover the nose and mouth; (ii) be made with two or more layers of a breathable

fabric that is tightly woven (i.e., fabrics that do not let light pass through when held up to a light source); (iii) be secured to the head with ties, ear loops, or elastic bands that go behind the head. If gaiters are worn, they should have two layers of fabric or be folded to make two layers; (iv) fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face; and (v) be a solid piece of material without slits, exhalation valves, visible holes, punctures, or other openings. Acceptable face coverings include clear face coverings or cloth face coverings with a clear plastic panel that, despite the non-cloth material allowing light to pass through, otherwise meet these criteria and which may be used to facilitate communication with people who are deaf or hard-of-hearing or others who need to see a speaker's mouth or facial expressions to understand speech or sign language respectively.

Employees ~~who are not fully vaccinated~~ must wear face coverings over the nose and mouth when indoors and when occupying a vehicle with another person for work purposes. Policies and procedures for face coverings will be implemented, along with the other provisions required by OSHA's COVID-19 Vaccination and Testing ETS, as part of a multi-layered infection control approach for unvaccinated workers.

LCDHD will supply all staff with appropriate masks and protective clothing and equipment. These items must be worn as described in the Personal Protective Equipment Policy. Staff may request replacement or replenishment supplies by contacting their facility's safety coordinator, office manager, or their supervisor (see Face Mask and PPE Policy).

The following are exceptions to LCDHD requirements for face coverings:

- 1. When an employee is alone in a room with floor to ceiling walls and a closed door.*
- 2. For a limited time, while an employee is eating or drinking at the workplace or for identification purposes in compliance with safety and security requirements.*
- 3. When an employee is wearing a respirator or facemask.*
- 4. Where LCDHD has determined that the use of face coverings is infeasible or creates a greater hazard (e.g., when it is important to see the employee's mouth for reasons related to their job duties, when the work requires the use of the employee's uncovered mouth, or when the use of a face covering presents a risk of serious injury or death to the employee).*

New Hires:

All new employees are required to comply with the vaccination, testing, and face covering requirements outlined in this policy as soon as practicable and as a condition of employment. Potential candidates for employment will be notified of the requirements of this policy prior to the start of employment.

New employees must comply with this policy, including any deadlines for submitting vaccination documentation or COVID-19 test results.

Confidentiality and Privacy:

All medical information collected from individuals, including vaccination information, test results, and any other information obtained as a result of testing, will be treated in accordance with applicable laws and policies on confidentiality and privacy.

Questions:

Please direct any questions regarding this policy to the Human Resources Department.