

Division of Public Health

Agreement Addendum

FY 25-26

Page 1 of 5

Durham County Department of Public Health
Local Health Department Legal Name

547 HIV and STI Partner Services
Activity Number and Description

06/01/2025 – 02/28/2026
Service Period

07/01/2025 – 03/31/2026
Payment Period

☒ Original Agreement Addendum
☐ Agreement Addendum Revision # ____

Epidemiology / Communicable Disease Branch
DPH Section / Branch Name

Victoria Mobley, (919) 546-1639
victoria.mobley@dhhs.nc.gov

DPH Program Contact
 (name, phone number, and email)

DPH Program Signature **Date**
 (only required for a negotiable Agreement Addendum)

I. **Background:**

The primary mission of the Communicable Disease Branch (CDB) is to reduce morbidity and mortality resulting from communicable diseases that are a significant threat to the public through detection, investigation, testing, treatment, tracking, control, education, and care activities to improve the health of people in North Carolina.

The mission of the CDB is closely linked to the mission of the CDC Division of STD Prevention (DSTDP) and has a completely integrated communicable disease program that includes STD/HIV Care and Prevention, Partner Services, and Surveillance activities. The DSTDP has specific disease prevention goals which are contextualized within the broad framework of the social determinants of health, the promotion of sexual health, and the primary prevention of sexually transmitted disease. The North Carolina Division of Public Health (DPH) is committed to improving Sexually Transmitted Disease Programs through Assessment, Assurance, Policy Development and Prevention Strategies by:

- Reducing the incidence of STDs through the assurance of rapid testing treatment, and linkage to care for individuals infected with or exposed to STDs, especially syphilis and HIV.
- Employ syndemic disease control strategies to ensure individuals at risk for overlapping infections receive appropriate evaluation, testing, and treatment for all relevant infections.
- Ensure STD prevention and control services are delivered in a culturally competent manner.

II. **Purpose:**

This Agreement Addendum supports the Local Health Department HIV and syphilis partner notification capacity through the support of two Disease Intervention Specialist (DIS) positions. The goal is to

DocuSigned by:

Rodney Jenkins

E5B48EEAEE96466...

3/3/2025 | 5:28 PM EST

Health Director Signature (use blue ink or verifiable digital signature)

Date

LHD to complete:	LHD program contact name: <u>Shene11 Little</u>	
[For DPH to contact in case follow-up information is needed.]	Phone and email address: <u>919-560-7574</u>	<u>slittle@dconc.gov</u>

Signature on this page signifies you have read and accepted all pages of this document.

Template rev. June 2023

control the spread of HIV/STDs by providing case investigation and contact tracing services to county residents infected with or exposed to these organisms.

III. Scope of Work and Deliverables:

The Local Health Department (LHD) shall:

1. Maintain a staff of two 1.0 FTE Disease Intervention Specialists (DIS).
2. Ensure the DIS supervisor runs North Carolina Electronic Disease Surveillance System (NC EDSS) reports at least monthly in order to assess DIS progress in assigned cases.
3. Ensure that each hired DIS will:
 - a. Use the state disease surveillance system (NC EDSS) and county electronic medical records (EMRs) to identify persons who test positive for HIV and syphilis.
 - b. Interview clients with infectious diseases to ensure medical treatment and follow-up occur, and to make medical and psychosocial referrals for cases as needed.
 - c. For those persons who test positive for HIV and syphilis, elicit the names of their sex and needle-sharing contacts, and then locate and notify those contacts of their exposure and link them to appropriate testing and treatment.
 - d. Provide disease information, counseling, personalized risk assessment, risk reduction planning, and obtain detailed and personal information about health and disease transmission risk behavior.
 - e. Assess barriers to disease intervention and make appropriate referrals for clients and their sex and needle-sharing contacts to overcome those barriers.
 - f. Adhere to state established investigative timeframes for investigative initiation, outreach efforts, and case closure, as documented in the North Carolina Department of Health and Human Services, DPH, CDB, CDB Field Services Unit (FSU) Process Performance Standards, to ensure partner notification activities prioritize disease intervention urgency.
 - g. Analyze data to determine the source and spread of disease for reported syphilis and HIV cases and plan further intervention activities that will reduce the occurrence of clinical complications of disease and reduce the spread of disease.
 - h. Assist with LHD investigations of suspected violations of North Carolina communicable disease control measures and work with clients and providers to achieve compliance with such measures.
 - i. Complete accurate and thorough documentation of all field activities for cases and named sex and needle-sharing contacts into the NC EDSS within 24 hours of activity completion.
 - j. Monitor and manage daily the assigned NC EDSS workflows to prevent delays in case investigation and partner notification activities.
 - k. Facilitate collaborative relationships for the LHD with clinicians, correctional facilities, substance abuse treatment programs, and community-based organizations.
 - l. Attend all training sessions required, including those by the CDB FSU and LHD STD/HIV program.
 - m. Develop and maintain competency in communicable disease outbreak response and control.
 - n. Utilize the principles outlined in the fundamentals of outbreak response and communicable disease outbreak investigation steps when responding to specific outbreaks, and
 - o. Provide case investigation and contact tracing support to local jurisdictions as needed to prevent and control increased disease morbidity or for outbreak control.

IV. **Performance Measures / Reporting Requirements:**

1. Performance Measure #1: The following investigative outcome timeframes for newly assigned syphilis and HIV cases are met and documented in NC EDSS:
 - a. Interview $\geq 90\%$ of assigned LHD syphilis cases
 1. Interview $\geq 65\%$ of assigned cases within 7 days of assignment
 2. Interview $\geq 85\%$ of assigned cases within 14 days of assignment
 3. Achieve a syphilis contact index ≥ 1.0 (total # partners named/total # cases interviewed)
 4. Document that $\geq 54\%$ of syphilis contacts are treated and/or tested for syphilis within 7 days of notification initiation
 - b. Interview $\geq 90\%$ of assigned LHD HIV cases
 1. Interview $\geq 65\%$ of assigned cases within 7 days of assignment
 2. Interview $\geq 85\%$ of assigned cases within 14 days of assignment
 3. Achieve a HIV contact index ≥ 1.0 (total # partners named/total # cases interviewed)
 4. Document that $\geq 54\%$ of HIV contacts are tested within 7 days of notification initiation
2. Performance Measure #2: All HIV and syphilis case investigation and contact tracing activities will be documented accurately and in the appropriate NC EDSS package, within 24 hours of activity completion.
3. Performance Measure #3: Meet established state process performance standards for syphilis and HIV investigations. The LHD DIS supervisor shall run NC EDSS reports bi-monthly (covering prior 4-week timeframe) to assess DIS progress on assigned cases and ensure caseloads do not contain investigations older than 30 days.
 - a. NC EDSS Reports can be found under category: "Performance/Workload Evaluation"
 1. Report name: "HIVSTD HIV Interview Statistics by Date Assigned for Ix"
 2. Report name: "HIVSTD Syphilis Interview Statistics by Date Assigned for Ix".

4. **Reporting Required Subcontract Information**

In accordance with revised NCDHHS guidelines effective October 1, 2024, the LHD must provide the information listed below for every subcontract receiving funding from the LHD to carry out any or all of this Agreement Addendum's work.

This information is not to be returned with the signed Agreement Addendum (AA) but is to be provided to DPH when the entities are known by the LHD.

- a. Subcontracts are contracts or agreements issued by the LHD to a vendor ("Subcontractor") or a pass-through entity ("Subrecipient").
 1. Subcontractors are vendors hired by the LHD via a contract to provide a good or service required by the LHD to perform or accomplish specific work outlined in the executed AA. For example, if the LHD needed to build a data system to satisfy an AA's reporting requirements, the vendor hired by the LHD to build the data system would be a Subcontractor. (However, not all Vendors are considered Subcontractors. Entities performing general administrative services for the LHD (e.g., certified professional accountants) are not considered Subcontractors.
 2. Subrecipients of the LHD are those that receive DPH pass-through funding from the LHD via a contract or agreement for them to carry out all or a portion of the programmatic responsibilities outlined in the executed AA. (Subrecipients are also referred to as Subgrantees in NCAC.)

The following information must be provided to the DPH Program Contact listed on Page 1 of this AA for review prior to the entity being awarded a contract or agreement from the LHD:

- Organization or Individual's Name (if an individual, include the person's title)
- EIN or Tax ID
- Street Address or PO Box
- City, State and ZIP Code
- Contact Name
- Contact Email
- Contact Telephone
- Fiscal Year End Date (of the entity)
- State whether the entity is functioning as a pass-through entity Subcontractor or Subrecipient of the LHD.

V. Performance Monitoring and Quality Assurance:

1. CDB shall monitor LHD staff efforts by:
 - a. Running quarterly NC EDSS HIV and Syphilis PNS performance reports to assess whether the outcome metrics listed in the Performance Measures above are being met by DIS.
 - b. Hosting quarterly virtual meetings between CDB and LHD DIS to review quarterly performance metrics, identify any concerning disease trends, and collaborate on joint response efforts.
 - c. Providing the required training sessions for newly hired DIS: HIV/Syphilis Fundamentals of Disease Intervention, NC EDSS, and phlebotomy training.
2. If quarterly monitoring demonstrates compliance concerns with the Agreement Addendum provisions, CDB will provide technical assistance to assist the LHD in coming back into compliance. If technical assistance does not prove beneficial, CDB will develop a corrective action plan to address out-of-compliance issues, including a follow-up review, as indicated. If compliance issues remain unresolved after the corrective action plan is implemented, CDB may reduce or eliminate remaining funding, and consideration for future funding may be affected.

VI. Funding Guidelines or Restrictions:

1. **Federal Funding Requirements:** where federal grant dollars received by the Division of Public Health (DPH) are passed through to the Local Health Department (LHD) for all or any part of this Agreement Addendum (AA).
 - a. Requirements for Pass-through Entities: In compliance with 2 CFR §200.331 – *Requirements for pass-through entities*, DPH provides Federal Award Reporting Supplements (FASs) to the LHD receiving federally funded AAs.
 1. Definition: A FAS discloses the required elements of a single federal award. FASs address elements of federal funding sources only; state funding elements will not be included in the FAS. An AA funded by more than one federal award will receive a disclosure FAS for each federal award.
 2. Frequency: An FAS will be generated as DPH receives information for federal grants. FASs will be issued to the LHD throughout the state fiscal year. For a federally funded AA, an FAS will accompany the original AA. If an AA is revised and if the revision affects federal funds, the AA Revision will include an FAS. FASs can also be sent to the LHD even if no change is needed to an AA. In those instances, the FAS will be sent to provide newly received federal grant information for funds already allocated in the existing AA.

- b. Required Reporting Certifications: Per the revised Uniform Guidance, 2 CFR 200, if awarded federal pass-through funds, the LHD as well as all subrecipients of the LHD must certify the following whenever 1) applying for funds, 2) requesting payment, and 3) submitting financial reports:

“I certify to the best of my knowledge and belief that the information provided herein is true, complete, and accurate. I am aware that the provision of false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative consequences including, but not limited to violations of U.S. Code Title 18, Sections 2, 1001, 1343 and Title 31, Sections 3729-3730 and 3801-3812.”

FY26 - FAS

federal award supplement

Activity Nbr + Name: 547

FAS Number + Reason: 1

Assistance Listing Nbr + Name: 93.977

Is award R&D?: no

Fed award project description:

Fed awd date + awarding agency:

HIV and STI Partner Services

This FAS is accompanying an AA+BE or an AA Revision+BE Revision.

Preventive Health Services_Sexually Transmitted Diseases Control Grants

NH25PS005152

IDC rate: n/a

Fed awd total amt: \$ 11,099,652

Strengthening STD Prevention and Control for Health Departments (STD PCHD)

HHS, Centers for Disease Control and Prevention

Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity	Subrecipient	Subrecipient's UEI	Federal funds from grant listed above	Total federal funds for entire Activity
Alamance	F5VHYUU13NC5			Jackson	X7YWWY6ZP574		
Albemarle	WAAVS51PNMK3			Johnston	SYGAGEFDHYR7		
Alexander	XVEEJSNY7UX9			Jones	HE3NNNUE27M7		
Anson	PK8UYTSNJCC3			Lee	F6A8UC99JWJ5		
Appalachian	CD7BFHB8W539			Lenoir	QKUFL37VPGH6		
Beaufort	RN1SXF4DLXN6			Lincoln	UGGQGSSKBGJ5		
Bladen	TLCTJWDJH1H9			Macon	LLPJBC6N2LL3		
Brunswick	MJBMXLN9NJT5			Madison	YQ96F8BJYTJ9		
Buncombe	W5TCDKMLHE69			MTW	ZKK5GNRNBBY6		
Burke	KVJHUFURQDM5			Mecklenburg	EZ15XL6BMM68	\$ 247,967	\$ 247,967
Cabarrus	RDXNEJKJFU7			Montgomery	E78ZAJM3BFL3		
Caldwell	HL4FGNJNGE97			Moore	HFNSK95FS7Z8		
Carteret	UC6WJ2MQMJ58			Nash	NF58K566HQM7		
Caswell	JDJ7Y7CGYC86			New Hanover	F7TLT2GMEJE1		
Catawba	GYUNA9W1NFM1			Northampton	CRA2KCAL8BA4		
Chatham	KE57QE2GV5F1			Onslow	EGE7NBXW5JS6		
Cherokee	DCEGK6HA11M5			Orange	GFFMCW9XDA53		
Clay	HYKLQVNWLXK7			Pamlico	FT59QFEAU344		
Cleveland	UWMUYMPVL483			Pender	T11BE678U9P5		
Columbus	V1UAJ4L87WQ7			Person	FQ8LFJGMABJ4		
Craven	LTZ2U8LZQ214			Pitt	VZNPMLFT5R6		
Cumberland	HALND8WJ3GW4			Polk	QZ6BZPGLX4Y9		
Dare	ELV6JGB11QK6			Randolph	T3BUM1CVS9N5		
Davidson	C9P5MDJC7KY7			Richmond	Q63FZNTJM3M4		
Davie	L8WBGLHZV239			Robeson	LKBEJQFLAAK5		
Duplin	KZN4GK5262K3			Rockingham	KGCCCHJJZZ43		
Durham	LJ5BA6U2HLM7	\$ 210,107	\$ 210,107	Rowan	GCB7UCV96NW6		
Edgecombe	MAN4LX44AD17			Sampson	WRT9CSK1KJY5		
Foothills	NGTEF2MQ8LL4			Scotland	FNVTUQGCHM5		
Forsyth	V6BGVQ67YPY5			Stanly	U86MZUYPL7C5		
Franklin	FFKTRQCNN143			Stokes	W41TRA3NUNS1		
Gaston	QKY9R8A8D5J6			Surry	FMWCTM24C9J8		
Graham	L8MAVKQJTYN7			Swain	TAE3M92L4QR4		
Granv-Vance	MGQJKK22EJB3			Toe River	JUA6GAUQ9UM1		
Greene	VCU5LD71N9U3			Transylvania	YLN4BFCJCP39		
Guilford	YBEQWGFJPMJ3			Union	LHMKBD4AGRJ5		
Halifax	MRL8MYNJJ3Y5			Wake	FTJ2WJPLWMJ3	\$ 98,564	\$ 98,564
Harnett	JBDCD9V41BX7			Warren	TLNAU5CNHSU5		
Haywood	DQHZEVAV95G5			Wayne	DACFHCLQKMS1		
Henderson	TG5AR81JLQF5			Wilkes	M14KKHY2NNR3		
Hoke	C1GWSADARX51			Wilson	ME2DJHMYWG55		
Hyde	T2RSYN36NN64			Yadkin	PLCDT7JFA8B1		
Iredell	XTNRLKJLA4S9			Yancey	L98MCUHKC2J8		

DPH-Aid-To-Counties

For Fiscal Year: 25/26

Budgetary Estimate Number : 0

Activity 547	AA	133200 2B0463A 20G0182002	Total Allocated	Proposed Total	New Total
Service Period		06/01-02/28			
Payment Period		07/01-03/31			
01 Alamance		0	\$0.00	0	0
D1 Albemarle		0	\$0.00	0	0
02 Alexander		0	\$0.00	0	0
04 Anson		0	\$0.00	0	0
D2 Appalachian		0	\$0.00	0	0
07 Beaufort		0	\$0.00	0	0
09 Bladen		0	\$0.00	0	0
10 Brunswick		0	\$0.00	0	0
11 Buncombe		0	\$0.00	0	0
12 Burke		0	\$0.00	0	0
13 Cabarrus		0	\$0.00	0	0
14 Caldwell		0	\$0.00	0	0
16 Carteret		0	\$0.00	0	0
17 Caswell		0	\$0.00	0	0
18 Catawba		0	\$0.00	0	0
19 Chatham		0	\$0.00	0	0
20 Cherokee		0	\$0.00	0	0
22 Clay		0	\$0.00	0	0
23 Cleveland		0	\$0.00	0	0
24 Columbus		0	\$0.00	0	0
25 Craven		0	\$0.00	0	0
26 Cumberland		0	\$0.00	0	0
28 Dare		0	\$0.00	0	0
29 Davidson		0	\$0.00	0	0
30 Davie		0	\$0.00	0	0
31 Duplin		0	\$0.00	0	0
32 Durham	* 0	210,107	\$0.00	210,107	210,107
33 Edgecombe		0	\$0.00	0	0
D7 Foothills		0	\$0.00	0	0
34 Forsyth		0	\$0.00	0	0
35 Franklin		0	\$0.00	0	0
36 Gaston		0	\$0.00	0	0
38 Graham		0	\$0.00	0	0
D3 Gran-Vance		0	\$0.00	0	0
40 Greene		0	\$0.00	0	0
41 Guilford		0	\$0.00	0	0
42 Halifax		0	\$0.00	0	0
43 Harnett		0	\$0.00	0	0
44 Haywood		0	\$0.00	0	0
45 Henderson		0	\$0.00	0	0
47 Hoke		0	\$0.00	0	0
48 Hyde		0	\$0.00	0	0
49 Iredell		0	\$0.00	0	0
50 Jackson		0	\$0.00	0	0

51 Johnston		0	\$0.00	0	0
52 Jones		0	\$0.00	0	0
53 Lee		0	\$0.00	0	0
54 Lenoir		0	\$0.00	0	0
55 Lincoln		0	\$0.00	0	0
56 Macon		0	\$0.00	0	0
57 Madison		0	\$0.00	0	0
D4 M-T-W		0	\$0.00	0	0
60 Mecklenburg	* 0	247,967	\$0.00	247,967	247,967
62 Montgomery		0	\$0.00	0	0
63 Moore		0	\$0.00	0	0
64 Nash		0	\$0.00	0	0
65 New Hanover		0	\$0.00	0	0
66 Northampton		0	\$0.00	0	0
67 Onslow		0	\$0.00	0	0
68 Orange		0	\$0.00	0	0
69 Pamlico		0	\$0.00	0	0
71 Pender		0	\$0.00	0	0
73 Person		0	\$0.00	0	0
74 Pitt		0	\$0.00	0	0
75 Polk		0	\$0.00	0	0
76 Randolph		0	\$0.00	0	0
77 Richmond		0	\$0.00	0	0
78 Robeson		0	\$0.00	0	0
79 Rockingham		0	\$0.00	0	0
80 Rowan		0	\$0.00	0	0
82 Sampson		0	\$0.00	0	0
83 Scotland		0	\$0.00	0	0
84 Stanly		0	\$0.00	0	0
85 Stokes		0	\$0.00	0	0
86 Surry		0	\$0.00	0	0
87 Swain		0	\$0.00	0	0
D6 Toe River		0	\$0.00	0	0
88 Transylvania		0	\$0.00	0	0
90 Union		0	\$0.00	0	0
92 Wake	* 0	98,564	\$0.00	98,564	98,564
93 Warren		0	\$0.00	0	0
96 Wayne		0	\$0.00	0	0
97 Wilkes		0	\$0.00	0	0
98 Wilson		0	\$0.00	0	0
99 Yadkin		0	\$0.00	0	0
00 Yancey		0	\$0.00	0	0
Totals		556,638	0	556,638	556,638

Sign and Date - DPH Program Administrator

Christopher M Kippes

01/23/25

Sign and Date - DPH Section Chief

Mac Kemer

01/23/25

Sign and Date - DPH Budget Office – ATC Coordinator

Sarah Kuffen

Sign and Date - DPH Budget Officer

S. Khalil

1/29/25

MT 1/28/25