

Division of Public Health

Agreement Addendum

FY 25-26

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Local Health Department Legal Name	Epidemiology / Communicable Disease Branch
610 STD Prevention	DPH Section / Branch Name
Activity Number and Description	Vanessa M. Gailor, (919) 546-1658 vanessa.gailor@dhhs.nc.gov
06/01/2025 – 05/31/2026	DPH Program Contact
Service Period	(name, phone number, and email)
07/01/2025 – 06/30/2026	DPH Program Signature
Payment Period	Date
<input checked="" type="checkbox"/> Original Agreement Addendum	(only required for a negotiable Agreement Addendum)
<input type="checkbox"/> Agreement Addendum Revision # _____	

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 Centers for Disease Control and Prevention (CDC) Division of STD Prevention (DSTDP). 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.

CDC's Division of STD Prevention concentrates its efforts on four focus areas to guide STD prevention and maximize long term impact.

1. Adolescents and Young Adults
2. Men Who Have Sex with Men (MSM)
3. Pregnant Women
4. STD Prevention Systems

II. **Purpose:**

To assist the Local Health Department's STD programs in providing supplies and services to prevent STD transmitted infections, this Activity is to provide patients with condoms and supplementary culturally and age-appropriate patient educational materials to reduce the spread of HIV and STDs. Correct and consistent condom usage has been shown to reduce the spread of HIV/STDs.

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

Date

LHD to complete:	LHD program contact name: _____
[For DPH to contact in case follow-up information is needed.]	Phone and email address: _____

Signature on this page signifies you have read and accepted all pages of this document. Template rev. August 2021

The Local Health Department may use the funds provided for this Activity to support training for a registered nurse to complete the STD Enhanced Role Registered Nurse (ERRN) training and/or support continuing education for advanced practice providers (APP) and physicians to assure continuing competency as a provider of STD clinical services.

III. Scope of Work and Deliverables:

The Local Health Department shall perform the deliverables in Paragraph 1 and Paragraph 2, and at the Local Health Department's discretion, may choose to use any remaining Activity 610 funds to perform the deliverable in Paragraph 3:

1. Condoms and Instructions

- a. Determine which of their clients are at highest risk for HIV/STDs and provide condoms and instructions for these clients. If additional funding for STD prevention activities becomes available within the service period of this Agreement Addendum (AA), an AA Revision may be issued by DPH in order to purchase additional condoms.
- b. Create and maintain a policy to offer condoms to clients at highest risk for HIV/STD.

2. Patient Educational Materials

- a. Select patient educational materials appropriate to the population at risk for HIV and other STDs in their jurisdiction and make these materials available to clients at highest risk for HIV and other STDs. If additional funding for STD prevention activities becomes available within the service period of this AA, an AA Revision may be issued by DPH in order to purchase additional education materials.
- b. Create a policy to offer culturally and age appropriate patient educational materials to clients found to be at highest risk for transmission of HIV and other STDs

3. Staff Training

- a. Identify staff training needs specific to STD clinical services and continuing competency and use these funds to provide the appropriate training to its registered nurses, advanced practice providers, and physicians, thereby assuring high quality patient care. If additional funding for STD prevention activities becomes available within the service period of this AA, an AA Revision may be issued by DPH in order for the Local Health Department to provide additional staff training.

IV. Performance Measures / Reporting Requirements:

1. **Performance Measure # 1:** The Local Health Department will have a policy to offer condoms to 100% of its clients at highest risk for HIV/STD.

Reporting Requirements: Complete the survey in Smartsheet¹ by January 16, 2026 attesting to the existence of and use of this condom distribution policy. This policy must be available for review by the Regional TATP Nurse Consultant at the onsite monitoring visits and upon request.

2. **Performance Measure # 2:** The Local Health Department will have a policy to offer culturally and age-appropriate patient educational materials to 100% of its clients found to be at highest risk for transmission of HIV and other STDs.

¹ <https://app.smartsheet.com/b/publish?EQBCT=8716e48245fe46559be725a9d628d031>

Reporting Requirements: Complete the survey in Smartsheet² by January 16, 2026 attesting to the existence of and use of the policy to offer culturally and age-appropriate patient educational materials to all its clients. This policy must be available for review by the Regional TATP Nurse Consultant at the onsite monitoring visits and upon request.

3. **Performance Measure #3:** If the Local Health Department uses these AA's funds to support staff training, it will keep a training log of these educational activities.

Reporting Requirements: An electronic copy of this staff training log shall be provided to the Regional CDB Nurse Consultant no later than May 29, 2026.

4. **Required Reporting Certifications**

If awarded federal pass-through funds, the LHD as well as all SubGrantees 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."

5. **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 submitted via Smartsheet 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

² <https://app.smartsheet.com/b/publish?EQBCT=8716e48245fe46559be725a9d628d031>

- 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. The Regional Technical Assistance and Training Program (TATP) Nurse Consultants will assess the Local Health Department's performance through an annual review of the following:
 - a. Reviewing the Local Health Department's most recent condom distribution and patient education material policies;
 - b. Reviewing annual training logs of STD Clinical services staff (only if using funds to support staff training); and
 - c. Reviewing STD ERRN verification reports (only if using funds to support ERRN training). (STD ERRN verification reports are provided by the Local Health Department to the TATP Nurse Consultants annually under the AA for Activity 536.)
2. Every three years, a TATP Nurse Consultant will assess the Local Health Department's performance by an on-site monitoring visit. At that in-person visit, the TATP Nurse Consultant will observe how both the patient education and condom distribution policies are implemented, via observation of clinic processes and review of medical record documentation of education and condom distribution.
3. If the assessment results in compliance concerns, the Regional TATP Nurse Consultants shall conduct conference calls with the Local Health Department to provide technical assistance. If technical assistance does not prove beneficial, the AA may then be terminated 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.”