SLFRF Compliance Report - SLT-3356-P&E Report Q2 2022 Report Period : Quarter 2 2022 (April-June)

Recipient Profile

Recipient Information

Recipient UEI	LHMKBD4AGRJ5
Recipient TIN	566000345
Recipient Legal Entity Name	Union County, North Carolina
Recipient Type	Metro City or County
FAIN	
CFDA No./Assistance Listing	
Recipient Address	500 N Main
Recipient Address 2	
Recipient Address 3	
Recipient City	Monroe
Recipient State/Territory	NC
Recipient Zip5	28112
Recipient Zip+4	
Recipient Reporting Tier	Tier 2. Metropolitan cities and counties with a population below 250,000 residents which received more than \$10 million in SLFRF funding
Discrepancies Explanation	
Is the Recipient Registered in SAM.Gov?	Yes

Project Overview

Does your jurisdiction have projects to report as of this	
reporting period?	

Project Name: Program Administration

Project Identification Number	A 7.1
Project Expenditure Category	7-Administrative
Project Expenditure Subcategory	7.1-Administrative Expenses
Status To Completion	Completed less than 50%
Adopted Budget	\$1,427,811.00
Total Cumulative Obligations	\$2,851.13
Total Cumulative Expenditures	\$2,851.13
Current Period Obligations	\$2,851.13
Current Period Expenditures	\$2,851.13
Project Description	Program administration staff will manage and coordinate use of funds to ensure transparency and public accountability while maintaining a robust documentation and compliance methodology. Staff include one (1) Local Disaster Recovery Manager, one (1) Grants Accountant, and one (1) Procurement Specialist.

Project Name: Detention Officer Positions

Project Identification Number	PH-NEI 3.2
Project Expenditure Category	3-Public Health-Negative Economic Impact: Public Sector Capacity
Project Expenditure Subcategory	3.1-Public Sector Workforce: Payroll and Benefits for Public Health, Public Safety, or Human Services Workers
Status To Completion	Completed less than 50%
Adopted Budget	\$1,245,270.00
Total Cumulative Obligations	\$52,424.81
Total Cumulative Expenditures	\$52,424.81
Current Period Obligations	\$52,424.81
Current Period Expenditures	\$52,424.81
Project Description	This project will fund four (4) Detention Officers to provide the County Jail with adequate staff to meet challenges brought on by the COVID-19 pandemic.
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	This project will provide the County jail with adequate staff to meet state mandates requiring additional staff coverage for quarantined detention officers, address fewer services provided by the state, such as prisoner transports, requiring additional staff coverage at overtime rates, and address

	resignation of detention officers due to decreased morale, loss of holiday time, and depletion of the overtime budget, all of which were the result of the COVID-19 pandemic.
Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19	The County determined the number of detention officers needed based on an estimated workload assessment using the factors described above that encompassed the public health and negative economic impacts experienced.
Number of government FTEs responding to COVID-19 supported under this authority	4

Project Name: COVID-19 Monitoring, Mitigation and Response

Project Identification Number	PH-NEI 3.1
Project Expenditure Category	3-Public Health-Negative Economic Impact: Public Sector Capacity
Project Expenditure Subcategory	3.1-Public Sector Workforce: Payroll and Benefits for Public Health, Public Safety, or Human Services Workers
Status To Completion	Not Started
Adopted Budget	\$2,117,062.00
Total Cumulative Obligations	\$0.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
Project Description	The COVID-19 Monitoring, Mitigation and Response Project will extend the non-county funded support of critical new positions in the Public Health Communicable Disease Program Unit engaged in COVID-19 response and monitoring efforts. Positions include two (2) Public Health Nurses, one (1) Epidemiologist, one (1) Communicable Disease Program Nurse Supervisor, one (1) Nurse Informatics position, one (1) Lab Technician, one (1) Administrative Support position, one (1) Childcare Health Nurse consultant and one (1) Communications Specialist.

Project Name: Community Broadband Internet

Project Identification Number	I 5.1
Project Expenditure Category	5-Infrastructure
Project Expenditure Subcategory	5.20-Broadband: IIJA Match
Status To Completion	Not Started
Adopted Budget	\$7,325,000.00
Total Cumulative Obligations	\$0.00
Total Cumulative Expenditures	\$0.00
Current Period Obligations	\$0.00
Current Period Expenditures	\$0.00
	The Community Broadband Internet Project will facilitate the dissemination of broadband internet access across the county and allow Internet Service Providers to leverage state

	ARPA funding to build out the necessary infrastructure. The project will serve up to 3,000 homes and businesses mostly in rural areas that do not have adequate high-speed internet above 25 Mbps Download/3 Mbps Upload.
Projected/actual construction start date	1/1/2023
Projected/actual initiation of operations date	1/1/2025

Project Name: COVID-19 Medical Insurance Costs

Project Identification Number	PH 1.1
Project Expenditure Category	1-Public Health
Project Expenditure Subcategory	1.6-Medical Expenses (including Alternative Care Facilities)
Status To Completion	Completed 50% or more
Total Cumulative Obligations	\$2,377,543.62
Total Cumulative Expenditures	\$2,377,543.62
Current Period Obligations	\$83,804.57
Current Period Expenditures	\$83,804.57
Project Description	Union County Government operates a self-funded health insurance plan and will pay for excess health insurance costs due to COVID-19 medical care
What Impacted and/or Disproportionally Impacted population does this project primarily serve?	1 Imp General Public
Brief description of structure and objectives of assistance program(s), including public health or negative economic impact experienced	The program disburses funds to medical providers for claims incurred by public employees. The objective is to cover unreimbursed expenses for medical care for COVID-19 testing and treatment, primarily uncompensated care costs to medical providers on behalf of public employees. During the pandemic, particularly when variants were surging, our employees experienced an increased need for medical care due to COVID-19 infections and needed to comply with COVID-19 public health precautions.
Brief description of recipient's approach to ensuring that response is reasonable and proportional to a public health or negative economic impact of Covid-19	The increased need for medical care experienced by our employees due to COVID-19 infections resulted in an immediate financial impact and a sustained impact to our capacity to deliver services to the public. As such, funding for this program was needed immediately to offset this impact compared to other projects identified for funding. Funding is anticipated to end June 30, 2022 due to a declining need for that medical care, which correlates with the declining need among the general public.

Subrecipients

Subrecipient Name: Carolinas Medical Center

TIN	561398929
Unique Entity Identifer	
POC Email Address	
Address Line 1	100 Blythe Blvd
Address Line 2	
Address Line 3	
City	Charlotte
State	NC
Zip	28203
Zip+4	5812
Entity Type	Beneficiary
Is the Recipient Registered in SAM.Gov?	N/A

Subrecipient Name: Atrium Health Union

TIN	560529945
Unique Entity Identifer	
POC Email Address	
Address Line 1	600 Hospital Drive
Address Line 2	
Address Line 3	
City	Monroe
State	NC
Zip	28112
Zip+4	6000
Entity Type	Beneficiary
Is the Recipient Registered in SAM.Gov?	N/A

Subawards

Subward No: 2022-068004192-0

Subaward Type	Transfer: Lump Sum Payment(s)
Subaward Obligation	\$76,123.46
Subaward Date	2/11/2022
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC
Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges
Subrecipient	Atrium Health Union
Period of Performance Start	2/11/2022
Period of Performance End	3/22/2022

Subward No: 2021-314004780-0a

Subaward Type	Direct Payment
Subaward Obligation	\$149,545.99
Subaward Date	9/12/2021
Place of Performance Address 1	100 Blythe Blvd
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Charlotte
Place of Performance State	NC
Place of Performance Zip	28203
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges
Subrecipient	Carolinas Medical Center
Period of Performance Start	9/12/2021
Period of Performance End	11/16/2021

Subward No: 2021-305008958-0

Subaward Type	Direct Payment
Subaward Obligation	\$64,867.77

Subaward Date	9/26/2021
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC
Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges, Private Room Charges
Subrecipient	Atrium Health Union
Period of Performance Start	9/26/2021
Period of Performance End	11/9/2021

Subward No: 2021-320001961-0

Subaward Type	Direct Payment
Subaward Obligation	\$61,436.02
Subaward Date	10/4/2021
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC
Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges, Private Room Charges
Subrecipient	Atrium Health Union
Period of Performance Start	10/4/2021
Period of Performance End	11/23/2021

Subward No: 2021-312000902-0

Subaward Type	Direct Payment
Subaward Obligation	\$74,610.57
Subaward Date	8/30/2021
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC

Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges, Private Room Charges
Subrecipient	Atrium Health Union
Period of Performance Start	8/30/2021
Period of Performance End	11/16/2021

Subward No: 2021-146004480-0

Subaward Type	Direct Payment
Subaward Obligation	\$413,385.93
Subaward Date	3/16/2021
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC
Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges, Private Room Charges
Subrecipient	Atrium Health Union
Period of Performance Start	3/16/2021
Period of Performance End	6/1/2021

Subward No: 2021-314004780-0

Subaward Type	Transfer: Lump Sum Payment(s)
Subaward Obligation	\$0.00
Subaward Date	9/12/2021
Place of Performance Address 1	600 Hospital Drive
Place of Performance Address 2	
Place of Performance Address 3	
Place of Performance City	Monroe
Place of Performance State	NC
Place of Performance Zip	28112
Place of Performance Zip+4	
Description	Inpatient Hospital ICU Room Charges, Miscellaneous Charges, Private Room Charges
Subrecipient	Atrium Health Union
Period of Performance Start	9/12/2021

11/16/2021

Expenditures

Expenditures for Awards more than \$50,000

Expenditure: EN-00257436

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0157281
Subaward No	2022-068004192-0
Subaward Amount	\$76,123.46
Subaward Type	Transfer: Lump Sum Payment(s)
Subrecipient Name	Atrium Health Union
Expenditure Start	2/11/2022
Expenditure End	3/22/2022
Expenditure Amount	\$76,123.46

Expenditure: EN-00081046

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0067172
Subaward No	2021-305008958-0
Subaward Amount	\$64,867.77
Subaward Type	Direct Payment
Subrecipient Name	Atrium Health Union
Expenditure Start	9/26/2021
Expenditure End	11/9/2021
Expenditure Amount	\$64,867.77

Expenditure: EN-00081051

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0067255
Subaward No	2021-320001961-0
Subaward Amount	\$61,436.02
Subaward Type	Direct Payment
Subrecipient Name	Atrium Health Union
Expenditure Start	10/4/2021
Expenditure End	11/23/2021
Expenditure Amount	\$61,436.02

Expenditure: EN-00081168

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0067260
Subaward No	2021-312000902-0
Subaward Amount	\$74,610.57
Subaward Type	Direct Payment
Subrecipient Name	Atrium Health Union
Expenditure Start	8/30/2021
Expenditure End	11/16/2021
Expenditure Amount	\$74,610.57

Expenditure: EN-00081172

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0067379
Subaward No	2021-314004780-0
Subaward Amount	\$0.00
Subaward Type	Transfer: Lump Sum Payment(s)
Subrecipient Name	Atrium Health Union
Expenditure Start	9/12/2021
Expenditure End	11/16/2021
Expenditure Amount	\$149,545.99

Expenditure: EN-00081178

Project Name	COVID-19 Medical Insurance Costs
Subaward ID	SUB-0067279
Subaward No	2021-146004480-0
Subaward Amount	\$413,385.93
Subaward Type	Direct Payment
Subrecipient Name	Atrium Health Union
Expenditure Start	3/16/2021
Expenditure End	6/1/2021
Expenditure Amount	\$413,385.93

Aggregate Expenditures for Awards less than \$50,000

Expenditure: EN-00433080

Project Name	Detention Officer Positions

Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$52,424.81
Total Period Obligation Amount	\$52,424.81

Expenditure: EN-00433084

Project Name	Program Administration
Subaward Type (Aggregates)	Aggregate of Direct Payments
Total Period Expenditure Amount	\$2,851.13
Total Period Obligation Amount	\$2,851.13

Expenditure: EN-00257421

Project Name	COVID-19 Medical Insurance Costs
Subaward Type (Aggregates)	Aggregate of Contracts Awarded
Total Period Expenditure Amount	\$210,748.73
Total Period Obligation Amount	\$210,748.73

Expenditure: EN-00416719

Project Name	COVID-19 Medical Insurance Costs
Subaward Type (Aggregates)	Aggregate of Transfers
Total Period Expenditure Amount	\$83,804.57
Total Period Obligation Amount	\$83,804.57

Expenditure: EN-00081292

Project Name	COVID-19 Medical Insurance Costs
Subaward Type (Aggregates)	Aggregate of Contracts Awarded
Total Period Expenditure Amount	\$1,243,020.58
Total Period Obligation Amount	\$1,243,020.58

Report

Revenue Replacement

Is your jurisdiction electing to use the standard allowance of up to \$10 million, not to exceed your total award allocation, for identifying revenue loss?	Yes
Revenue Loss Due to Covid-19 Public Health Emergency	\$10,000,000.00
Were Fiscal Recovery Funds used to make a deposit into a pension fund?	No
Please provide an explanation of how revenue replacement funds were allocated to government services	Construction of new regional library, construction of public safety training center, fire training equipment, equipment for new crime lab, public records request management system, whole body security scanning for arrestees, hotel costs reimbursement to community shelter, emergency management equipment

Overview

Total Obligations	\$2,432,819.56
Total Expenditures	\$2,432,819.56
Total Number of Projects	5
Total Number of Subawards	7
Total Number of Expenditures	11

Certification

Authorized Representative Name	Clayton Voignier
Authorized Representative Telephone	7042833687
Authorized Representative Title	Director, Strategy & Innovation
Authorized Representative Email	clayton.voignier@unioncountync.gov
Submission Date	7/29/2022 10:07 AM