

VANCE COUNTY
Board of Commissioners



Annual Planning Retreat
March 8, 2023



Vance County Board of Commissioners
2023 Annual Planning Retreat
Wednesday, March 8, 2023 (8:45am – 4:00pm)
(Perry Memorial Library)



1. **(8:45AM) – Coffee and Gather**

2. **(9:00 - 12:00PM) – Strategies for High Performing Boards/Board Values**
Lydian Altman, Senior Manager, UNC School of Government Center for Public Leadership and Governance

3. **(12:00PM) – Lunch**

4. **(12:45 – 1:30PM) – County Financial Condition/FY23-24 Budget Outlook & Guidance**
Katherine Bigelow, Finance Director
 - Financial Overview – 7/1/2022 – 12/31/2022 Finance Report and Revenue Outlook
 - American Recovery Plan Update – ARPA/National Opioid Settlement
 - Major Budget and Staffing Impacts for FY24
 - Review of Debt
 - Budget Calendar for FY24

5. **(1:30 – 1:55PM) – Capital Improvements Plan Overview**
Katherine Bigelow, Finance Director

6. **(1:55PM) – Break**

7. **(2:00 – 3:30PM) – Goals Review and Goal Setting**
Jordan McMillen, County Manager
 - FY22-23 Goals Review
 - FY23-24 Goals Prioritization

**STRATEGIES FOR HIGH PERFORMING
BOARDS/BOARD VALUES**

**LYDIAN ALTMAN, SENIOR MANAGER
UNC SCHOOL OF GOVERNMENT**

Vance County Strategic Retreat¹

Perry Memorial Library, 205 Breckenridge St, Henderson, NC 27536

8:45 am to 12:00 pm*

Working Together to Achieve Results*

Attendees (13):

- Board Chair Yolanda J. Feimster, Vice-Chair Dan Brummitt, Council Members Sean A. Alston, Sr., Carolyn Faines, Thomas S. Hester, Jr., Leo Kelly, Jr., and Archie B. Taylor, Jr. (7)
- County Manager Jordan McMillen, Assistant County Manager Chris Dillon, Attorney Jonathan Care, Finance Director Katherine S. Bigelow, Human Resources Director Argretta Johnen, and Clerk to the Board Kelly H. Grissom (6)

Board Development Learning Objectives:

- To strengthen relationships and begin building a high performing board by considering what elements would help this board perform at its best.
 - Develop a set of operating principles and behavioral changes that help guide how the board wants to work together and with senior staff. [Deliverable]
- To clarify our roles and responsibilities as members of a governing board and staff.
 - Create understanding about who is responsible for what functions.
 - Build agreement on ways to uphold these expectations. [Deliverable]

Handouts:

1. Discussion Guidelines
2. High Performing Teamwork
3. Getting the Work Done
4. Gauging Support
5. Seven Expectations for Effective Board-Manager Relations: Best Practices
6. Sample Operating Principles and Accountability Measures

Board of Commissioners' Mission Statement

The mission of the Vance County Board of Commissioners is to provide leadership and support for an effective county government that seeks to enhance the quality of life for all its citizens.”

¹ This agenda covers just the morning session, which is scheduled from 8:45 am to 12:00 pm.

Participant Agenda

8:45 Light Breakfast & Gather

9:00 Welcome

Board Chair Yolanda J. Feimster

1. Getting Started:

Lydian Altman, SOG Facilitator

What can help us get started and stay focused on achieving our outcomes?

- A. Overview of the retreat objectives and agenda
- B. Introductions:
 - Name, length of residency here, tenure on the Board or with the County
 - *As you read the Vance County BOC Mission statement, what key word or phrase stands out to you, and why?*
 - *How has or could this statement shape your view of your role on this governing team?*
- C. Discussion Guidelines (Handout #1)

9:30-10:30

2. Moving Towards Board Excellence:

How would we define a high performing board, and what steps can we take to become one?

- A. Using High Performance Teamwork (Handout #2), conduct paired interviews to develop elements.
- B. Report out and find common themes.
- C. Facilitator records on flipcharts labeled:
 - a. *existing assets(Q1)*
 - b. *qualities (Q2a)*
 - c. *enabling factors (Q2b)*
 - d. *activities to move towards high performing board (Q3)*
- D. Seek agreement on what applies to this group.
- E. Determine top priority focus areas of work related to Board performance for 2023.

10:30-10:40 Break

10:40-11:25 **Moving Towards Board Excellence** – continued

What might this governing board have to do differently to move towards these high performing priorities?

- A. In small groups, review Changes in How We Do Business. (Handout #3)
Discuss any recommended changes in behavior and note (legibly!) on your handout.
Prepare to report out suggested changes.
- B. Group clarifies recommended changes.
- C. Seek group support for making changes using Gauging Support. (Handout #4)

11:25-11:55

3. Getting Our Work Done:

Lydian Altman, SOG Facilitator

What are the expectations placed on us by our roles in this governing team?

- A. Seven Expectations for Effective Board-Manager Relations: Best Practices. (slides & Handout #5)
- B. In pairs, choose at least 1-2 of these 7 expectations to discuss with your partner.
 - i. What questions or clarifications do you need? (make legible notes)
 - ii. Can you support these expectations?
 - iii. How will you know when the group is fulfilling these expectations? (accountability measures)
 - iv. How can the organization benefit when these expectations are being met? (elements of organizational excellence)
- C. Be prepared to share the highlights of your discussion with others.

4. Wrap up & Evaluation

- *What worked well about your facilitated morning session?*
- *What would you do differently next time?*

12:00 Lunch

HANDOUT #1: DISCUSSION GUIDELINES FOR PRODUCTIVE MEETINGS

The following ground rules have helped make meetings more productive:

1. **Participate fully.** It's alright to disagree. Everyone should have the opportunity to state his or her own views, regardless of rank or other differences.
2. **Work on the problem.** Put other issues aside, including personalities, offices, or other differences. Show respect for each other.
3. **Focus on interests, not positions.** Explain why you favor a particular course of action. Invite questions so you can explain your reasons fully. Balance advocacy and inquiry.
4. **Share all relevant information.** Be specific. Agree on what important words mean. Discuss "undiscussable" issues.
5. **Stay focused.** Discuss a topic long enough for everybody to be clear about it.
6. **Decide how the group will make decisions.** Strive for consensus.

The values that underlie these ground rules should include:

- Developing and sharing valid information
- Making free and informed choices
- Developing internal commitment to carrying out those choices

Adapted from *The Skilled Facilitator: Practical Wisdom for Developing Effective Groups* by Roger Schwarz. Published by Jossey-Bass, Inc., 1994.

HANDOUT #2: HIGH PERFORMING TEAMWORK

Get into pairs (ideally pair yourself with someone with whom you don't normally have much contact, or you would like to know better). Ask your partner these questions and listen to the response. You may want to take notes. You will have a chance to share your partner's vision with others in the next exercise. Switch talking/listening roles after 12 minutes. You have 24 minutes to complete this exercise.

* * * * *

As an elected body, decisions are made together. No one person can decide; it takes the majority to create movement and progress. To govern effectively in today's complex and often divided environment, teamwork is an essential ingredient for success. In high performing teams, members feel satisfied that their own interests are met, the work of the team is accomplished, and members want to continue to work together. An effective team is viewed as responsive, well-informed, and performing at its best in service to each other and their communities.

High performing teamwork requires common goals, open communication and full participation in planning and decision-making. Most people work best in a team environment where enthusiasm and team spirit are high, where ideas and information are shared, and where team members work together to accomplish common goals. The synergy that comes from winning teamwork adds value to the team members, residents, and the organization's reputation.

1. What are the qualities in your existing governing team that most foster enthusiasm, information sharing, and collaboration towards common goals? (existing assets)

2. Describe the best, most successful teamwork that you have ever seen or been a part of.
 - a. What was it about that team's activities that caused you to define them as high performing? (definition)

 - b. What were all the conditions that allowed that winning teamwork to emerge? (enabling factors)

3. What can you do to foster winning teamwork at an even higher and more consistent level with this governing team? (activities to move towards high performance)

HANDOUT #3: CHANGES IN HOW WE DO BUSINESS

Behavior	Suggested Change
1. Preparation for meetings	
2. Time spent during the meetings	<p><u>Example:</u></p> <ul style="list-style-type: none"> • Behavior: Meetings last too long. • Suggested Change: Consider limiting the number of proclamations or moving them into consent agenda.
3. Communication between meetings	
4. Making and upholding decisions	
5. Stewardship of resources	

Behavior	Suggested Change
6. Considering new or different types of information	
7. Interpersonal relationships	
8. Relationships with people from other committees, organizations, jurisdictions	
9. Holding each other accountable	

HANDOUT #4: GAUGING SUPPORT

Levels of Support			
Rate your individual level of support for this idea/topic/issue.			
We're using a spectrum to gauge support, not a vote of YES or NO.			
a	b	c	d
Full support or agreement with the proposal.	Agreement with most aspects of the proposal, and, despite continued concerns with some elements, <i>willingness to go along</i> with the proposal.	Significant concerns or outright disagreement with some or all elements of the proposal, <i>but will not oppose</i> the action or decision ("standing aside").	Continued <i>strong disagreement</i> with the proposal
✓ If all members of the group are at levels a-c, then there is some degree of consensus.			
Concerns: What will help you move further up into the green?			

Facilitator's notes:

If all members of the group express approval at levels A, B or C, then they have reached consensus. If some members continue to disagree strongly (level D), then consensus has not been reached. The challenge to the group is to see what interest must be addressed in the proposal to move people at D to C (or higher) and from C to B (or higher) and from B to A.

In addition, it is important to find out the nature of disagreements with a proposal. It is often helpful to characterize concerns as follows:

- Minor concerns with wording or editing.
- Agreement with the main thrust of the proposal, but concerns with specific elements which, if changed, would lead to agreement.
- Major concerns: principles disagreement with the overall direction of the proposal, which if not addressed, would lead the member to block the consensus (level D).

Source: Hustedde, Smutko, and Kapsa, *Turning Lemons into Lemonade* (n.d.)

HANDOUT #5: SEVEN EXPECTATIONS FOR EFFECTIVE BOARD-MANAGER RELATIONS

Expectation 1: The Board and the Manager Jointly Strive for Good Service to Citizens

- Manager ensures that administration provides the very best service possible to the community.
- Manager creates an organizational culture of responsiveness and performance.
- Manager fully accepts responsibility with the board when things go wrong.
- Board supports and steers citizen complaints to administration.
- Board members inform manager of problems and give manager the opportunity to get problems fixed.

Expectation 2: The Manager is a Valued Advisor to the Board

- Manager offers balanced and impartial policy advice to board.
- Manager recommends any measures that he/she deems expedient, including alternatives, assessment, and relevant information.
- Manager may make an unpopular recommendation that might not have very good prospects of being accepted.
- Manager gets fully behind board decisions and ensures that the administration does the same.
- Manager helps elected officials explain their decision to the public and helps the public understand board's point of view.

Expectation 3: Elected Officials' Relationships with Employees Are Carefully Managed

- Board members observe chain of command.
- Board members and the manager protect planned workflow.
- Manager may encourage direct contact between board members and employees for routine inquiries or requests that do not affect administrative workloads.

Expectation 4: The Board Acts as a Body and Is Dealt with as a Body

- Board takes official action as a body.
- Manager welcomes suggestions from individual board members that do not conflict with board policy.
- Individual member proposals that set new directions or require resource reallocations are put before entire board.
- Manager treats all members of board alike.
- Manager seeks to prevent board members from being surprised or caught off guard on issues.
- Manager ensures all board members have the same level of information and understanding.

Expectation 5: The Manager and the Board Give Each Other a Chance to Prove Themselves

- Manager directs administration based on what a majority of board decides.
- Board members recognize that campaign rhetoric seldom stands up to the complexity of governing, leading, or managing.
- Manager seeks to earn the trust and the confidence of new and veteran members.

Expectation 6: The Manager and the Board Freely Give and Seek Feedback

- Manager and board members work to maintain open communications.
- Manager provides all board members with accurate, relevant, and timely information.
- Board members ask questions and make their interests, positions, and feelings known to the manager.
- Board members offer constructive criticism to the manager on an ongoing basis.
- Board members clarify their expectations of the manager, providing direction and benchmarks for success.
- Board members and the manager freely give and accept feedback in the spirit of continuous improvement.

Expectation 7: The Manager and the Governing Body Work Together to Develop a Highly Effective Governing Body

- Manager prepares agenda and plans meetings that focus on major topics.
- Manager and board chair orient new board members, encouraging new members to do their homework, ask good questions, and exercise caution and courtesy when speaking publicly about the county and staff.
- Manager and board members behave in a manner that encourages citizen confidence in county government.
- Manager helps chair and board develop high-performing habits.

HANDOUT #6: SAMPLE OPERATING PRINCIPLES AND ACCOUNTABILITY MEASURES

Operating Principles:

If I overheard people talking positively about how the board does it work, what would you hope I hear and what do you need to do to hear these comments?

What we want to hear	What we need to do
<p>We listen to each other and our citizens.</p> <p>We treat each other and citizens with respect.</p> <p>We have good intentions even when the individuals do not agree with our decisions.</p> <p>We care about what the people want.</p> <p>We deal with issues and move on even without unanimity.</p> <p>We fulfill our responsibilities.</p>	<p>We talk to listen instead of talking to reply.</p> <p>We are fair and considerate even in disagreement.</p> <p>We make sure to explain our rationale for decisions such as how taxes might not be favorable but are good for the community. We speak in real world terms.</p> <p>We listen to what citizens have to say but uphold time limits to ensure that everyone gets an opportunity to speak. We give warnings to citizens to wrap it up when speaking so they do not get cut off. We pay particular attention to public values.</p> <p>We do not hold grudges. Move from one vote to the next.</p> <p>We come prepared. We are respectful of resources. We inform the public. We reach out with questions when needed. We share ideas with other agencies and jurisdictions. We are present.</p>

TO ACCOMPLISH OUR WORK AS A COUNCIL, WE WILL:

- Be thoughtful, deliberate, and consider our options carefully.
- Treat all fairly and seek results that benefit all in the county.
- Stay tuned and listen to feedback from residents.
- Practice civility by cooperating with and offering respect for each other.
- Rely on professional staff for advice and counsel.

As a Board of Commissioners, we:

- **Strive for efficiency** in the way we handle business. We are hard-working and attend all meetings.
- Keep the **best interests of the community** uppermost in our minds.
- Consider all aspects of a situation and make **thorough, deliberate, and well-reasoned decisions**.
- **Explore all viewpoints**. We are open to hearing from others, learning from them and compromising when needed.
- **Stay cohesive, collaborative, collegial, and connected** to the manager and to each other.
- **Demonstrate respect for all opinions**, especially in public. And we support the decisions of the board. Once decisions are made by the majority, we support that decision.
- Tackle **new and novel ideas** and processes.

Accountability Measures: How do you propose to hold each other accountable for upholding these expectations?

- Allow yourself to be called out and be respectful when airing issues.
- Utilize humor and lighthearted responses to show that you are being genuine and not trying to be mean or provoking.
- Know when to address issues in private. Do not air dirty laundry.
- Treat people with courtesy and respect - Golden rule.
- Explain your rationale for decisions.
- Know that we do not have to agree on everything, but we do need to follow the wishes of the body.
- Communicate.
- Make no assumptions.
- Listen completely to understand, even if you do not plan on changing your position.

**COUNTY FINANCIAL CONDITION
FY 23-24 BUDGET OUTLOOK & GUIDANCE**

KATHERINE BIGELOW, FINANCE DIRECTOR

General Fund (10)

Account Description	22/23 Budget	22/23 Actual	Remaining		21/22 Budget	21/22 Actual
			Balance	% Used		
301 AD VALOREM TAXES	26,176,426.00	19,808,641.73	6,367,784.27	76%	25,083,725.00	19,189,620.79
315 VEHICLE RENTAL TAX	35,000.00	22,720.77	12,279.23	65%	32,500.00	20,227.31
325 PRIVILEGE LICENSE TAX	2,750.00	30.00	2,720.00	1%	2,750.00	230.50
329 INVESTEMENT EARNINGS	151,000.00	229,954.95	-78,954.95	152%	152,000.00	2,511.40
332 ANIMAL CONTROL FEES	116,600.00	52,176.12	64,423.88	45%	130,100.00	49,500.69
333 CO-OPERATIVE EXTENSION	11,500.00	4,150.92	7,349.08	36%	11,500.00	6,529.26
334 4-H REVENUE	5,500.00	280.00	5,220.00	5%	5,500.00	698.65
342 PLANNING FEES	29,000.00	11,744.00	17,256.00	40%	27,000.00	16,494.00
345 LOCAL GOVERNMENT SALES TAX	11,170,000.00	4,400,424.31	6,769,575.69	39%	10,029,178.00	4,147,035.66
346 STATE REVENUES	166,600.00	2,273.82	164,326.18	1%	166,600.00	1,233.28
347 ABC REVENUES	122,000.00	92,679.31	29,320.69	76%	152,000.00	61,758.72
348 DSS STATE REVENUES	6,406,960.00	2,424,320.69	3,982,639.31	38%	6,331,650.00	1,959,692.81
349 DSS FEDERAL REVENUES	488,842.00	287,574.52	201,267.48	59%	431,610.00	200,800.89
350 DSS LOCAL REVENUES	78,106.78	13,331.08	64,775.70	17%	51,213.78	8,979.63
353 FEDERAL REVENUES	59,000.00	0	59,000.00	0%	59,000.00	0
356 REGISTER OF DEEDS REVENUE	315,500.00	418,573.21	-103,073.21	133%	426,712.00	315,360.80
357 INSPECTION FEES	305,000.00	173,510.56	131,489.44	57%	300,000.00	181,413.46
358 JAIL REVENUES	351,100.00	171,009.89	180,090.11	49%	351,100.00	131,202.42
359 SHERIFF REVENUE	254,500.00	126,180.27	128,319.73	50%	259,100.00	95,972.66
360 AMBULANCE REVENUE	2,403,600.00	1,050,367.03	1,353,232.97	44%	2,053,600.00	1,028,316.66
367 REFUNDS & REIMBURSEMENTS	518,281.00	826,250.15	-307,969.15	159%	1,403,120.00	364,484.75
369 REVENUE FROM CITY OF HENDERSON	1,177,712.00	507,794.42	669,917.58	43%	1,005,274.00	591,282.36
370 MISCELLANEAOUS	519,582.00	307,813.64	211,768.36	59%	1,108,324.00	137,132.61
380 GRANTS	469,340.00	209,001.44	260,338.56	45%	448,590.00	288,801.00
397 TRANSFERS FROM OTHER FUNDS	2,081,476.00	155,900.00	1,925,576.00	7%	816,467.00	66,950.00
399 FUND BALANCE	3,139,218.01	0	3,139,218.01	0%	1,994,887.00	0
10 GENERAL FUND Revenue Total	56,554,593.79	31,296,702.83	25,257,890.96		52,833,500.78	28,866,230.31
Account Description	22/23 Budget	22/23 Actual			21/22 Budget	21/22 Actual
410 GOVERNING BODY	332,355.00	213,445.44	118,909.56	64%	312,364.00	240,354.00
430 ELECTIONS	361,838.00	147,395.31	214,442.69	41%	274,347.00	101,933.02
440 ADMINISTRATION/FINANCE	1,052,970.00	494,591.03	558,378.97	47%	999,316.00	457,030.29
450 TAX OFFICE	851,642.20	440,824.95	410,817.25	52%	787,784.57	416,934.09
470 LEGAL SERVICES	66,117.00	16,852.55	49,264.45	25%	66,114.00	4,591.00
480 REGISTER OF DEEDS	326,236.00	152,807.61	173,428.39	47%	406,732.62	162,368.52
490 INFORMATION TECHNOLOGY	354,874.00	169,876.24	184,997.76	48%	325,290.00	161,076.51
491 ECONOMIC DEVELOPMENT	268,453.00	97,381.95	171,071.05	36%	240,787.00	75,868.38
500 COUNTY ADMINSTRATION	324,154.00	124,230.89	199,923.11	38%	231,963.00	123,583.34
501 COUNTY ADMIN BUILDING	268,830.00	29,808.84	239,021.16	11%	80,020.00	17,449.06

Account Description	22/23 Budget	22/23 Actual			21/22 Budget	21/22 Actual
502 H.A. DENNIS BLDG	76,870.00	39,730.38	37,139.62	52%	76,791.00	18,261.01
504 RUIN CREEK SENIOR CENTER	0.00	0.00	0.00		51,293.00	18,741.29
505 COURTHOUSE	520,177.00	202,281.77	317,895.23	39%	555,451.00	269,767.25
506 RUIN CREEK RD BUILDING	50,210.00	13,114.55	37,095.45	26%	116,570.00	47,639.63
510 SHERIFF'S OFFICE	5,483,114.81	2,411,630.70	3,071,484.11	44%	5,117,112.00	2,280,636.94
514 JAG GRANT	7,000.00	0.00	7,000.00	0%	7,000.00	0.00
517 SHERIFF INTRADICTION FUND	2,118.00	0.00	2,118.00	0%	5,000.00	15.00
518 SCHOOL RESOURCE OFFICER	346,997.00	105,918.33	241,078.67	31%	327,767.00	81,205.67
519 EATON JOHNSON BUILDING	800,170.00	548,560.94	251,609.06	69%	653,245.00	447,212.68
520 JAIL	4,455,379.00	2,216,465.78	2,238,913.22	50%	4,340,490.00	2,127,942.27
525 ENVIROMENTAL SERVICES	55,000.00	23,100.00	31,900.00	42%	90,000.00	18,300.00
530 AMBULANCE	3,656,006.00	1,598,973.16	2,057,032.84	44%	3,469,453.00	1,353,077.73
531 FIRE DEPARTMENT	1,876,380.00	941,484.88	934,895.12	50%	1,300,093.00	614,568.23
532 FIRE MARSHALL	0.00	0.00	0.00		89,516.00	2,099.08
541 PLANNING AND DEVELOPMENT	645,392.00	251,491.88	393,900.12	39%	637,563.00	224,008.62
555 CENTRAL SERVICES	862,583.00	378,672.17	483,910.83	44%	803,766.00	223,077.38
576 SOIL AND WATER	127,996.00	61,357.61	66,638.39	48%	121,225.00	58,538.37
580 METAL HEALTH	279,660.00	116,240.38	163,419.62	42%	278,967.00	114,391.86
590 PUBLIC HEALTH	892,850.00	454,478.89	438,371.11	51%	850,701.00	424,175.95
599 ANIMAL SERVICE	587,615.00	344,655.18	242,959.82	59%	599,084.00	258,399.47
600 OTHER AGENCIES	2,102,207.00	942,237.61	1,159,969.39	45%	2,129,305.00	841,517.04
601 SMART START	76,074.00	32,264.95	43,809.05	42%	76,074.00	28,229.57
604 4-H COOPERATIVE EXTENSION	13,000.00	4,509.05	8,490.95	35%	13,000.00	2,527.83
605 COOPERATIVE EXTENSION	204,327.00	68,708.41	135,618.59	34%	184,541.00	67,990.84
607 VETERANS	141,976.00	69,313.17	72,662.83	49%	132,511.00	61,014.72
610 SOCIAL SERVICES	10,078,511.00	3,812,591.49	6,265,919.51	38%	9,602,827.00	3,556,096.94
611 PROGRAM ON AGING	843,560.00	292,190.88	551,369.12	35%	741,879.00	320,770.99
613 DSS VENDING MACHINES	10,306.78	4,200.00	6,106.78	41%	8,213.78	0.00
615 NUTRIONAL MEALS	117,289.00	52,117.17	65,171.83	44%	117,672.00	46,814.03
619 YOUTH SERVICES	168,992.00	58,314.79	110,677.21	35%	153,993.00	43,226.07
620 FRIENDS OF YOUTH	61,800.00	16,972.02	44,827.98	27%	84,427.00	20,184.79
621 EMERGENCY 911	1,879,855.00	833,127.37	1,046,727.63	44%	1,631,489.00	699,690.79
622 FARMERS MARKET	41,389.00	19,718.96	21,670.04	48%	41,271.00	26,700.00
629 H. LESLIE PERRY LIBRARY	0.00	345,826.67	-345,826.67		615,000.00	340,816.59
630 VC HOUSING	0.00	125,291.69	-125,291.69		300,000.00	117,809.24
681 PUBLIC SCHOOLS	9,182,440.00	4,591,220.06	4,591,219.94	50%	9,107,440.00	4,553,720.02
683 VANCE-GRANVILLE COMMUNITY COLLEGE	2,581,228.00	676,031.45	1,905,196.55	26%	1,231,931.00	639,472.27
696 TRANSFER TO OTHER FUNDS	3,956,101.00	1,930,362.50	2,025,738.50	49%	3,453,124.00	973,486.95
999 CONTINGENCY	150,000.00	12,553.66	137,446.34	8%	150,000.00	19,844.02

10 GENERAL FUND Expend Total	56,542,042.79	25,482,923.31	31,059,119.48		52,990,502.97	22,713,369.94
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45%

43%

Water Fund (16)

Account Description	22/23 Budget	22/23 Actual	Remaining		21/22 Budget	21/22 Actual
			Balance	% Used		
329 INVESTMENT EARNINGS	2,500.00	12,776.17	-10,276.17	511%	2,500.00	24.27
367 REFUNDS & REIMBURSEMENTS	16,504.00	0	16,504.00	0%	17,000.00	17,314.66
375	1,130,000.00	504,108.47	625,891.53	45%	1,055,000.00	500,285.70
376	42,700.00	33,200.88	9,499.12	78%	36,300.00	36,352.56
397 TRANSFERS FROM OTHER FUNDS	93,394.00	0	93,394.00	0%	156,078.00	0
16 WATER DISTRICT FUND Revenue Total	1,285,098.00	550,085.52	735,012.48		1,266,878.00	553,977.19
Control Account	0	0	0		0	0
BOND PRINCIPAL - WATER	223,688.00	0	223,688	0%	217,688.00	0
BOND INTEREST - WATER	322,150.00	0	322,150	0%	328,180.00	0
TELEPHONE & POSTAGE	2,200.00	790.33	1,410	36%	2,200.00	760.05
UTILITIES	4,900.00	2,029.10	2,871	41%	4,850.00	1,858.89
ADVERTISING	1,200.00	1,469.00	-269	122%	1,200.00	275,000.00
DEPARTMENTAL SUPPLIES	30,000.00	45,492.80	-15,493	152%	26,000.00	19,557.46
SPECIAL CONTRACTED SERVICES	0.00	189.36	-189		0.00	12,215.73
CONTRACTED SERVICES	280,000.00	129,521.51	150,478	46%	270,000.00	137,068.81
INSURANCE & BONDS	2,600.00	2,391.63	208	92%	1,409.00	2,193.40
PURCHASED WATER	270,000.00	97,160.31	172,840	36%	270,000.00	102,753.36
BANK SERVICE CHARGES	2,500.00	1,279.11	1,221	51%	2,500.00	2,184.19
DEBT SERVICE RESERVE	54,584.00	0	54,584	0%	54,575.00	0
SYSTEM MAINTENANCE	65,000.00	34,081.10	30,919	52%	62,000.00	16,632.13
PERMITS	2,700.00	2,520.00	180	93%	2,700.00	2,520.00
DEPRECIATION EXPENSE	23,576.00	0	23,576	0%	23,576.00	0
16 WATER DISTRICT FUND Expend Total	1,285,098.00	316,924.25	968,173.75		1,266,878.00	572,744.02

Solid Waste (30)

Account Description	22/23 Budget	22/23 Actual	Remaining		21/22 Budget	21/22 Actual
			Balance	% Used		
390 REVENUE	2,488,000.00	1,913,626.83	574,373.17	77%	2,471,300.00	2,034,853.00
399 FUND BALANCE	93,160.00	0	93,160.00	0%	43,415.00	0
30 SOLID WASTE FUND Revenue Total	2,581,160.00	1,913,626.83	667,533.17		2,514,715.00	2,034,853.00
PART-TIME SALARIES	22,950.00	11,302.78	11,647.22	49%	22,950.00	9,844.32
OVERTIME	1,000.00	0	1,000.00	0%	1,000.00	0
FICA EXPENSE	1,833.00	864.68	968.32	47%	1,832.00	753.59
TELEPHONE & POSTAGE	600.00	166.22	433.78	28%	600.00	224.11
UTILITIES	1,100.00	407.33	692.67	37%	1,100.00	399.72
TRAVEL/TRAINING	500.00	76.61	423.39	15%	500.00	38.64
MAINTENANCE EQUIPMENT	2,500.00	0	2,500.00	0%	2,500.00	0
MAINTENANCE VEHICLES	500.00	215.03	284.97	43%	500.00	0
ADVERTISING	100.00	0	100.00	0%	250.00	0
AUTO SUPPLIES	250.00	0	250.00	0%	250.00	82.01
OFFICE SUPPLIES	200.00	80.71	119.29	40%	200.00	85.90
DEPARTMENTAL SUPPLIES	1,750.00	25.44	1,724.56	1%	1,750.00	177.45
WORKMENS COMP INSURANCE	3,445.00	1,462.10	1,982.90	42%	3,445.00	669.55
SCRAP TIRE DISPOSAL	125,000.00	65,702.01	59,297.99	53%	125,000.00	57,990.25
TRANSFER STATION FEES	1,220,000.00	455,479.42	764,520.58	37%	1,160,000.00	623,734.50
SPECIAL CONTRACTED SERVICES	115,000.00	122,279.13	-7,279.13	106%	115,000.00	90,297.82
CONTRACTED SERVICES	38,160.00	15,098.57	23,061.43	40%	36,000.00	12,371.65
INSURANCE & BONDS	8,200.00	7,768.37	431.63	95%	5,623.00	7,364.85
BANK SERVICE CHARGES	0.00	0	0.00		250.00	0
LANDFILL OPERATION -CONT.SERV	33,600.00	24,300.00	9,300.00	72%	33,600.00	14,215.00
MANNED DISPOSAL SITES	900,000.00	312,892.51	587,107.49	35%	900,000.00	222,197.20
MAINTENANCE CONVENIENCE SITES	40,000.00	16,639.83	23,360.17	42%	40,000.00	27,670.57
E-WASTE MANAGEMENT	32,250.00	9,468.03	22,781.97	29%	32,250.00	10,342.59
LANDFILL LEASE	32,222.00	16,111.02	16,110.98	50%	30,115.00	15,057.52
30 SOLID WASTE FUND Expend Total	2,581,160.00	1,060,339.79	1,520,820.21		2,514,715.00	1,093,517.24

Fire Tax Fund (43)

Account Description	22/23 Budget	22/23 Actual	Remaining		21/22 Budget	21/22 Actual
			Balance	% Used		
303 TAX REVENUE	1,754,985.00	1,342,681.82	412,303.18	77%	1,656,495.00	1,243,999.88
399 FUND BALANCE	284,389.00	0	284,389.00	0%	101,850.00	0
43 FIRE TAX FUND Revenue Total	2,039,374.00	1,342,681.82	696,692.18		1,758,345.00	1,243,999.88
TELEPHONE & POSTAGE	12,000.00	5,476.14	6,523.86	46%	12,000.00	4,566.20
CONTRACTED SERVICES-FINANCIAL RPTS	11,600.00	4,350.00	7,250.00	38%	11,000.00	2,775.00
TAX REFUNDS	500.00	724.69	-224.69	145%	500.00	-90.53
CAPITAL OUTLAY	250,000.00	20,000.00	230,000.00	8%	114,000.00	0
ADMINISTRATION FEES	2,000.00	2,000.00	0.00	100%	2,000.00	0
VOLUNTEER ASSISTANCE	705,330.00	227,174.66	478,155.34	32%	654,945.00	202,640.58
KERR LAKE SUBSTATION	33,900.00	33,900.00	0.00	100%	33,900.00	16,950.00
BEARPOND VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
COKESBURY VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
DREWRY VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
EPSOM VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
HICKSBORO VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
KITTRELL VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
TOWNSVILLE VFD	100,000.00	95,000.00	5,000.00	95%	100,000.00	50,000.00
WATKINS VFD	100,000.00	70,000.00	30,000.00	70%	100,000.00	50,000.00
GOLDEN BELT VFD	100,000.00	100,000.00	0.00	100%	100,000.00	50,000.00
ROTATING CAPITAL PYMT	30,000.00	30,000.00	0.00	100%	30,000.00	0
RESCUE SQUAD-FIRE RESPONSE	94,044.00	7,837.00	86,207.00	8%	0.00	0
43 FIRE TAX FUND Expend Total	2,039,374.00	1,016,462.49	1,022,911.51		1,758,345.00	676,841.25



Vance County Planning Retreat

American Rescue Plan Act - Update

The American Rescue Plan Act was signed into law by President Biden on March 11, 2021, it guaranteed direct relief to cities, towns and villages in the United States. The U.S. Department of the Treasury is responsible for overseeing this unprecedented program. The final rule took effect on April 1, 2022, which allowed up to ten million to be in revenue replacement.

- Vance County received in Total : \$8,650,402.00
Commissioners have approved: (350,000.) Jail doors and locks
(2,000,000) Phase 1B Water
(350,000) Premium Pay
(250,000) Health Department
\$5,550,402.00

Claimed remainder in revenue replacement with the intent to spend on Capital to comply with Federal guidelines.

Capital Funds

- Capital Reserve Fund – Fund Balance : \$6,023,415 (w/ addition on 6.30.23): \$11,122,907.00
- School Capital Reserve Funds – Sales Tax Fund Balance: \$3,508,783.00
Lottery: \$1,622,626.23
Repair and Renovation Lottery Funds: \$463,083.06

Vance County Planning Retreat Opioid Settlement

- Received \$150,111.88 in September 2022, \$142,274.09 in November 2022, and \$22,667.39 in January 2023. (Retreat Goal)
- Vance County is set to receive \$3.45 million over 18 years from the Cardinal, McKesson, AmerisourceBergen and Johnson and Johnson settlements; We anticipate an additional \$2.76 million between 2023 and 2036 as a result of recent settlements with CVS, Walgreens, Walmart, Teva, and Allergan. The funds are front loaded.
- Use of funds are limited to substance use disorder and the opioid remediation in the community.
- No imminent time frame for spending (plenty of time to plan)
- Each County receiving Opioid Settlement Funds shall hold at least one annual meeting with all municipalities in the Local Government's county invited in order to receive input as to proposed uses of Opioid Settlement Funds (Annual Public Hearing). Planned for June 5th 2023.
- Local Governments have two options of eligible uses for Opioid Settlement Funds (Option A and Option B uses); Most local governments are utilizing Option A uses of funds.
 - Option A Uses - Local Governments may spend Opioid Settlement Funds from the list of High-Impact Abatement Strategies without additional strategic planning beyond the required annual public hearing/meeting (See enclosed listing of Option A Uses)
 - Option B Uses – A local government may choose to participate in additional voluntary, collaborative, strategic planning which is required before spending funds on Option B uses. (see enclosed listing of Option B Uses)

Option A:

Collaborative strategic planning
Evidence-based addiction treatment
Recovery Support services
Recovery housing support
Employment-related services
Early intervention
Naloxone distribution
Post-overdose response team
Syringe Service Program
Criminal justice diversion programs
Addiction treatment for incarcerated persons
Reentry Programs

**EXHIBIT A TO NC MOA:
HIGH-IMPACT OPIOID ABATEMENT STRATEGIES (“OPTION A” List)**

In keeping with the National Settlement Agreement, opioid settlement funds may support programs or services listed below that serve persons with Opioid Use Disorder (OUD) or any co-occurring Substance Use Disorder (SUD) or mental health condition.

As used in this list, the words “fund” and “support” are used interchangeably and mean to create, expand, or sustain a program, service, or activity.

1. **Collaborative strategic planning.** Support collaborative strategic planning to address opioid misuse, addiction, overdose, or related issues, including staff support, facilitation services, or any activity or combination of activities listed in Exhibit C to the MOA (collaborative strategic planning).
2. **Evidence-based addiction treatment.** Support evidence-based addiction treatment consistent with the American Society of Addiction Medicine’s national practice guidelines for the treatment of opioid use disorder – including Medication-Assisted Treatment (MAT) with any medication approved for this purpose by the U.S. Food and Drug Administration – through Opioid Treatment Programs, qualified providers of Office-Based Opioid Treatment, Federally Qualified Health Centers, treatment offered in conjunction with justice system programs, or other community-based programs offering evidence-based addiction treatment. This may include capital expenditures for facilities that offer evidence-based treatment for OUD. (If only a portion of a facility offers such treatment, then only that portion qualifies for funding, on a pro rata basis.)
3. **Recovery support services.** Fund evidence-based recovery support services, including peer support specialists or care navigators based in local health departments, social service offices, detention facilities, community-based organizations, or other settings that support people in treatment or recovery, or people who use drugs, in accessing addiction treatment, recovery support, harm reduction services, primary healthcare, or other services or supports they need to improve their health or well-being.
4. **Recovery housing support.** Fund programs offering recovery housing support to people in treatment or recovery, or people who use drugs, such as assistance with rent, move-in deposits, or utilities; or fund recovery housing programs that provide housing to individuals receiving Medication-Assisted Treatment for opioid use disorder.
5. **Employment-related services.** Fund programs offering employment support services to people in treatment or recovery, or people who use drugs, such as job training, job skills, job placement, interview coaching, resume review, professional attire, relevant courses at community colleges or vocational schools, transportation services or transportation vouchers to facilitate any of these activities, or similar services or supports.
6. **Early intervention.** Fund programs, services, or training to encourage early identification and intervention for children or adolescents who may be struggling with problematic use of drugs or mental health conditions, including Youth Mental Health

First Aid, peer-based programs, or similar approaches. Training programs may target parents, family members, caregivers, teachers, school staff, peers, neighbors, health or human services professionals, or others in contact with children or adolescents.

7. **Naloxone distribution.** Support programs or organizations that distribute naloxone to persons at risk of overdose or their social networks, such as Syringe Service Programs, post-overdose response teams, programs that provide naloxone to persons upon release from jail or prison, emergency medical service providers or hospital emergency departments that provide naloxone to persons at risk of overdose, or community-based organizations that provide services to people who use drugs. Programs or organizations involved in community distribution of naloxone may, in addition, provide naloxone to first responders.
8. **Post-overdose response team.** Support post-overdose response teams that connect persons who have experienced non-fatal drug overdoses to addiction treatment, recovery support, harm reduction services, primary healthcare, or other services or supports they need to improve their health or well-being.
9. **Syringe Service Program.** Support Syringe Service Programs operated by any governmental or nongovernmental organization authorized by section 90-113.27 of the North Carolina General Statutes that provide syringes, naloxone, or other harm reduction supplies; that dispose of used syringes; that connect clients to prevention, treatment, recovery support, behavioral healthcare, primary healthcare, or other services or supports they need; or that provide any of these services or supports.
10. **Criminal justice diversion programs.** Support pre-arrest or post-arrest diversion programs, or pre-trial service programs, that connect individuals involved or at risk of becoming involved in the criminal justice system to addiction treatment, recovery support, harm reduction services, primary healthcare, prevention, or other services or supports they need, or that provide any of these services or supports.
11. **Addiction treatment for incarcerated persons.** Support evidence-based addiction treatment, including Medication-Assisted Treatment with at least one FDA-approved opioid agonist, to persons who are incarcerated in jail or prison.
12. **Reentry Programs.** Support programs that connect incarcerated persons to addiction treatment, recovery support, harm reduction services, primary healthcare, or other services or supports they need upon release from jail or prison, or that provide any of these services or supports.

EXHIBIT B TO NC MOA:

Additional Opioid Remediation Activities (“OPTION B**” List)**

This list shall be automatically updated to match the list of approved strategies in the most recent National Settlement Agreement.

PART ONE: TREATMENT

A. TREAT OPIOID USE DISORDER (OUD)

Support treatment of Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:¹

1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment (MAT) approved by the U.S. Food and Drug Administration.
2. Support and reimburse evidence-based services that adhere to the American Society of Addiction Medicine (ASAM) continuum of care for OUD and any co-occurring SUD/MH conditions.
3. Expand telehealth to increase access to treatment for OUD and any co-occurring SUD/MH conditions, including MAT, as well as counseling, psychiatric support, and other treatment and recovery support services.
4. Improve oversight of Opioid Treatment Programs (OTPs) to assure evidence-based or evidence-informed practices such as adequate methadone dosing and low threshold approaches to treatment.
5. Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose.
6. Treatment of trauma for individuals with OUD (e.g., violence, sexual assault, human trafficking, or adverse childhood experiences) and family members (e.g., surviving family members after an overdose or overdose fatality), and training of health care personnel to identify and address such trauma.
7. Support evidence-based withdrawal management services for people with OUD and any co-occurring mental health conditions.

¹ As used in this Exhibit B, words like “expand,” “fund,” “provide” or the like shall not indicate a preference for new or existing programs.

8. Training on MAT for health care providers, first responders, students, or other supporting professionals, such as peer recovery coaches or recovery outreach specialists, including telementoring to assist community-based providers in rural or underserved areas.
9. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD/MH conditions.
10. Fellowships for addiction medicine specialists for direct patient care, instructors, and clinical research for treatments.
11. Scholarships and supports for behavioral health practitioners or workers involved in addressing OUD and any co-occurring SUD or mental health conditions, including but not limited to training, scholarships, fellowships, loan repayment programs, or other incentives for providers to work in rural or underserved areas.
12. Provide funding and training for clinicians to obtain a waiver under the federal Drug Addiction Treatment Act of 2000 (DATA 2000) to prescribe MAT for OUD, and provide technical assistance and professional support to clinicians who have obtained a DATA 2000 waiver.
13. Dissemination of web-based training curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service-Opioids web-based training curriculum and motivational interviewing.
14. Development and dissemination of new curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service for Medication-Assisted Treatment.

B. SUPPORT PEOPLE IN TREATMENT AND RECOVERY

Support people in treatment for or recovery from OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare.
2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.
3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions.
4. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved medication with other support services.

5. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.
6. Support or expand peer-recovery centers, which may include support groups, social events, computer access, or other services for persons with OUD and any co-occurring SUD/MH conditions.
7. Provide or support transportation to treatment or recovery programs or services for persons with OUD and any co-occurring SUD/MH conditions.
8. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions.
9. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of high-quality programs to help those in recovery.
10. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to support the person with OUD in the family.
11. Training and development of procedures for government staff to appropriately interact and provide social and other services to individuals with or in recovery from OUD, including reducing stigma.
12. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment.
13. Create or support culturally appropriate services and programs for persons with OUD and any co-occurring SUD/MH conditions, including new Americans.
14. Create and/or support recovery high schools.
15. Hire or train behavioral health workers to provide or expand any of the services or supports listed above.

C. CONNECT PEOPLE WHO NEED HELP TO THE HELP THEY NEED (CONNECTIONS TO CARE)

Provide connections to care for people who have – or at risk of developing – OUD and any co-occurring SUD/MH conditions through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Ensure that health care providers are screening for OUD and other risk factors and know how to appropriately counsel and treat (or refer if necessary) a patient for OUD treatment.
2. Fund Screening, Brief Intervention and Referral to Treatment (SBIRT) programs to reduce the transition from use to disorders, including SBIRT services to pregnant women who are uninsured or not eligible for Medicaid.

3. Provide training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice, and probation), with a focus on youth and young adults when transition from misuse to opioid disorder is common.
4. Purchase automated versions of SBIRT and support ongoing costs of the technology.
5. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.
6. Training for emergency room personnel treating opioid overdose patients on post-discharge planning, including community referrals for MAT, recovery case management or support services.
7. Support hospital programs that transition persons with OUD and any co-occurring SUD/MH conditions, or persons who have experienced an opioid overdose, into clinically-appropriate follow-up care through a bridge clinic or similar approach.
8. Support crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH conditions or persons that have experienced an opioid overdose.
9. Support the work of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment or other appropriate services following an opioid overdose or other opioid-related adverse event.
10. Provide funding for peer support specialists or recovery coaches in emergency departments, detox facilities, recovery centers, recovery housing, or similar settings; offer services, supports, or connections to care to persons with OUD and any co-occurring SUD/MH conditions or to persons who have experienced an opioid overdose.
11. Expand warm hand-off services to transition to recovery services.
12. Create or support school-based contacts that parents can engage with to seek immediate treatment services for their child; and support prevention, intervention, treatment, and recovery programs focused on young people.
13. Develop and support best practices on addressing OUD in the workplace.
14. Support assistance programs for health care providers with OUD.
15. Engage non-profits and the faith community as a system to support outreach for treatment.
16. Support centralized call centers that provide information and connections to appropriate services and supports for persons with OUD and any co-occurring SUD/MH conditions.

D. ADDRESS THE NEEDS OF CRIMINAL-JUSTICE-INVOLVED PERSONS

Address the needs of persons with OUD and any co-occurring SUD/MH conditions who are involved in, are at risk of becoming involved in, or are transitioning out of the criminal justice

system through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Support pre-arrest or pre-arraignment diversion and deflection strategies for persons with OUD and any co-occurring SUD/MH conditions, including established strategies such as:
 - a. Self-referral strategies such as the Angel Programs or the Police Assisted Addiction Recovery Initiative (PAARI);
 - b. Active outreach strategies such as the Drug Abuse Response Team (DART) model;
 - c. “Naloxone Plus” strategies, which work to ensure that individuals who have received naloxone to reverse the effects of an overdose are then linked to treatment programs or other appropriate services;
 - d. Officer prevention strategies, such as the Law Enforcement Assisted Diversion (LEAD) model;
 - e. Officer intervention strategies such as the Leon County, Florida Adult Civil Citation Network or the Chicago Westside Narcotics Diversion to Treatment Initiative; or
 - f. Co-responder and/or alternative responder models to address OUD-related 911 calls with greater SUD expertise.
2. Support pre-trial services that connect individuals with OUD and any co-occurring SUD/MH conditions to evidence-informed treatment, including MAT, and related services.
3. Support treatment and recovery courts that provide evidence-based options for persons with OUD and any co-occurring SUD/MH conditions.
4. Provide evidence-informed treatment, including MAT, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are incarcerated in jail or prison.
5. Provide evidence-informed treatment, including MAT, recovery support, harm reduction, or other appropriate services to individuals with OUD and any co-occurring SUD/MH conditions who are leaving jail or prison, have recently left jail or prison, are on probation or parole, are under community corrections supervision, or are in re-entry programs or facilities.
6. Support critical time interventions (CTI), particularly for individuals living with dual-diagnosis OUD/serious mental illness, and services for individuals who face immediate risks and service needs and risks upon release from correctional settings.
7. Provide training on best practices for addressing the needs of criminal-justice-involved persons with OUD and any co-occurring SUD/MH conditions to law enforcement, correctional, or judicial personnel or to providers of treatment, recovery, harm reduction, case management, or other services offered in connection with any of the strategies described in this section.

E. ADDRESS THE NEEDS OF PREGNANT OR PARENTING WOMEN AND THEIR FAMILIES, INCLUDING BABIES WITH NEONATAL ABSTINENCE SYNDROME

Address the needs of pregnant or parenting women with OUD and any co-occurring SUD/MH conditions, and the needs of their families, including babies with neonatal abstinence syndrome (NAS), through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Support evidence-based or evidence-informed treatment, including MAT, recovery services and supports, and prevention services for pregnant women – or women who could become pregnant – who have OUD and any co-occurring SUD/MH conditions, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome.
2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD/MH conditions for up to 12 months postpartum.
3. Training for obstetricians or other healthcare personnel that work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions.
4. Expand comprehensive evidence-based treatment and recovery support for NAS babies; expand services for better continuum of care with infant-need dyad; expand long-term treatment and services for medical monitoring of NAS babies and their families.
5. Provide training to health care providers who work with pregnant or parenting women on best practices for compliance with federal requirements that children born with Neonatal Abstinence Syndrome get referred to appropriate services and receive a plan of safe care.
6. Child and family supports for parenting women with OUD and any co-occurring SUD/MH conditions.
7. Enhanced family supports and child care services for parents with OUD and any co-occurring SUD/MH conditions.
8. Provide enhanced support for children and family members suffering trauma as a result of addiction in the family; and offer trauma-informed behavioral health treatment for adverse childhood events.
9. Offer home-based wrap-around services to persons with OUD and any co-occurring SUD/MH conditions, including but not limited to parent skills training.
10. Support for Children's Services – Fund additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial opioid use.

PART TWO: PREVENTION

F. PREVENT OVER-PRESCRIBING AND ENSURE APPROPRIATE PRESCRIBING AND DISPENSING OF OPIOIDS

Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Fund medical provider education and outreach regarding best prescribing practices for opioids consistent with Guidelines for Prescribing Opioids for Chronic Pain from the U.S. Centers for Disease Control and Prevention, including providers at hospitals (academic detailing).
2. Training for health care providers regarding safe and responsible opioid prescribing, dosing, and tapering patients off opioids.
3. Continuing Medical Education (CME) on appropriate prescribing of opioids.
4. Support for non-opioid pain treatment alternatives, including training providers to offer or refer to multi-modal, evidence-informed treatment of pain.
5. Support enhancements or improvements to Prescription Drug Monitoring Programs (PDMPs), including but not limited to improvements that:
 - a. Increase the number of prescribers using PDMPs;
 - b. Improve point-of-care decision-making by increasing the quantity, quality, or format of data available to prescribers using PDMPs, by improving the interface that prescribers use to access PDMP data, or both; or
 - c. Enable states to use PDMP data in support of surveillance or intervention strategies, including MAT referrals and follow-up for individuals identified within PDMP data as likely to experience OUD in a manner that complies with all relevant privacy and security laws and rules.
6. Ensuring PDMPs incorporate available overdose/naloxone deployment data, including the United States Department of Transportation's Emergency Medical Technician overdose database in a manner that complies with all relevant privacy and security laws and rules.
7. Increase electronic prescribing to prevent diversion or forgery.
8. Educate Dispensers on appropriate opioid dispensing.

G. PREVENT MISUSE OF OPIOIDS

Support efforts to discourage or prevent misuse of opioids through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Fund media campaigns to prevent opioid misuse.
2. Corrective advertising or affirmative public education campaigns based on evidence.
3. Public education relating to drug disposal.
4. Drug take-back disposal or destruction programs.
5. Fund community anti-drug coalitions that engage in drug prevention efforts.
6. Support community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction – including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA).
7. Engage non-profits and faith-based communities as systems to support prevention.
8. Fund evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent-teacher and student associations, and others.
9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
10. Create or support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.
11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or other drug misuse.

H. PREVENT OVERDOSE DEATHS AND OTHER HARMS (HARM REDUCTION)

Support efforts to prevent or reduce overdose deaths or other opioid-related harms through evidence-based or evidence-informed programs or strategies that may include, but are not limited to, the following:

1. Increase availability and distribution of naloxone and other drugs that treat overdoses for first responders, overdose patients, individuals with OUD and their friends and family members, individuals at high risk of overdose, schools, community navigators and outreach workers, persons being released from jail or prison, or other members of the general public.
2. Public health entities that provide free naloxone to anyone in the community.

3. Training and education regarding naloxone and other drugs that treat overdoses for first responders, overdose patients, patients taking opioids, families, schools, community support groups, and other members of the general public.
4. Enable school nurses and other school staff to respond to opioid overdoses, and provide them with naloxone, training, and support.
5. Expand, improve, or develop data tracking software and applications for overdoses/naloxone revivals.
6. Public education relating to emergency responses to overdoses.
7. Public education relating to immunity and Good Samaritan laws.
8. Educate first responders regarding the existence and operation of immunity and Good Samaritan laws.
9. Syringe service programs and other evidence-informed programs to reduce harms associated with intravenous drug use, including supplies, staffing, space, peer support services, referrals to treatment, fentanyl checking, connections to care, and the full range of harm reduction and treatment services provided by these programs.
10. Expand access to testing and treatment for infectious diseases such as HIV and Hepatitis C resulting from intravenous opioid use.
11. Support mobile units that offer or provide referrals to harm reduction services, treatment, recovery supports, health care, or other appropriate services to persons that use opioids or persons with OUD and any co-occurring SUD/MH conditions.
12. Provide training in harm reduction strategies to health care providers, students, peer recovery coaches, recovery outreach specialists, or other professionals that provide care to persons who use opioids or persons with OUD and any co-occurring SUD/MH conditions.
13. Support screening for fentanyl in routine clinical toxicology testing.

PART THREE: OTHER STRATEGIES

I. FIRST RESPONDERS

In addition to items in sections C, D, and H of this Exhibit relating to first responders, support the following:

1. Educate law enforcement or other first responders regarding appropriate practices and precautions when dealing with fentanyl or other drugs.
2. Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid-related emergency events.

J. LEADERSHIP, PLANNING AND COORDINATION

Support efforts to provide leadership, planning, coordination, facilitation, training and technical assistance to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Statewide, regional, local, or community regional planning to identify root causes of addiction and overdose, goals for reducing harms related to the opioid epidemic, and areas and populations with the greatest needs for treatment intervention services; to support training and technical assistance; or to support other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
2. A dashboard to share reports, recommendations, or plans to spend Opioid Settlement Funds; to show how Opioid Settlement Funds have been spent; to report program or strategy outcomes; or to track, share, or visualize key opioid-related or health-related indicators and supports as identified through collaborative statewide, regional, local, or community processes.
3. Invest in infrastructure or staffing at government or not-for-profit agencies to support collaborative, cross-system coordination with the purpose of preventing overprescribing, opioid misuse, or opioid overdoses, treating those with OUD and any co-occurring SUD/MH conditions, supporting them in treatment or recovery, connecting them to care, or implementing other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
4. Provide resources to staff government oversight and management of opioid abatement programs.

K. TRAINING

In addition to the training referred to throughout this document, support training to abate the opioid epidemic through activities, programs, or strategies that may include, but are not limited to, the following:

1. Provide funding for staff training or networking programs and services to improve the capability of government, community, and not-for-profit entities to abate the opioid crisis.
2. Support infrastructure and staffing for collaborative cross-system coordination to prevent opioid misuse, prevent overdoses, and treat those with OUD and any co-occurring SUD/MH conditions, or implement other strategies to abate the opioid epidemic described in this opioid abatement strategy list (e.g., health care, primary care, pharmacies, PDMPs, etc.).

L. RESEARCH

Support opioid abatement research that may include, but is not limited to, the following:

1. Monitoring, surveillance, data collection, and evaluation of programs and strategies described in this opioid abatement strategy list.
2. Research non-opioid treatment of chronic pain.

3. Research on improved service delivery for modalities such as SBIRT that demonstrate promising but mixed results in populations vulnerable to opioid use disorders.
4. Research on novel harm reduction and prevention efforts such as the provision of fentanyl test strips.
5. Research on innovative supply-side enforcement efforts such as improved detection of mail-based delivery of synthetic opioids.
6. Expanded research on swift/certain/fair models to reduce and deter opioid misuse within criminal justice populations that build upon promising approaches used to address other substances (e.g. Hawaii HOPE and Dakota 24/7).
7. Epidemiological surveillance of OUD-related behaviors in critical populations including individuals entering the criminal justice system, including but not limited to approaches modeled on the Arrestee Drug Abuse Monitoring (ADAM) system.
8. Qualitative and quantitative research regarding public health risks and harm reduction opportunities within illicit drug markets, including surveys of market participants who sell or distribute illicit opioids.
9. Geospatial analysis of access barriers to MAT and their association with treatment engagement and treatment outcomes.



Vance County Planning Retreat Major Budget Impacts FY 23-24

Revenues:

1. Interest Rates – Now that borrowing has picked back up, interest rates have increased as well as our p-card program. Increase of \$150,000
2. Sales tax revenues are expected to grow, we anticipate adding revenue of approx. 2 % (\$225,000)
3. Tax collection rate increasing 97.6 % to 97.73%. With growth and focus on new construction the estimated revenue will increase by \$330,000.

Expenditures:

1. **K.A.R.T.S.** - They are asking for \$154,936 for administration costs and an increase of \$32,931 in capital of Vance County funds for next fiscal year. The administration cost is attributed to operational increases, such as “around town shuttle” and the facility needs. The capital increase is match funding to replace 12 buses over recommended mileage limits.
2. **Public School** – As the agreed upon CIP for Eaton Johnson comes to an end VCPS made us aware 10 of the 15 school building roofs will need replacing in the upcoming years and multiple elementary school parking lots are in need of repair. The roof replacement is estimated at \$6,682,500 and the parking lot resurfacing estimate is \$2,500,000 for a total of \$9,182,500 needed in facility repairs.
3. **Health Insurance** – With implementation of the MERP (Medical Expense Reimbursement Plan) in the 21/22 budget, we have been able to build a healthy base for medical costs. In doing so we are able to absorb increases inside the budget. We were able to lower dependent coverage and are looking to continue this trend while still being conservative budget and spending wise. We are budgeting \$9,600 per full time county employee, a reduction of \$1,200 per employee. This equates to \$480,000 in budget savings.
4. **Employer retirement contribution rates** –Increases as follows
 - a. General Employee increasing from 12.10% to 12.85%
 - b. Law Enforcement increasing from 13.10% to 14.10%
 - c. Budget impact for FY 23-24 is estimated at \$184,136
5. **Health Department** – FY 23-24 will be the seventh year of multi-year funding plan - \$40,000 increase as per plan.
6. **Staffing Needs (see attached sheet for specifics)**
 - DSS IT Network Support Technician
 - Accounting Specialist II (DSS)
 - Planning Director
 - Employee Health & Safety Coordinator
 - ETJ Environmental Code Enforcement (City)

Department	Position	Grade	Total Costs
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IT	DSS IT Network Support Technician	70	\$47,445 + benefits
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Justification: Additional technician will be first line of support for DSS and related departments, and backup support for other county departments. An additional technician will allow the IT department to bring IT support at DSS and related departments in house, instead of relying on a 3rd party vendor (NCOL). Most of the funding for the position should come from DSS.

- Job Duties:**
- Installs, configures, and maintains computers, printers, office automation equipment, and application software.
 - Monitors network security to include email, anti-virus servers and firewalls.
 - Monitors County network status, provisions network switches and ensures network availability.
 - Maintains County Mobile Data Terminal for First Responders including Baseline user profile setup, VPN installation, CAD software installation and monitoring Meraki software.
 - Install, configure, and maintain wireless access points.
 - Troubleshoots day to day problems with PCs, email, office productivity software, printing, and purchased applications.
 - Assists vendors with application installations and upgrades.
 - Administers phone system through physical phone and voice mailbox setup, configures new extension lines.
 - Performs other related duties as assigned.

Planning & Development	Planning Director	80	\$73,680 + benefits
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Justification: The Planning Department is in need of higher level planning knowledge and experience to ensure adequate attention is given to the Planning Board/Board of Adjustment and to ensure the success of a future required land use plan update, necessary ordinance updates and overall county planning activities. The current Planning and Development Director has background as an inspector, but the county manager believes it is necessary to reorganize the department into two departments (Inspections and Planning) to ensure adequate and improved attention to Planning needs which is inclusive of handling zoning and nuisance violations. This new position would oversee the planning department.

- Job Duties:**
- Serves as technical advisor to County Manager and County Commissioners regarding planning, zoning, nuisance and zoning enforcement and land use matters.
 - Transportation Planning - serves as a member of the Transportation Coordinating Committee (TCC) for the Kerr-Tar Regional Planning Organization.
 - Zoning Compliance - enforcement of planning ordinances.
 - Analyzes county planning needs, programs, services, infrastructure and requests for assistance.
 - Formulates recommendations regarding current and long-range plans, priorities and strategies for improving economic and quality of life for County citizens.
 - Researches and drafts local land use policies and ordinances to further County land use objectives regarding the patterns and standards of development.
 - Directs the preparation of charts, maps, graphs and other illustrative materials and makes presentations to elected officials, appointed board, community groups and concerned citizens.
 - Supervises and participates in administration of various ordinances and regulations including review and approval of plans of developers and property owners to ensure compliance with County zoning, subdivision, mobile home, and other land use ordinances and regulations.
 - Coordinates the review and approval or recommendation of site development plans and subdivision plats to technical review agencies, Planning Board and Board of Commissioners.

Department	Position	Grade	Total Costs
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Finance & Admin	Employee Health & Safety Coord	66	\$39,785+ benefits
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Justification: The Employee Health & Safety Coordinator performs a variety of responsible paraprofessional administrative, technical, and HR support responsibilities in Human Resources. Work includes planning and implementing employee wellness events, processing workers' compensation claims, and providing administrative support for the HR Director. The Employee serves on the Employee Safety Committee as the lead facilitator. The employee coordinates employee training events, in person and online. Work is performed under the general supervision of the HR Director, and is evaluated through observation, conferences, and the quality and effectiveness of work completed.

Job Duties:

- Process and maintain worker's compensation claims and OSHA files and logs.
- Facilitates Safety Committee meetings, participates in trend analysis, and provide employee injury related information to the Safety Committee;
- Creates and maintains a training database for all employees.
- Participates in planning and implementing various HR meetings/events and special programs, including wellness, health fairs, and safety training.
- Assists the HR Director with a variety of records including reports and research on safety and wellness programs.
- Administer the drug and alcohol screen process.
- Provides administrative support to the HR Director and performs other related duties as assigned.

DSS	Accounting Specialist II	69	\$45,402 + benefits
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Justification: The position will help balance the work that is required regarding the management of DSS funds. DSS is responsible for state and federal funding .The position will allow DSS Director to transition a current role to a position they are more qualified for and recruit for someone who will be able to manage all aspects of our funding.

Job Duties: Work involves making basic journal entries, reversing and correcting entries, auditing program expenditures and the interpretation of fiscal policies, and may involve the supervision or coordination of other staff of accounting technicians and clerks. Work is characterized by application of standardized rules and regulations and/or by scope which is usually limited to specific segments of the overall accounting function within the organizational unit. This level is distinguished from the 1 level by the variety, scope, and complexity in terms of budgets, staff, and facilities. The employees are expected to perform fairly independently within established procedures and regulations and receives general instruction methods of work, but usually specific instructions or results desired.

City Employee	ETJ Environmental Code Enforcement (City)	66	\$39,785 + benefits
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Justification: Enforcement within the Extra Territorial Jurisdiction typically crosses over between the City and County. The City handles subdivision and zoning violations and the County's solid waste collection, litter control and nuisance ordinances (junk cars, illegal dumping, etc.) can apply depending upon the issue. Recent discussion with the City Manager has indicated a desire for a City/County partnership focused on cleaning up and better enforcement within the ETJ. The proposed arrangement would involve 50% City and 50% County funding of the position which would be a City position primarily focused on the ETJ area.

Job Duties: To be developed if funded, but primary focus would be on enforcing appropriate ordinances and coordinating environmental and nuisance enforcement/abatement within the ETJ.



Vance County Debt:

General Fund Debt: \$9,584,254

GF Debt Payments 23/24: \$953,638 (Debt Burden 1.86%)

School Fund Debt: \$13,142,072

SF Debt Payments 23/24: \$1,687,512

Water Fund Debt: \$17,134,642

WF Debt Payments 23/24: \$ 544,627

(With Phase 1B, expect debt payments to raise \$500,000 in payments per year)

Debt Service Fund (Long-Term/Bonded): \$2,000,896

DS Debt Payments 23/24: \$80,024

Total Debt Balance(6/30/22): \$41,861,865

***Reasonable Debt Burden Recommended by the LGC and VC Financial Policy Guidelines is less than 15%

***Long-Term: 30-40 year payout

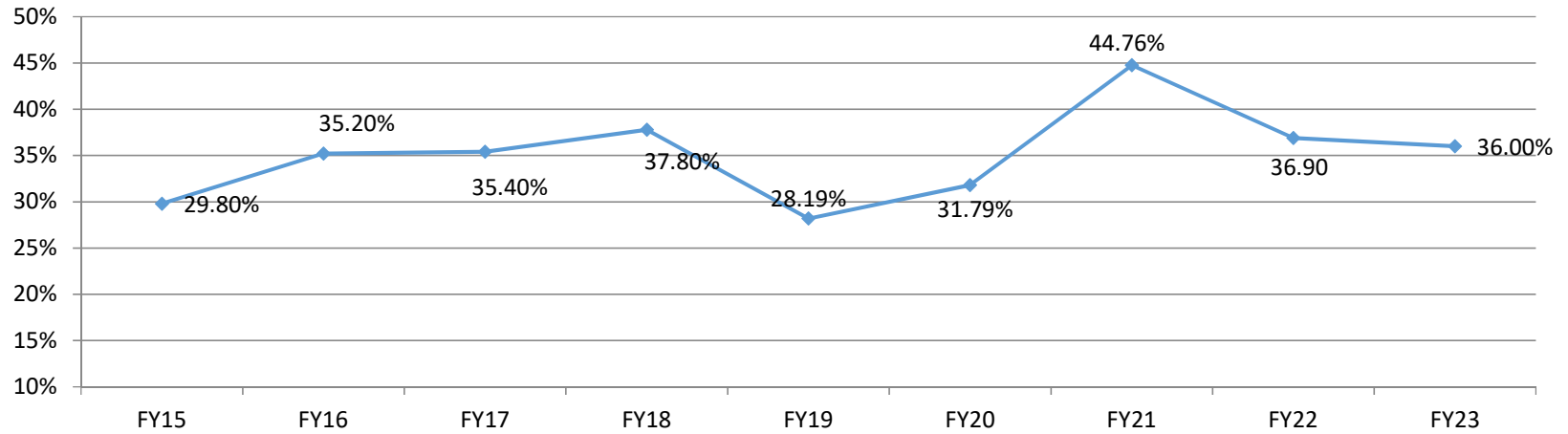


Budget Calendar Fiscal Year 2023-2024

<u>Task</u>	<u>Date</u>
CIP Materials to Department/Office Heads	October 7, 2022
CIP Due to Finance Director	November 4, 2022
Budget Materials to Department/Office Heads	December 7, 2022
1 st Budget Public Hearing	* January 3, 2023
Budget Requests to Finance Director	January 20, 2023
Outside Agency Requests Due	January 31, 2023
Commissioners Retreat	March 8, 2023
Processing of Budget Requests & Meeting with Dept. Heads	Feb 13 – Mar 30, 2023
Final Adjustments	April 1 – 30, 2023
Proposed Budget Presentation to Board of Commissioners	*May 1, 2023
Potential Budget Work Sessions	May 9 – May 18, 2023
2 nd Budget Public Hearing & Potential Adoption	*June 5, 2023
Budget Adoption	No later than June 30, 2023

*Denotes a Board of Commissioners Meeting Date

Unassigned Fund Balance (% of Expenditures)



- FY 23 – Projected

	2020	2021	2022	2023
Fund Balance (All Funds)	\$ 25,753,608	\$ 34,506,512	\$ 43,144,977	\$48,000,000
Unassigned Fund Balance (GF)	\$ 14,992,772	\$ 22,010,944	\$ 20,114,428	\$21,000,000

CAPITAL IMPROVEMENTS PLAN OVERVIEW

KATHERINE BIGELOW, FINANCE DIRECTOR

Five Year Capital Improvement Plan

Fiscal Years 2024-2028

Vance County, North Carolina





FISCAL YEARS 2024-2028

CAPITAL IMPROVEMENT PLAN

Vance County, North Carolina

BOARD OF COMMISSIONERS

Yolanda J. Feimster, Chair

R. Dan Brummitt, Vice-Chair

Sean A. Alston, Sr.

Carolyn Faines

Thomas S. Hester, Jr.

Leo Kelly, Jr.

Archie B. Taylor, Jr.

COUNTY MANAGER

Jordan D. McMillen

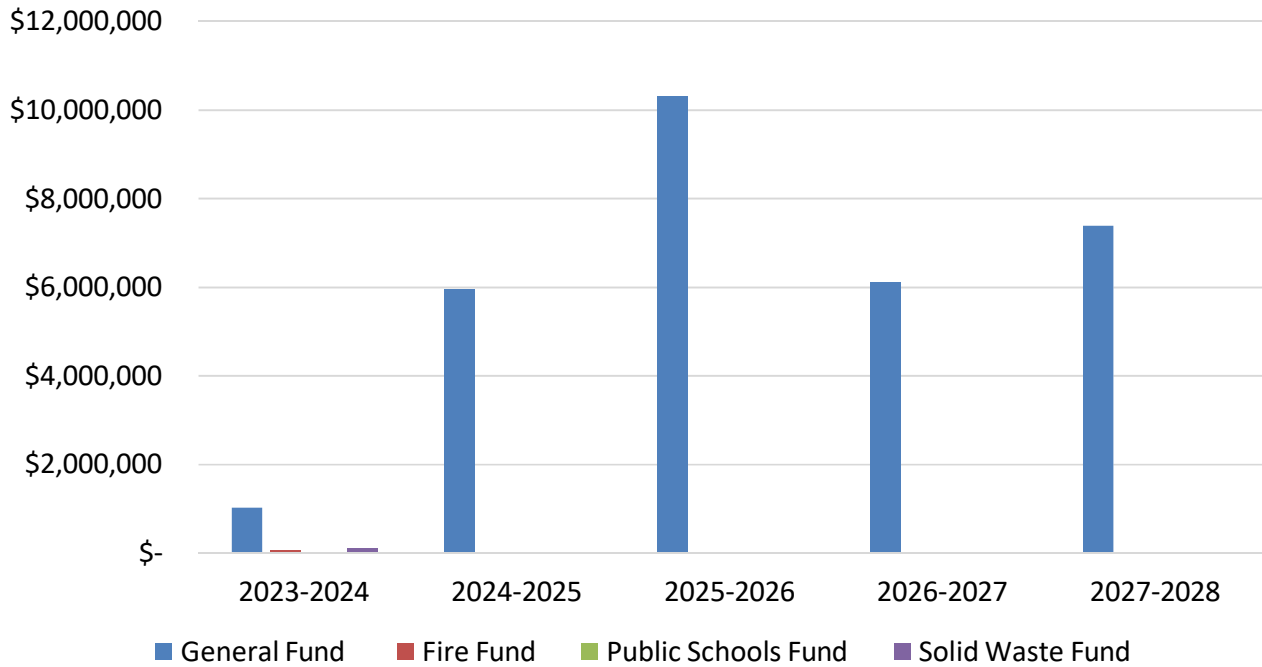
Report Compiled by:

Katherine Bigelow, Finance Director

CIP Established FY 2015 - 2016

CIP OVERVIEW

Fiscal Years 2023-27 Total Capital by Fund



NOTES

- ❖ No tax impact to fund all CIP projects in fiscal year 2023-24.
- ❖ The county is preparing to begin projects such as: jail renovations, constructing an EMS facility, roof replacement at various county owned buildings, radio tower project, ambulance remount/replacement, and re-paving various county parking lots. This will mainly impact the county's Capital Fund.
- ❖ This is the final year of the agreed upon CIP exchange for the Eaton Johnson facility. VCPS has made us aware of numerous roofs and parking lots that need attention.
- ❖ It is important to note that the county's ability to fund pay go or debt funded capital is limited without additional dedicated revenue sources in the future.

**Capital Improvement Plan
Fiscal Years 2024-2028
General Fund Summary**

CIP Projects by Department:	Financing Method	Budget Year 2023-24	Planning Year 2024-25	Planning Year 2025-26	Planning Year 2026-27	Planning Year 2027-28	TOTAL BY PROJECT
Animal Shelter							
Storage Area at Animal Shelter	Pay Go		125,000.00				125,000.00
County Owned/Outsourced Buildings							
Smart Start Building - Parking Lot	Pay GO/Pair to fund		155,550.00				155,550.00
Cooperative Extension Building - HVAC Repl	Pay GO/Pair to fund				67,500.00		67,500.00
Courthouse/Admin Parking	Pay GO/Pair to fund	150,000.00					150,000.00
Sheriff's Office Storage Building - NEW!!	Pay GO/Pair to fund	350,000.00					350,000.00
Emergency Operations - 911							
Radio Tower Project (viper equipment cost for t	Debt-Long Term(?)				2,100,000.00		2,100,000.00
Mobile CAD Computers (5 Year End of Life)	Pay Go	75,000.00	75,000.00	75,000.00			225,000.00
EMS							
EMS Building/Public Safety Complex	PayGo Capital		5,000,000.00				5,000,000.00
Ambulance Replacement/Remount	Budget Dependent	400,000.00		400,000.00		400,000.00	1,200,000.00
EMS Substation - North End of County	Debt-Long Term				200,000.00		200,000.00
Auto CPR Devices (5)	Pay Go	51,015.50	51,015.50				102,031.00
Jail							
Jail Upgrade/Expansion	Debt-Long Term	500,000.00	1,500,000.00	2,000,000.00	2,000,000.00	2,000,000.00	8,000,000.00
IT							
Network Infrastructure Replacement	Pay Go					125,000.00	
Fire							
75" Quint Engine Fire Truck (used)	Debt			650,000.00			650,000.00
Renovation of Fire Station	PayGo Capital		800,000.00				
Public Safety Departments							
Viper Portable Radio Replacement (134 radios)	Pay Go				140,000.00		140,000.00
Viper Mobile Radio Replacement (78 radios)	Pay Go				75,000.00		75,000.00
Eaton Johnson Building							
Roof Replacement (Gym, Kitchen, Vocational)	Paired with New EMS		800,000.00				800,000.00
Wing Renovations/Vocational Renovation/Gym	Pay Go		250,000.00				250,000.00
HVAC Pumps (8)/HVAC Air Handler (1)	Pay Go	195,840.00					195,840.00
COUNTY DEPARTMENTS SUBTOTAL:		\$ 1,721,855.50	\$ 8,756,565.50	\$ 3,125,000.00	\$ 4,582,500.00	\$ 2,525,000.00	\$ 19,785,921.00

**Capital Improvement Plan
Fiscal Years 2024-2028
General Fund Summary**

CIP Projects by Department:	Financing Method	Budget Year 2023-24	Planning Year 2024-25	Planning Year 2025-26	Planning Year 2026-27	Planning Year 2027-28	TOTAL BY PROJECT
Vance County Schools							
Roof Repairs/Parking Lot Resurfacing	Lottery/Sales Tax FB		1,500,000.00	2,000,000.00	2,500,000.00		6,000,000.00
Vance-Granville Community College <i>(only reflected Vance County's share as the project cost - 75%)</i>							
Annual Capital Outlay for Facilities Maintenance	Pay Go	54,960.00	54,960.00	54,960.00	54,960.00	54,960.00	274,800.00
Parking Lot Repairs & Resurfacing	Debt-Long Term	97,885.00			353,360.00		451,245.00
Roof Repairs & Renovations	Debt-Long Term	936,250.00		1,247,524.00		825,169.00	3,008,943.00
HVAC Replacements and Lighting	Debt-Long Term	4,540,206.00					4,540,206.00
VGCC SUBTOTAL:		\$ 5,629,301.00	\$ 54,960.00	\$ 1,302,484.00	\$ 408,320.00	\$ 880,129.00	\$ 8,275,194.00
	VC Portion	4,221,975.75	41,220.00	976,863.00	306,240.00	660,096.75	6,206,395.50
TOTAL BY FISCAL YEAR:		\$ 5,943,831.25	\$ 10,297,785.50	\$ 6,101,863.00	\$ 7,388,740.00	\$ 3,185,096.75	\$ 32,267,116.50

GOALS REVIEW AND GOAL SETTING

JORDAN McMILLEN, COUNTY MANAGER



2023 Planning Retreat Manager's Report

Regionalization/Interlocal Cooperation

- 1. City of Henderson** – Tax Office (75%/25%); 911(50%/50%); Elections (83%/17%); Parks and Recreation (45%/55%); Library (85%/15%); Animal Services Officer; Downtown Development Commission; County Water Purchase from City; Downtown Wi-Fi (50%/50%); Henderson-Vance Industrial Park; Jointly Owned Properties
- 2. Economic Development** – Triangle North and Kerr-Tar Regional Economic Development Corporation (Granville, Franklin, Warren & Vance); Economic Development Commission (County & City)
- 3. Others** – Shared solid waste director with Granville; Granville Vance Health Department; Vance Granville Community College; Stepping Up Initiative (Granville, Vance, Franklin, Warren, Halifax); Henderson Oxford Airport (Granville, Vance, Oxford, Henderson); Franklin-Vance-Warren Opportunity; Franklin-Granville-Vance Smart Start; Vaya (Mental Health); Drewry Solid Waste Site (Warren); Warren County waterlines in Vance County; Vance County waterlines in Franklin County – Tower Road; Kerr Tar Council of Governments



V a n c e C o u n t y . o r g



FY2022 - 2023 Goals Review

Goal Review for FY21-22

- To retain or assist in creation of 150 new jobs and \$10 million in new investment for the County to include completion of design and construction of a shell building at the Henderson-Vance Industrial Park.
- Completion of an Economic Development Strategic plan aimed at setting priorities and benchmarks for the future of economic development to include prioritizing regionalization.
- To implement a community paramedicine program that seeks to improve community health, reduce frequent fliers, and assist in lowering EMS call volume.
- Begin planning (land acquisition and design) necessary for a new public safety center to house the county EMS and fire departments.
- Begin construction of Phase 1B of the county water system and offer public information/signup meetings with a goal of increasing signups 20% above the current level.



Goal Review

- Goal #1: To retain or assist in creation of 150 new jobs and \$10 million in new investment for the County to include completion of design and construction of a shell building at the Henderson-Vance Industrial Park. [significant progress]

- **Notable Projects/Activity**

- MR Williams expansion complete - \$4 million investment; 25 new jobs (250 existing)
- Walmart Distribution – Refrigeration upgrade & hydrogen conversion - \$2.9 million investment
- Shell building on target for completion in August - \$2.2 million investment
- Bearpond Commons - \$1.7 million investment (18,000 SF retail flex space)
- Eastern Minerals – Warehouse Addition (25,000 SF) - \$575,000 investment
- Robco – 20,000 SF building expansion - \$815,000 investment
- Retail Sector - PetCo/Matzalan Restaurant/Marshalls/Jersey Mikes/Northside Electronics-TMobile/Dollar General
- Housing Opportunities – Red Oak Apartments/Pines at Pond Valley/Interest around Exit 209/Getaway Homes

- **Industrial Park Activity**

- Finalized financial partnership with Henderson-Vance Industrial Park Board/Shell building construction underway/Bearpond Commons under construction/Waiting for EDA approval to bid out Road and Sewer Project



Goal Review

- Goal #2: Completion of an Economic Development Strategic plan aimed at setting priorities and benchmarks for the future of economic development to include prioritizing regionalization. **[on track]**
 - Kickoff meetings with steering committee and public – December 7, 2022
 - Consultant has completed interviews, business survey and economic analysis.
 - Consultant has completed research on 10 year economic and demographic trends for county and region.
 - Steering committee meeting in late March to discuss preliminary findings; Consultant developing draft goals and strategies
 - Plan on track to be completed by end of fiscal year



Goal Review

- Goal #3: To implement a community paramedicine program that seeks to improve community health, reduce frequent fliers, and assist in lowering EMS call volume. **[not met to date]**
 - The qualifications for this new position along with the shortage of paramedics and lack of candidates continues to challenge this new elective program.
 - Implementation of the EMS 24/72 schedule in summer 2021 added nine new positions; This transition and the need for emergency paramedics has made it difficult to recruit a community paramedic (24 of 38 positions filled as of 1/19/2023).
 - Community Paramedic position is highly specialized – evaluated 3 total applicants over the last year and a half.
 - EMS Director has mentioned possibly of utilizing Division Chiefs to begin efforts
 - Identify “frequent flyers” (4 or more times in last 6 months)
 - Perform 2 - 4 home visits daily if possible
 - Concerns – will impact Division Chiefs ability to oversee daily operations, provide emergency response on QRV, and fill in when staffing shortage – could cause reduced number of responding ambulances;
 - Manager has concerns with impact of this on emergency response



Goal Review

- Goal #4: Begin planning (land acquisition and design) necessary for a new public safety center to house the county EMS and fire departments. [In process]
 - Some discussion on potential for standalone EMS station as opposed to combined EMS/Fire building.
 - Board approved contract to purchase land on 9/6/2022; included 180 study period;
 - Attorney working to resolve restrictive covenants on land.

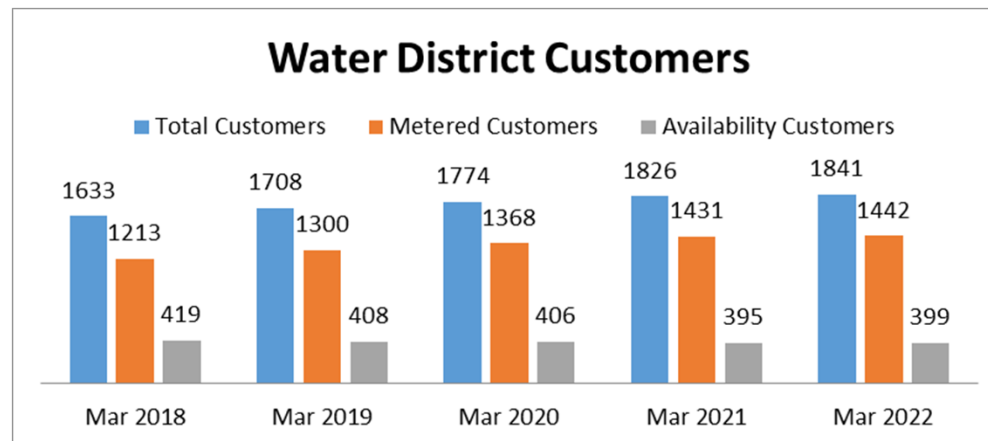
Justification for Need

1. Outdated building; designed in 1960 for five firefighters – currently as many as 15 positions in the building at any given time including fire and EMS.
2. County study indicated limited office, living, sleeping and vehicle storage space; Bedroom space creates hiring challenges with lack of adequate bedroom, storage, office, training, and living space. Inadequate space to house ambulances, fire trucks and safety vehicles indoors.



Goal Review

- Goal #5: Begin construction of Phase 1B of the county water system and offer public information/signup meetings with a goal of increasing signups 20% above the current level. **[In process]**
 - Successful signup campaign (August – September)
 - Phase 1B initially held up by USDA due to potential easement issue/resolved in November, 2022; USDA provided authorization to bid on February 2nd.
 - Project released for bid. Original bid date of March 9th moved to March 21st.
 - Following bidding, staff will evaluate the budget and coordinate with bond counsel and LGC for interim project financing.
 - Depending upon bids and LGC approval – construction could begin fall 2023.





Goal Prioritization for FY2023-2024

Overview

- For FY23-24, Commissioners submitted a total of 21 goals that span across multiple topic areas.
- Goals have been associated together based upon common topics.
- Staff has proposed goals based upon what was submitted and has suggested some continuation goals; We recommend establishing 3-5 total goals.

Topics/Themes

Economic Development (7)

Opioid/Substance Use Reduction (3)

Litter Reduction (2)

Other Topics

Broadband (1)

EMS Station (1)

Support for Public Transportation (1)

Support for McGregor Hall (1)

Reorganization/redistricting of Fire/EMS (1)

Public Safety (1)

Education (1)

Housing (1)

Continuation of Last year's goals (1)



V a n c e C o u n t y . o r g

Economic Development

- TH – Completion and sale of Shell Building
- TH – Start working on another Shell Building in Henderson-Vance Industrial Park
- TH – Continue to increase Jobs in Vance County
- AT – Continued support of Industrial Park Development
- DB – Regionalization of economic development – Joining Research Triangle Regional Partnership
- SA – Economic Development
- YF – Small business enhancement/Economic Development

- 1. *Proposed Continuation Goal – To retain or assist in creation of 150 new jobs and \$10 million in new investment for the County to include completion of the shell building and progress towards locating a tenant/business to occupy the building.***
- 2. *Proposed Goal – Implementation of Economic Development Strategic plan.***



V a n c e C o u n t y . o r g

Opioid/Substance Use Reduction

- DB – Plan for distribution of Opioid funds
 - AT – Identify potential funding avenues for utilizing opioid settlement funds.
 - YF – Opioid/Substance reduction
- 3. *Proposed Goal*** – *Begin planning and identifying opportunities for distributing and utilizing opioid settlement funds.*
 - 4. *Proposed Continuation Goal*** – *To implement a community paramedicine program that seeks to improve community health, reduce frequent fliers, and assist in lowering EMS call volume.*



Others

- **Litter Reduction – Possible Committee Topic/Possible Budget Item**
 - LK - Explore with the City of Henderson to develop a permanent plan to address the litter problem on main roads coming into the city/county. It should include roads leading to Aycock Rec Center and Vance Charter School.
 - AT – Work to reduce trash and litter in the County
- **Remaining Proposed Continuation Goals**
 5. *Begin design and construction necessary for a new EMS Station.*
 6. *Begin construction of Phase 1B of the county water system and offer public information/signup meetings with a goal of increasing signups 20% above the current level.*
- **Others – Miscellaneous Topics**
 - LK - Broadband – continue efforts to encourage new and existing providers to expand broadband coverage in Vance County. Completion of partnership agreement with Brightspeed for recent state GREAT grant award to expand fiber to the home in the county.
 - LK - Begin design and work toward construction of a new EMS station.
 - DB - Reorganization of Fire and EMS including redistricting
 - AT - Continuation and completion of last year’s goals
 - AT - Support for public transportation (KARTS)
 - AT - Public Support for McGregor Hall
 - SA – Education
 - SA – Public Safety
 - YF – Housing



Proposed Goals

1. *To retain or assist in creation of 150 new jobs and \$10 million in new investment for the County to include completion of the shell building and progress towards locating a tenant/business to occupy the building.*
2. *Implementation of Economic Development Strategic plan.*
3. *To implement a community paramedicine program that seeks to improve community health, reduce frequent fliers, and assist in lowering EMS call volume.*
4. *Begin planning and identification of funding opportunities for distributing and utilizing opioid settlement funds.*
5. *Begin design and construction necessary for a new EMS Station.*
6. *Begin construction of Phase 1B of the county water system and offer public information/signup meetings with a goal of increasing signups 20% above the current level.*

