A note on instructions and timelines

- MDH created this training for 2020 calendar year reporting.
- The timelines noted for COVID staffing are unique to 2020 only.
- Please refer to the current reporting period instructions for guidance and timelines for the most recent calendar year: www.health.state.mn.us/communities/practice/lphact/annual reporting/





Local Public Health Act annual reporting: Finance and staffing

Kim Gearin | MDH Center for Public Health Practice March 5, 2021

Purpose of today's webinar

- Provide overview of LPH Act annual reporting
- Emphasize changes
- Answer questions
- Identify resources for more information



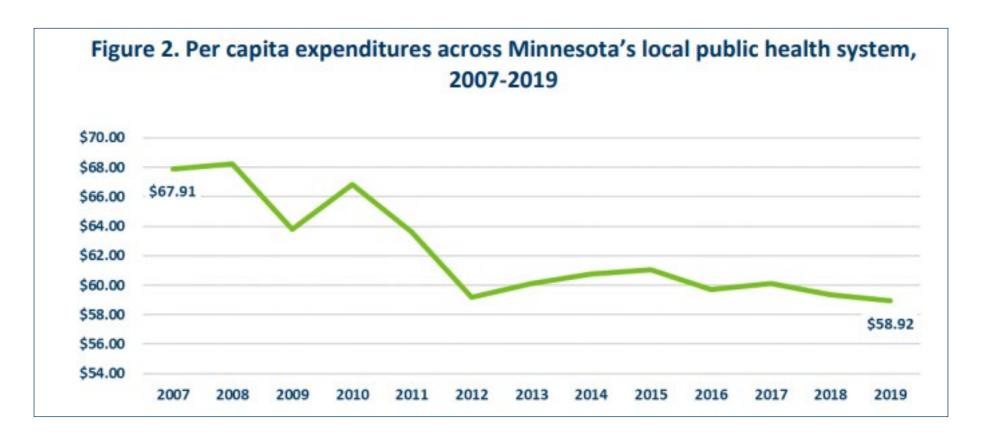


Overview of LPH Act annual reporting



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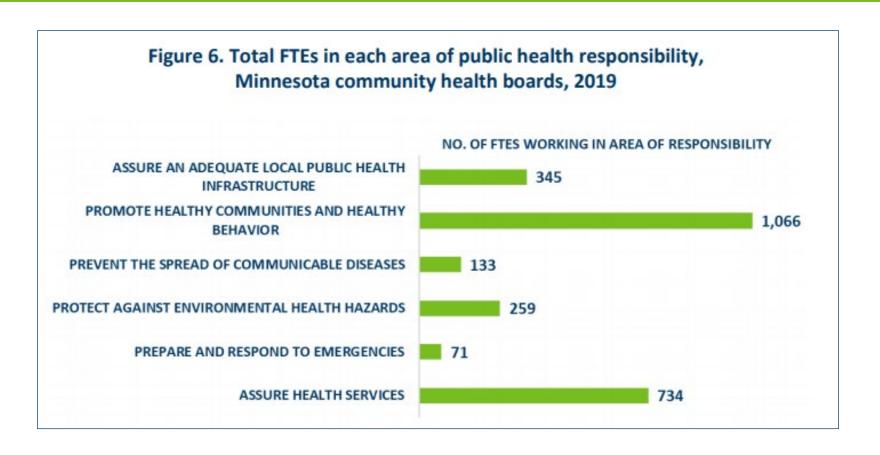
Expenditure summary: Minnesota's local public health system



Source: Expenditures summary for Minnesota's local public health system in 2019 (www.health.state.mn.us/communities/practice/lphact/annualreporting/docs/2019finance.pdf)



Workforce summary: Minnesota's local public health system



Source: Workforce summary for Minnesota's local public health system in 2019 (www.health.state.mn.us/communities/practice/lphact/annualreporting/docs/2019staffing.pdf)





Preparing to report



Dedicated website







Use the instructions



Local Public Health Act annual reporting: Finance and staffing instructions for calendar year 2020

These instructions inform data entry into the REDCap reporting system.

- Review the instructions before entering data
- Share with others as needed

What is LPH Act annual reporting?

Local Public Health Act (LPH Act) annual reporting collects data to create a big picture of public health resources and priorities. Each community health board reports how it uses the Local Public Health Grant and other local, state, and federal funds for public health, across six areas of responsibility.

The MDH Center for Public Health Practice administers the Local Public Health Grant, which provides funding to community health boards in Minnesota. The Center for Public Health Practice also coordinates LPH Act annual reporting.

Who can help me?

If you have further questions about LPH Act annual reporting or these instructions, please contact the MDH Center for Public Health Practice at health.ophp@state.mn.us, or contact your public health nurse consultant.

Find more information about LPH Act annual reporting online

Local Public Health Act annual reporting

(www.health.state.mn.us/communities/practice/lphact/annualreporting/)

Minnesota Department of Health Center for Public Health Practice PO Box 64973 St. Paul, MN 35164-0975 651-201-3880 health.ophp@state.mn.us www.health.state.mn.us

March 2021. To obtain this information in a different format, call: 651-201-3880.

LOCAL PUBLIC HEALTH ACT ANNUAL REPORTING FINANCE AND STAFFING Appendix B. Where do I put...? Alternative Care (AC) Other State Funds Child and Teen Check-Up Clinics and Outreach 50% Other Federal Funds, 50% Other State Funds City Readiness Initiative Other Federal Funds Community Alternative Care (CAC) Community Alternatives for Disabled Individuals Developmentally Disabled (DD) Early Hearing Detection and Intervention (EHDI) Other Federal Funds Eliminating Health Disparities Other Stote Funds Evidence-Based Home Visiting-Nurse-Family Other Federal Funds Partnership Implementation and Training Mix of other local, other state, and other fed funds; the percentage of each funding source comprises differs for each collaborative Immunization Practices Improvement Program (IPI) Other Federal Funds Indoor Radon Grant Interapency Early Intervention Committees (IEIC) Other Federal Funds Lead Safe Housing Grant Other State Funds Minnesota Family Planning Program Mental Health Collaborative Mix of other local, other state, and other fed comprises differs for each collaborative Minnesota Senior Care Plus (MSC+) Medicaid Minnesota Senior Health Options (MSHO) Medicare Pandemic Flu Supplemental Funding Other Federal Funds

LOCAL PUBLIC HEALTH ACT ANNUAL REPORTING FINANCE AND STAFFING INSTRUCTIONS FOR 2020

Error message

Error When you see an error message, double-check your work and make corrections as applicable. Once you have made corrections, click "Save 8 Stay" at the bottom of the form to see if the error message disappears.

Remember

- When entering numbers, leave out commas (i.e., enter "311346" instead of "311,346")
- Enter 0 for any blank fields (zero)

Errors in Finance: Section II. Expenditures

At the end of the Expenditures form, you will see a summary of Total Expenditures for all areas.

If the values listed for Total Expenditure and Total Expenditure by Area of Responsibility do not match, you will see an error message. If this happens:

- Double-check your numbers and make corrections as needed. This will ensure that the values for Total Expenditure and Total Expenditure by Area of Responsibility add correctly.
- Once you've made the corrections and have clicked Save & Stay, the Error Message should disappear

TOTAL EXPENDITURE FOR ALL AREAS								
Total Expenditure	4056869	Yes equation						
* mut provide value								
Total Expenditures by Area of Responsibility	4228379	View equation						
* must provide value	400000							
*** Error *** Total Expenditure should match Total Expenditure	is by Area of Responsibl	lity.						
Total Local Public Health Grant (State General Funds)	409609	Yes equation						
1 margrovide value	-07000	The square						
*** Error*** Line & Total spent/invoiced in 2017 from RecapiCarry Forward Section L should match Total Local Public								
Health Grant (State General Funds) from Finance: Section II.								

Errors in Finance: Section III. Match

If the value entered for your match is off by even a decimal point, you will see an error message. This is OK and expected (you do not need to correct it), but you should double-check your numbers:

- If the value entered is correct and this is a rounding error, you can save the form and proceed such as in the
- If the match is less than 75 percent, you will also see an error message; you need to make the corrections in Finance: Section L Recap/Carry Forward before moving on.

Yotal Match Expenditures		
Total Local Public Health Grant (State General Funds) Match Expenditures	178643	View equation
*** Error*** Total Local Public Health Grant (State General Funds) Match Expenditures should be 75% of Line & Total spent/invoiced in 2017.	178642.5 ** Error ** Error ***Error **	View equation

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COVID-19-related activities Report expenditures and staffing for COVID-related activities, such as...

- Incident Command
- Case investigation and contact tracing
- Communications
- Convening, coordinating, consulting and meeting with partners
- Engaging with communities

- Outbreak and cluster response
- Outreach and education
- Mental/behavioral health efforts
- Long-term care work
- Volunteer management
- Vaccination
- Testing





Getting started



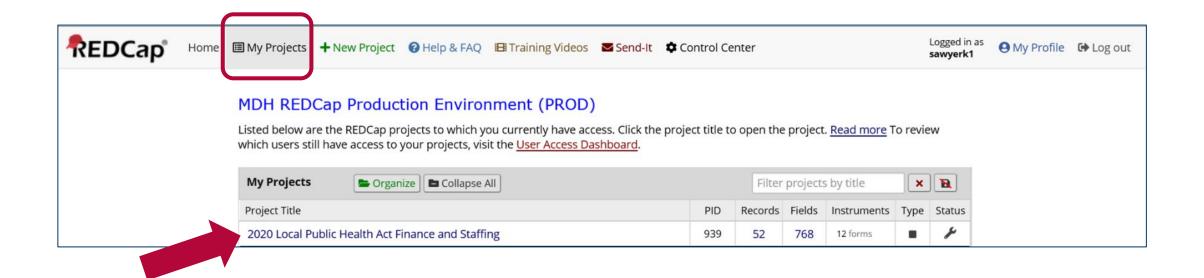
Navigating to data entry: Log into REDCap







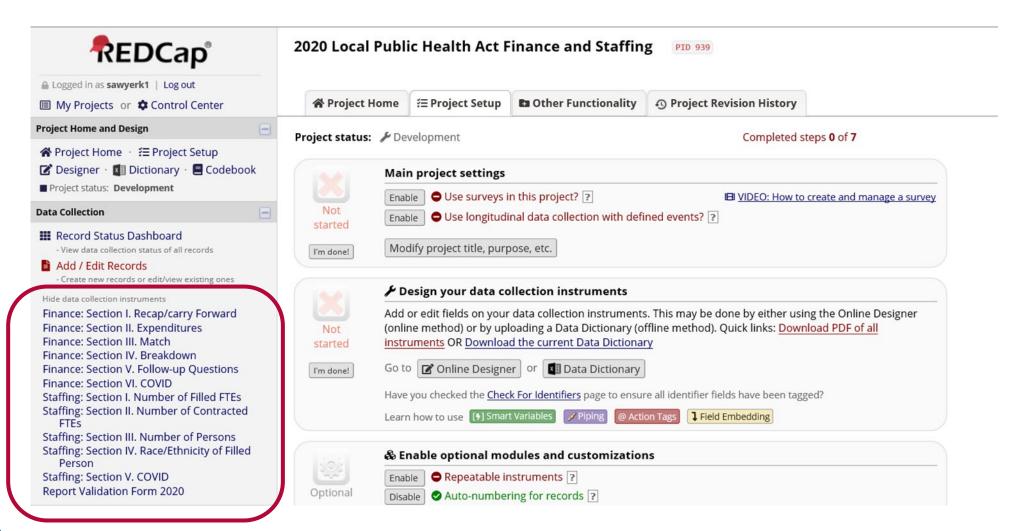
Navigating to data entry: Access my projects





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Navigating to data entry: Finding forms







Expenditures (finance)



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Summary of finance sections

Section in REDCap	Status	Time frame
I. REDCap/carry forward	No changes to reporting	January 1 – December 31, 2020
II. Expenditures	No changes to reporting	January 1 – December 31, 2020
III. Match	No changes to reporting	January 1 – December 31, 2020
IV. Breakdown	No changes to reporting	January 1 – December 31, 2020
V. Follow-up questions	No changes to reporting	January 1 – December 31, 2020
VI. COVID-19	New section	January 1 – December 31, 2020



Finance: Section II

Report expenditures for six areas of local public health responsibility (1 of 2)

	State general funds	Federal Title V funds	Federal TANF	Medicaid	Medicare	Private insurance	Local tax	Client fees	Other fees	Other local funds	Other state funds	Other federal funds
Infrastructure												
Healthy communities												
Infectious disease												
Environmental health												
Emergency preparedness												
Health services												



Finance: Section II

Report expenditures for six areas of local public health responsibility (2 of 2)

	State general funds	Federal Title V funds	Federal TANF	Medicaid	Medicare	Private insurance	Local tax	Client fees	Other fees	Other local funds	Other state funds	Other federal funds
Infrastructure												
Healthy communities											SHIP	
Infectious disease												
Environmental health												
Emergency preparedness												
Health services												



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Finance: Section VI: COVID-19 Use same and new sources

		Same So	urces o	f Funding -	Redirecte	d from A	reas of	LPH Res	ponsibi	lity to C	OVID		1	New Source	es of COV	ID-Speci	fic Fundin	g
															State of			
														CARES	MN			
													CARES	Act from	funds	Other	Other	
													Act	another	for	local	federal	Other
	State	Fed								Other	Other	Other	from	state	COVID	funds	funds	COVID-
	General	Titile V	Fed			Private	Local	Client	Other	Local	State	Fed	MDH to	agency or	from	for	for	specific
	Funds	Funds	TANF	Medicaid	Medicare	Ins	Tax	Fees	Fees	Funds	Funds	Funds	СНВ	fed govt	MDH	COVID	COVID	funds
COVID																		



Finance: Section VI: COVID-19 Example: "Other state funds" used for COVID-19

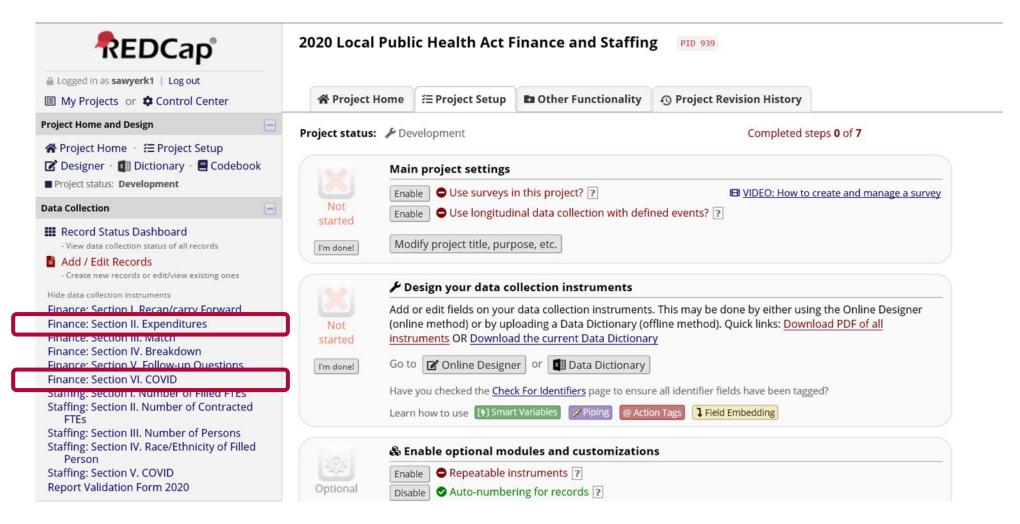
		Same So	urces o	f Funding -	Redirecte	d from A	reas of	LPH Res	ponsibi	lity to C	OVID		New Sources of COVID-Specific Funding					
															State of			
														CARES	MN			
													CARES	Act from	funds	Other	Other	
													Act	another	for	local	federal	Other
	State	Fed								Other	Other	Other	from	state	COVID	funds	funds	COVID-
	General	Titile V	Fed			Private	Local	Client	Other	Local	State	Fed	MDH to	agency or	from	for	for	specific
	Funds	Funds	TANF	Medicaid	Medicare	Ins	Tax	Fees	Fees	Funds	Funds	Funds	СНВ	fed govt	MDH	COVID	COVID	funds
COVID																		







Recap: Finance







REDCap screenshot: Finance



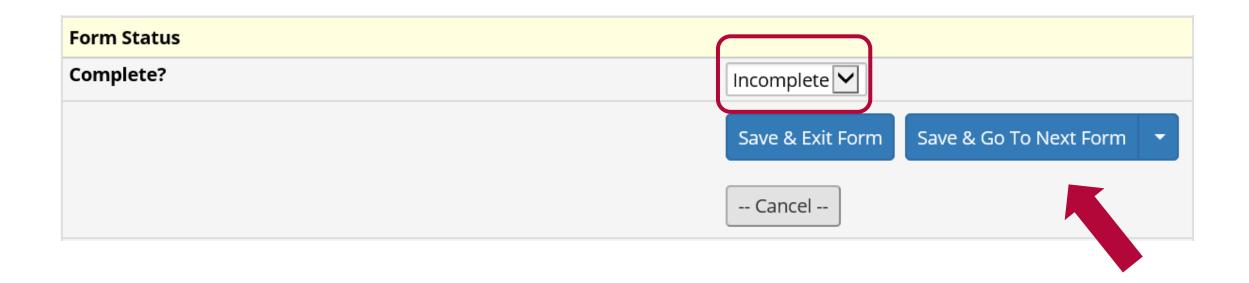
Report all COVID-related expenditures. Indicate the dollar amount for funding sources, including a list of new COVID-specific funding sources	
COVID Response	
Federal CARES Act funds awarded from State of Minnesota to CHB by MDH * must provide value	
Federal CARES Act Funds awarded through Minnesota Department of Revenue, another state agency besides MDH, or directly from the federal government. * must provide value	
State of Minnesota funds awarded to the CHB by MDH for public health COVID-19 activities * must provide value	
Other local funds for public health COVID-19 activities * must provide value	
Other federal funds awarded by State of Minnesota for COVID-19 vaccination planning * must provide value	
Other COVID-19 funds (enter dollar amount) * must provide value	





Remember to save









Staffing



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Summary of staffing sections

Section in REDCap	Status	Time frame
I. Number of filled FTEs	No changes to reporting	January 1 – February 29, 2020
II. Number of contracted FTEs	No changes to reporting	January 1 – February 29, 2020
III. Number of persons	No changes to reporting	January 1 – February 29, 2020
IV. Race/ethnicity of filled person	No changes to reporting	January 1 – February 29, 2020
V. COVID-19	New section	March 1 – December 31, 2020



Staffing: Section V Best estimate of time spent on COVID-19

Time frame: The 10-month period from March 1 – December 31, 2020

Hourly employees

- Total number of COVID-19 hours (regular hours)
- Total number of COVID-19 overtime hours

Salaried employees

- Total number of COVID-19 hours during 8-hour workdays
- Total number of excess hours worked due to COVID-19 over 7 days
 - Imagine a "typical" 7-day week during the 10-month period
 - For that 7-day period, approximately how many hours more than usual did salaried employees work as a result of COVID-19?



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Staffing: Section V
New FTE for COVID-19

Time frame: The 10-month period from March 1 – December 31, 2020

Indicate whether the CHB hired new employees for COVID-19. Consider part time or temporary employees. If yes, report the number of FTEs.

- New filled employees for COVID-19: Employees who are employed directly by the CHB or one of the LHDs in the CHB to carry out COVID-19-related activities.
- New contracted employees for COVID-19 are positions contracted by the CHB or one of the LHDs in the CHB, to provide COVID-19related activities.



Staffing: Section V Best estimate of volunteers for COVID-19

Time frame: The 10-month period from March 1 – December 31, 2020

Indicate whether the CHB relied on community volunteers for COVID-19.

If Yes, estimate:

- Number of volunteers
- Number of volunteer hours
- Exclude people contributing to COVID-19-related public health activities while paid or redeployed (e.g., by the CHB, or any local agency or organization).



Staffing: Section V Optional comments

 Use the free response option to share additional information about your CHB workforce as it relates to your CHB's response to COVID-19 for the period March 1, 2020-December 31, 2020.





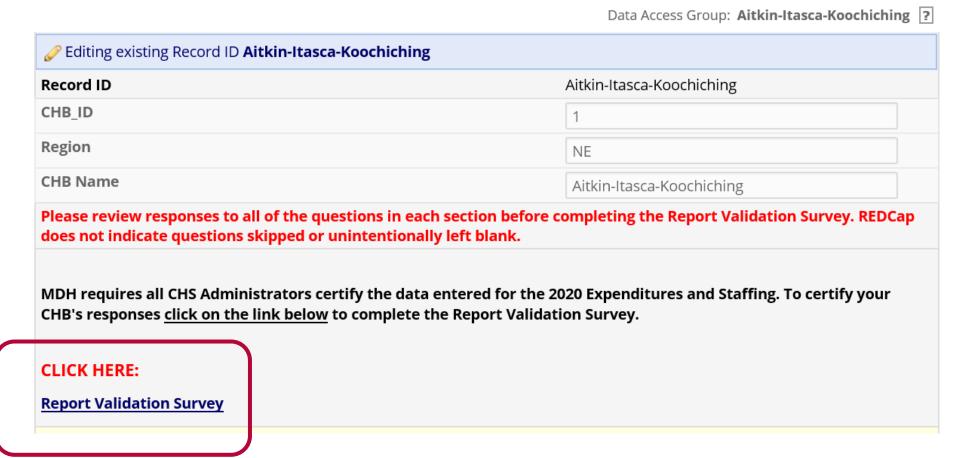
Validation







Report Validation Form 2020







Questions?



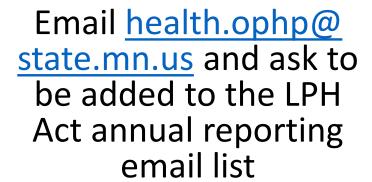
Reporting Tips

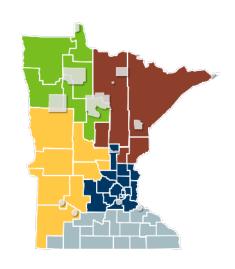
- Annual LPH Act reporting collects information only on expenditures of the CHB
- New FTEs for COVID-19 refers to new filled or contracted FTEs compensated by the CHB (or LHD within CHB)
- Feel free to explain responses and/or provide local context in the optional spaces provided
- We will continue to update the website with questions and responses related to annual LPH Act reporting



Resources and support







Visit Who is my public health nurse consultant? online, and ask questions



Email any questions about annual reporting to health.ophp@state.mn.us





www.health.state.mn.us/communities/practice/lphact/annualreporting/





Remember

- Do not share your REDCap username and password
- Do not use someone else's REDCap username and password
- Need a REDCap account?
 Email: <u>kerri.sawyer@state.mn.us</u>
- Questions? Contact your public health nurse consultant or email health.ophp@state.mn.us





Thank you.

MDH Center for Public Health Practice health.ophp@state.mn.us 651-201-3880

