

91-05

STATEMENT OF POLICY

Ensuring the Role of Local Health Departments in the Allocation of Federal Grant Monies

Policy

The National Association of County and City Health Officials (NACCHO) urges federal executive branch departments and offices to:

- 1) require local health department (LHD) review and comment on any health-related plans for state distribution of federal funds to LHDs and associated funding distributions to their jurisdiction; and,
- 2) inform LHDs of all federal funding related to public health going directly to community-based organizations or other service providers in their jurisdiction.

Justification

LHDs are the governmental public health presence most closely integrated with local communities. As such, they bring a unique perspective regarding the needs for accomplishing the goals set forth in funding announcements that, if not incorporated, can result in inefficient or duplicative use of increasingly precious resources. If LHDs are engaged in and approve of plans and funding allocation decisions, as has been modeled by the Coordinating Office for Terrorism Preparedness and Emergency Response and included in the Pandemic and All-Hazards Preparedness Law passed in 2006, plans and associated resources can be disseminated in ways that are most likely to impact the populations they are intended to reach. The law requires states to obtain public comment and input on their all-hazards public health preparedness and response plans and to gain the concurrence of LHDs on the state plan for spending federal public health preparedness funds.

In addition, having policies and practices that ensure LHDs are informed of all directly federally funded community-based organizations in their jurisdictions means that LHDs can quickly assess the landscape of services being provided in their jurisdictions, identify and respond to associated needs for collaboration and communication with their local partners, and avoid duplication of efforts.

Record of Action

Adopted by NACCHO Board of Directors

July 12, 1991

Updated September 2008

¹ E.g., requiring state health departments to show on grant applications that they have at least agreement with 50 percent of county/city health departments covering at least 50 percent of the state population

