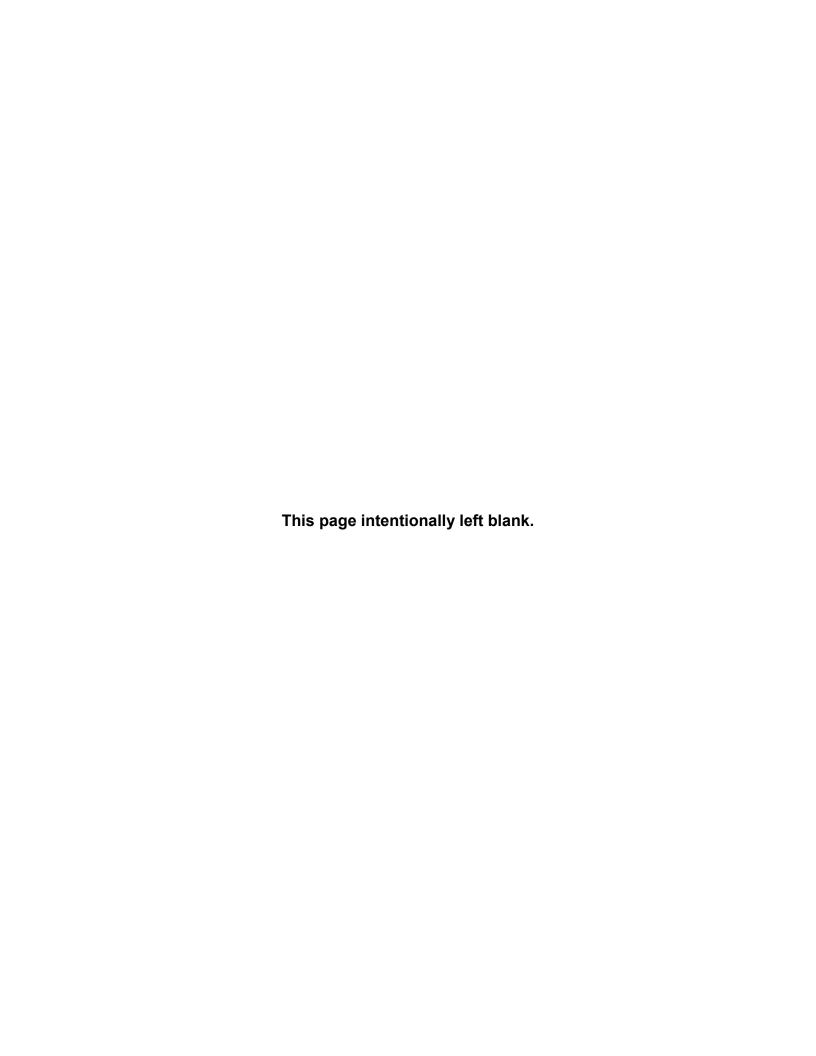




STARK COUNTY DISTRICT BOARD OF HEALTH STARK COUNTY

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INDEPENDENT AUDITOR'S REPORT

Stark County District Board of Health Stark County 7235 Whipple Ave NW North Canton, OH 44720

To the District Board of Health:

Report on the Audit of the Financial Statements

Unmodified and Adverse Opinions

We have audited the financial statements of the Stark County District Board of Health, Stark County, Ohio (the District), which comprises the cash balances, receipts and disbursements for each governmental fund type as of and for the year ended December 31, 2021, and the related notes to the financial statements.

Unmodified Opinion on Regulatory Basis of Accounting

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the cash balances, receipts and disbursements for each governmental fund type as of and for the year ended December 31, 2021, and the related notes to the financial statements, in accordance with the financial reporting provisions which Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(C) permit, described in Note 2.

Adverse Opinion on U.S. Generally Accepted Accounting Principles

In our opinion, because of the significance of the matter discussed in the *Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles* section of our report, the accompanying financial statements do not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of the District, as of December 31, 2021, or the changes in financial position thereof for the year then ended.

Basis for Opinions

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the District, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Efficient • Effective • Transparent

Stark County District Board of Health Stark County Independent Auditor's Report Page 2

Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles

As described in Note 2 of the financial statements, the financial statements are prepared by the District on the basis of the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(C), which is an accounting basis other than accounting principles generally accepted in the United States of America (GAAP), to satisfy these requirements. The effects on the financial statements of the variances between the regulatory basis of accounting described in Note 2 and accounting principles generally accepted in the United States of America, although not reasonably determinable, are presumed to be material and pervasive.

Emphasis of Matter

As discussed in Note 12 to the financial statements, the financial impact of COVID-19 and the continuing emergency measures may impact subsequent periods of the District. We did not modify our opinion regarding this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the financial reporting provisions Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(C) permit. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and Government Auditing Standards, we

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material misstatement of the financial statements, whether due to
 fraud or error, and design and perform audit procedures responsive to those risks. Such procedures
 include examining, on a test basis, evidence regarding the amounts and disclosures in the financial
 statements.
- obtain an understanding of internal control relevant to the audit in order to design audit procedures
 that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
 effectiveness of the District's internal control. Accordingly, no such opinion is expressed.

Stark County District Board of Health Stark County Independent Auditor's Report Page 3

- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that
 raise substantial doubt about the District's ability to continue as a going concern for a reasonable
 period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplementary Information

Our audit was conducted to opine on the financial statements as a whole.

The Schedule of Expenditures of Federal Awards as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards is presented for purposes of additional analysis and is not a required part of the financial statements.

The schedule is the responsibility of management and derives from and relates directly to the underlying accounting and other records used to prepare the financial statements. We subjected this schedule to the auditing procedures we applied to the financial statements. We also applied certain additional procedures, including comparing and reconciling the schedule directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, this schedule is fairly stated in all material respects in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 9, 2022, on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the District's internal control over financial reporting and compliance.

Keith Faber Auditor of State Columbus, Ohio

December 9, 2022

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Stark County

Combined Statement of Receipts, Disbursements and Changes in Fund Balances (Regulatory Cash Basis)
All Governmental Fund Types

For the Year Ended December 31, 2021

Cook Bossints	General	Special Revenue	Capital Projects	Totals (Memorandum Only)
Cash Receipts	#200 426	#0.600.760	ΦO	#2.002.406
Charges for Services Licenses and Permits	\$390,436 403,351	\$2,692,760	\$0	\$3,083,196 1,585,766
Fines and Fermits	403,351 7,912	1,182,415 1,127	0	9,039
Intergovernmental	4,320,231	2,374,043	0	6,694,274
Miscellaneous	158,529	40,414	0	198,943
Miscellaneous	130,329	40,414		190,943
Total Cash Receipts	5,280,459	6,290,759	0	11,571,218
Cash Disbursements Current: Health:				
Personal Services - Salaries and Wages	1,792,541	2,449,902	0	4,242,443
Personal Services - Employee Benefits	797,837	966,518	0	1,764,355
Supplies and Materials	348,416	44,629	0	393,045
Purchased Services	1,873,216	796,173	0	2,669,389
Capital Outlay	41,147	0	1,261	42,408
Other Allocations	260,461	692,047	0	952,508
Total Cash Disbursements	5,113,618	4,949,269	1,261	10,064,148
Total Gash Bisbarsements	0,110,010	4,040,200	1,201	10,004,140
Excess of Receipts Over (Under) Disbursements	166,841	1,341,490	(1,261)	1,507,070
Other Financing Receipts (Disbursements)				
Transfers In	211,595	0	0	211,595
Transfers Out	(20,495)	(191,100)	0	(211,595)
.,	(=0, :00)	(101,100)		(=::,000)
Total Other Financing Receipts (Disbursements)	191,100	(191,100)	0	0
Net Change in Fund Cash Balances	357,941	1,150,390	(1,261)	1,507,070
Fund Cash Balances, January 1	1,413,610	1,602,059	2,522	3,018,191
Fund Cash Balances, December 31	\$1,771,551	\$2,752,449	\$1,261	\$4,525,261

See accompanying notes to the financial statements

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Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 1 - Reporting Entity

The constitution and laws of the State of Ohio establish the rights and privileges of the Stark County District Board of Health, Stark County, (the District) as a body corporate and politic. An eight-member Board and a Health Commissioner govern the District. The District's services include communicable disease investigations, immunization clinics, inspections, tuberculosis screening, public health nursing services and the District issues health-related licenses and permits.

The District's management believes these financial statements present all activities for which the District is financially accountable.

Note 2 - Summary of Significant Accounting Policies

Basis of Presentation

The District's financial statements consist of a combined statement of receipts, disbursements and changes in fund balances (regulatory cash basis) for all governmental fund types organized on a fund type basis.

Fund Accounting

The District uses funds to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. The funds of the District are presented below:

1. General Fund

The General Fund accounts for and reports all financial resources not accounted for and reported in another fund. The general fund balance is available to the district for any purpose provided it is expended or transferred according to the general laws of Ohio.

2. Special Revenue Funds

These funds account for and report the proceeds of specific revenue sources that are restricted or committed to expenditure for specified purposes other than debt service or capital projects. The District had the following significant Special Revenue Funds:

Women, Infants, and Children (WIC) Fund - This Federal grant fund accounts for the Special Supplemental Nutrition Program.

Food Service Fund - This fund receives monies for food service licenses and permits.

<u>Maternal Child Health Project (MCH)</u> - This fund attempts to eliminate health disparities, and improve the health status of women, infants and children.

<u>Public Health Nursing</u> – This fund is established to account and provide support for the Nursing Program.

<u>Construction and Demolition Debris Disposal Fund – This fund is established to account for receipts of tipping fees under O.R.C. 3714.07(4) used to administer rules regarding the regulation of such facilities accepting such items.</u>

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 2 - Summary of Significant Accounting Policies (continued)

Fund Accounting (continued)

2. Special Revenue Funds (continued)

<u>Home Sewage Treatment Systems (HSTS)</u> – This fund is established to accounts for permit and user fees under O.R.C. 3718.02 used to administer rules regarding the regulation of home sewage treatment systems and small flow onsite systems.

3. Capital Projects Fund

This fund accounts for and reports financial resources that are restricted, committed, or assigned to expenditures for capital outlays, including the acquisition, construction or improvement of capital facilities and other capital assets. The District had the following significant capital project fund:

<u>Capital Improvement Fund</u> – This fund receives moneys appropriated by the board of health for either the purchase of a building or the improvement of leased quarters.

Basis of Accounting

These financial statements follow the accounting basis permitted by the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03 (C). This basis is similar to the cash receipts and disbursements accounting basis. The Board recognizes receipts when received in cash rather than when earned, and recognizes disbursements when paid rather than when a liability is incurred. Budgetary presentations report budgetary expenditures when a commitment is made (i.e., when an encumbrance is approved).

These statements include adequate disclosure of material matters, as the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03 (C) permit.

Budgetary Process

The Ohio Revised Code requires the District to budget each fund annually.

Appropriations

Budgetary expenditures (that is, disbursements and encumbrances) may not exceed appropriations at the fund, function or object level of control, and appropriations may not exceed estimated resources. The District Board must annually approve appropriation measures and subsequent amendments. Unencumbered appropriations lapse at year end.

Estimated Resources

Estimated resources include estimates of cash to be received (budgeted receipts) plus unencumbered cash as of January 1. The County Budget Commission must approve estimated resources.

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 2 - Summary of Significant Accounting Policies (continued)

Encumbrances

The Ohio Revised Code requires the District to reserve (encumber) appropriations when individual commitments are made. Encumbrances outstanding at year end are carried over, and need not be reappropriated.

A summary of 2021 budgetary activity appears in Note 3.

Fund Balance

Fund balance is divided into five classifications based primarily on the extent to which the District must observe constraints imposed upon the use of its governmental-fund resources. The classifications are as follows:

1. Nonspendable

The District classifies assets as nonspendable when legally or contractually required to maintain the amounts intact. For regulatory purposes, nonspendable fund balance includes unclaimed monies that are required to be held for five years before they may be utilized by the District and the nonspendable portion of the corpus in permanent funds.

2. Restricted

Fund balance is *restricted* when constraints placed on the use of resources are either externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments; or is imposed by law through constitutional provisions.

3. Committed

The Board can *commit* amounts via formal action (resolution). The District must adhere to these commitments unless the Board amends the resolution. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed to satisfy contractual requirements.

4. Assigned

Assigned fund balances are intended for specific purposes but do not meet the criteria to be classified as *restricted* or *committed*. For regulatory purposes, assigned fund balance in the general fund is limited to encumbrances outstanding at year end.

5. Unassigned

Unassigned fund balance is the residual classification for the general fund and includes amounts not included in the other classifications. In other governmental funds, the unassigned classification is used only to report a deficit balance.

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 2 - Summary of Significant Accounting Policies (continued)

Fund Balance (continued)

The District applies restricted resources first when expenditures are incurred for purposes for which either restricted or unrestricted (committed, assigned, and unassigned) amounts are available. Similarly, within unrestricted fund balance, committed amounts are reduced first followed by assigned, and then unassigned amounts when expenditures are incurred for purposes for which amounts in any of the unrestricted fund balance classifications could be used.

For regulatory purposes, limited disclosure related to fund balance is included in Note 11.

Capital Assets

The District records disbursements for acquisitions of property, plant, and equipment when paid. The accompanying financial statements do not report these items as assets.

Accumulated Leave

In certain circumstances, such as upon leaving employment, employees are entitled to cash payments for unused leave. The financial statements do not include a liability for unpaid leave.

Note 3 - Budgetary Activity

Budgetary activity for the years ending December 31, 2021 follows:

2021 Budgeted vs. Actual Receipts

	2021 Budgeted Vo. Notual Neocipto				
	Budgeted	Actual			
Fund Type	Receipts	Receipts	Variance		
General	\$5,960,036	\$5,492,054	(\$467,982)		
Special Revenue	5,987,861	6,290,759	302,898		
Capital Projects	0	0	0		
Total	\$11,947,897	\$11,782,813	(\$165,084)		

2021 Budgeted vs. Actual Budgetary Basis Expenditures

	Appropriation	Budgetary	
Fund Type	Authority	Expenditures	Variance
General	\$7,373,650	\$6,180,635	\$1,193,015
Special Revenue	7,516,720	5,613,421	1,903,299
Capital Projects	2,522	2,522	0
Total	\$14,892,892	\$11,796,578	\$3,096,314

Note 4 - Deposits and Investments

As required by the Ohio Revised Code, the Stark County Treasurer is custodian for the District's deposits. The County's deposit and investment pool holds the District's assets, valued at the Treasurer's reported carrying amount.

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 5 - Intergovernmental Funding

The County apportions the excess of the District's appropriations over other estimated receipts among the townships and municipalities composing the District, based on their taxable property valuations. The County withholds the apportioned excess from property tax settlements and distributes it to the District. The financial statements present these amounts as intergovernmental receipts.

Note 6 - Risk Management

Workers' Compensation

Workers' Compensation coverage is provided by the State of Ohio. The District pays the State Workers' Compensation System a premium based on a rate per \$100 of salaries. This rate is calculated based on accident history and administrative costs.

Risk Pool Membership

The District is a member of the Public Entities Pool of Ohio (The Pool). The Pool assumes the risk of loss up to the limits of the District's policy. The Pool covers the following risks:

- General liability and casualty
- Public official's liability
- Cyber
- Law enforcement liability
- Automobile liability
- Vehicles
- Property
- Equipment breakdown

The pool reported the following summary of assets and actuarially-measured liabilities available to pay those liabilities as of December 31:

2021

Cash and investments \$41,996,850 Actuarial Liabilities \$14,974,099

Note 7 - Defined Benefit Pension Plans

Ohio Public Employee Retirement System

The District's employees belong to the Ohio Public Employees Retirement System (OPERS). OPERS is a cost-sharing, multiple-employer plan. The Ohio Revised Code prescribes this plan's benefits, which include postretirement healthcare and survivor and disability benefits.

The Ohio Revised Code also prescribes contribution rates. For 2021, OPERS members contributed 10% of their gross salaries and the District contributed an amount equaling 14% of participants' gross salaries. The District has paid all contributions required through December 31, 2021. Of the 10% contribution due from employees, the District currently picks up 4.25%.

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 8 - Postemployment Benefits

OPERS offers a cost-sharing, multiple-employer defined benefit postemployment plan, that includes multiple health care plans including medical coverage, prescription drug coverage, deposits to a Health Reimbursement Arrangement, and Medicare Part B premium reimbursements, to qualifying benefit recipients. The portion of employer contributions allocated to health care for members in the traditional pension plan and combined plan was 0 percent during calendar year 2021. The portion of employer contributions allocated to health care for members in the member-directed plan was 4.0 percent during calendar year 2021.

Note 9 - Contingent Liabilities

The District is a defendant in a lawsuit. Although management cannot presently determine the outcome of the suit, management believes that the resolution of this matter will not materially or adversely affect the District's financial condition.

Amounts grantor agencies pay to the District are subject to audit and adjustment by the grantor principally the federal government. The grantor may require refunding any disallowed costs. Management cannot presently determine amounts grantors may disallow. However, based on prior experience, management believes any refunds would be immaterial.

Note 10 - Lease

The District entered into building lease in November 2018. The District moved into the building in November 2019. A supplemental lease for an additional 377 square feet for the year 2021 was approved by the District on January 10, 2021. This expired December 31, 2021. Another supplemental lease was signed in November 2021 for an additional 3,100 square feet which commences January 1, 2022 and expires October 31, 2029. The annual cost of the original and supplemental leases is \$333,708. See below for the future amortization of that lease.

Amortization

Amortization of the above lease is scheduled as follows:

Year Ending	
December 31,	<u>Leases</u>
2022	\$333,708
2023	333,708
2024	333,708
2025	333,708
2026	333,708
2027-2029	945,506
Total	\$2,614,046

Note 11 - Fund Balances

Included in fund balance are encumbrances which are commitments related to unperformed contracts for goods or services. Encumbrance accounting is utilized to the extent necessary to assure effective budgetary control and accountability and to facilities effective cash planning and control. At year end the balances of these amounts were as follows:

Stark County
Notes to the Financial Statements
For the Year Ended December 31, 2021

Note 11 – Fund Balances (continued)

		Special	Capital	
Fund Balances	General	Revenue	Projects	Total
Outstanding Encumbrances	1,046,520	473,052	1,261	1,520,833

The fund balance of special revenue funds is either restricted or committed. The fund balance of capital projects funds is restricted, committed, or assigned. These restricted, committed, and assigned amounts in the special revenue and capital projects funds would include the outstanding encumbrances. In the general fund, outstanding encumbrances are considered assigned.

Note 12 - COVID-19

The United States and the State of Ohio declared a state of emergency in March of 2020 due to the COVID-19 pandemic. Ohio's state of emergency ended in June, 2021 while the national state of emergency continues. During 2021, the District received COVID-19 funding. The financial impact of COVID-19 and the continuing emergency measures will impact subsequent periods of the District. The impact on the District's future operating costs, revenues and additional recovery from emergency funding, either federal or state, cannot be estimated.

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STARK COUNTY DISTRICT BOARD OF HEALTH STARK COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2021

Federal Grantor/ Pass Through Grantor Program Title	Federal AL Number	Pass Through Entity Number	Provided Through to Subrecipients	Total Federal Expenditures
U.S. DEPARTMENT OF AGRICULTURE Passed Through the Ohio Department of Health / Passed Through City of Canton Special Supplemental Nutrition Program for				
Women, Infants & Children Special Supplemental Nutrition Program for	10.557	76-2-001-1-WA-1321	\$0	\$319,294
Women, Infants & Children	10.557	76-2-001-1-WA-1322	0	87,406
Total U.S. Department of Agriculture			0	406,700
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES Passed Through Ohio Department of Health: Maternal and Child Health Services Block Grant to the States				
Maternal and Child Health Program	93.994	76-1-001-1-MP-0521	36,000	102,371
Reproductive Health & Wellness Grant	93.994	76-1-001-1-RH-1021	0	23,879
Maternal Child Health Services Block Grants States	93.994	76-1-001-1-CK-0321	0	14,275
Moms & Babies First: Black Infant Vitality	93.994	76-1-001-1-MB-0321	0	79,503
Total Maternal and Child Health Services Block Grant to the States			36,000	220,028
Preventive Health and Health Services Block Grant	93.991	76-1-001-4-CC-0821	22,000	112,354
Preventive Health and Health Services Block Grant	93.991	76-1-001-4-IC-0321	63,550	208,480
Preventive Health and Health Services Block Grant	93.991	76-1-001-4-ID-0321	0	60,000
Total Preventive Health and Health Services Block Grant			85,550	380,834
Injury Prevention and Control	93.136	76-1-001-4-DR-0221	3,400	139,500
Injury Prevention and Control	93.136	76-1-001-4-DR-0322	0	40,000
COVID-19 Injury Prevention and Control Supplemental Funding	93.136	76-1-001-4-CV-0121	0	46,776
Total Injury Prevention and Control			3,400	226,276
COVID-19 Epidemiology and Laboratory Capacity for Infectious Diseases - Enhanced Operations COVID-19 Epidemiology and Laboratory Capacity for	93.323	76-1-001-2-EO-0121	106,471	632,131
Infectious Diseases - Contact Tracing Supplemental	93.323	76-1-001-2-CT-0121	70,018	195,869
Total Epidemiology and Laboratory Capacity for Infectious Diseases			176,489	828,000
Public Health Emergency Response: Cooperative Agreement for Emergency Response: Public Health Crisis Response	93.354	76-1-001-2-CO-0120	38,861	44,728
	93.334	70-1-001-2-00-0120		
Public Health Emergency Preparedness Grant	93.069	76-2-001-2-PH-0421	49,400	136,376
Public Health Emergency Preparedness Grant	93.069	76-2-001-2-PH-0522	15,900	39,145
Total Public Health Emergency Preparedness Grant			65,300	175,521
Medicaid Cluster:	02 770	NI/A	0	71 700
Medical Assistance Program (Title XIX) Total Medicaid Cluster	93.778	N/A	0	71,790 71,790
Family Discouring Committee	00.047	70 4 004 4 DU 4004	0	44.000
Family Planning Services	93.217	76-1-001-1-RH-1021	0	44,668
Family Planning Services Total Family Planning Services	93.217	76-1-001-1-RH-1122	0	111,026 155,694
, ,	00.000	70 4 004 0 014 0400		
Immunization Cooperative Agreements - Public Health Initiative	93.268	76-1-001-2-GV-0122	4,454	20,577
Immunization Cooperative Agreements - Public Health Workforce	93.268	76-1-001-2-WF-0122	7,615	7,615
COVID-19 Immunization Cooperative Agreements - Vaccine Equity Supplement	93.268	76-1-001-2-VE-0121	97,207	344,238

STARK COUNTY DISTRICT BOARD OF HEALTH STARK COUNTY

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2021

Federal Grantor/ Pass Through Grantor Program Title	Federal AL Number	Pass Through Entity Number	Provided Through to Subrecipients	Total Federal Expenditures
U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES (continued) Passed Through Ohio Department of Health/ Passed Through City of Canton Immunization Cooperative Agreements	93.268	76-2-001-2-GV-0321	0	17,415
Total Get Vaccinated Ohio - Public Health Initiative			109,276	389,845
Passed Through Canton Regional Area Health Education Center Point of Service Maintenance and Enhancement Award	93.107	U77 HP 23072	20,283	27,338
Total Department of Health & Human Services			535,159	2,520,054
U.S. DEPARTMENT OF TRANSPORTATION Passed Through Ohio Department of Health Highway Safety Cluster: National Priority Safety Program	20.616	76-1-001-4-BB-0421	0	84,025
Total U.S. Department of Transportation			0	84,025
U.S. DEPARTMENT OF THE TREASURY Passed Through Ohio Department of Health: COVID-19 Coronavirus Relief Fund - Contact Tracing COVID-19 Coronavirus Relief Fund - Vaccine Needs Assessment	21.019 21.019	76-1-001-2-CT-0120 76-1-001-2-VN-0121	172,666 60,000	260,180 80,000
COVID-19 Coronavirus Response Supplemental	21.019	76-1-001-2-CO-0121	234,833	943,965
Total COVID-19 Coronavirus Relief Fund			467,499	1,284,145
Total U.S. Department of The Treasury			467,499	1,284,145
Totals			\$1,002,658	\$4,294,924

The accompanying notes to this schedule are an integral part of this schedule.

STARK COUNTY DISTRICT BOARD OF HEALTH STARK COUNTY

NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS 2 CFR 200.510(b)(6) FOR THE YEAR ENDED DECEMBER 31, 2021

NOTE A - BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of the Stark County District Board of Health (the District) under programs of the federal government for the year ended December 31, 2021. The information on this Schedule is prepared in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the District, it is not intended to and does not present the financial position or changes in net position of the District.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the cash basis of accounting. Such expenditures are recognized following the cost principles contained in Uniform Guidance wherein certain types of expenditures may or may not be allowable or may be limited as to reimbursement.

NOTE C - INDIRECT COST RATE

The District has elected not to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

NOTE D - SUBRECIPIENTS

The District passes certain federal awards received from the Ohio Department of Health and the Canton Regional Area Health Education Center to other governments or not-for-profit agencies (subrecipients). As Note B describes, the District reports expenditures of Federal awards to subrecipients when paid in cash.

As a pass-through entity, the District has certain compliance responsibilities, such as monitoring its subrecipients to help assure they use these subawards as authorized by laws, regulations, and the provisions of contracts or grant agreements, and that subrecipients achieve the award's performance goals.

NOTE E - MATCHING REQUIREMENTS

Certain Federal programs require the District to contribute non-Federal funds (matching funds) to support the Federally-funded programs. The District has met its matching requirements. The Schedule does not include the expenditure of non-Federal matching funds.

NOTE F - REPORTING OF EXPENDITURES FOR GRANT DELIVERABLES

The District receives federal grant funds some of which are paid on what is known as the "deliverable" basis. Deliverable grants are grants where funds are received only after certain goals are achieved as opposed to reimbursements for expenditures incurred. The District reports amounts received as expenditures for those grants.

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88 East Broad Street Columbus, Ohio 43215 ContactUs@ohioauditor.gov (800) 282-0370

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY GOVERNMENT AUDITING STANDARDS

Stark County District Board of Health Stark County 7235 Whipple Ave NW North Canton, OH 44720

To the District Board of Health:

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the cash balances, receipts, and disbursements for each governmental fund type as of and for the year ended December 31, 2021 and the related notes to the financial statements of the Stark County District Board of Health, Stark County, (the District) and have issued our report thereon dated December 9, 2022, wherein we noted the District followed financial reporting provisions Ohio Rev. Code § 117.38 and Ohio Admin. Code 117-2-03(C) permit and also noted the District included a disclosure regarding the potential financial impact of COVID-19 and the continuing emergency measures.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the District's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purposes of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the District's financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

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Stark County District Board of Health
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Independent Auditor's Report on Internal Control Over
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Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the District's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Keith Faber Auditor of State Columbus, Ohio

December 9, 2022



88 East Broad Street Columbus, Ohio 43215 ContactUs@ohioauditor.gov (800) 282-0370

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO EACH MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

Stark County District Board of Health Stark County 7235 Whipple Ave NW North Canton, OH 44720

To the District Board of Health:

Report on Compliance for Each Major Federal Program

Qualified and Unmodified Opinions

We have audited Stark County District Board of Health's, (the District) compliance with the types of compliance requirements identified as subject to audit in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could have a direct and material effect on each of the Stark County District Board of Health's major federal programs for the year ended December 31, 2021. Stark County District Board of Health's major federal programs are identified in the *Summary of Auditor's Results* section of the accompanying schedule of findings.

Qualified Opinion on Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

In our opinion, except for the noncompliance described in the *Basis for Qualified and Unmodified Opinions* section of our report, the Stark County District Board of Health complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) for the year ended December 31, 2021.

Unmodified Opinion on Each of the Other Major Federal Programs

In our opinion, the Stark County District Board of Health complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its other major federal programs identified in the *Summary of Auditor's Results* section of the accompanying schedule of findings for the year ended December 31, 2021.

Basis for Qualified and Unmodified Opinions

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

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We are required to be independent of the District and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified and unmodified opinions on compliance for each major federal program. Our audit does not provide a legal determination of the District's compliance with the compliance requirements referred to above.

Matter Giving Rise to Qualified Opinion on Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)

As described in finding 2021-001 in the accompanying schedule of findings, the District did not comply with requirements regarding subrecipient monitoring applicable to its AL #93.323 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) major federal program.

Compliance with such requirements is necessary, in our opinion, for the District to comply with requirements applicable to that program.

Responsibilities of Management for Compliance

The District's Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the District's federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the District's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, Government Auditing Standards, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the District's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material noncompliance, whether due to fraud or error, and design
 and perform audit procedures responsive to those risks. Such procedures include examining, on a
 test basis, evidence regarding the District's compliance with the compliance requirements referred
 to above and performing such other procedures as we considered necessary in the circumstances.
- obtain an understanding of the District's internal control over compliance relevant to the audit in
 order to design audit procedures that are appropriate in the circumstances and to test and report
 on internal control over compliance in accordance with the Uniform Guidance, but not for the
 purpose of expressing an opinion on the effectiveness of the District's internal control over
 compliance. Accordingly, no such opinion is expressed.

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We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Other Matters

Government Auditing Standards requires the auditor to perform limited procedures on the District's response to the noncompliance finding identified in our audit described in the accompanying corrective action plan. The District's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

Report on Internal Control over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the *Auditor's Responsibilities for the Audit of Compliance* section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as discussed below, we did identify a certain deficiency in internal control over compliance that we consider to be a material weakness.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiency in internal control over compliance described in the accompanying schedule of findings as item 2021-001, to be a material weakness.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on the District's response to the internal control over compliance finding identified in our audit described in the accompanying corrective action. The District's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of this testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Keith Faber Auditor of State Columbus, Ohio

December 9, 2022

STARK COUNTY DISTRICT BOARD OF HEALTH STARK COUNTY

SCHEDULE OF FINDINGS 2 CFR § 200.515 DECEMBER 31, 2021

1. SUMMARY OF AUDITOR'S RESULTS

(d)(1)(i)	Type of Financial Statement Opinion	Adverse under GAAP, unmodified under the regulatory basis
(d)(1)(ii)	Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)?	No
(d)(1)(ii)	Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?	No
(d)(1)(iii)	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
(d)(1)(iv)	Were there any material weaknesses in internal control reported for major federal programs?	Yes
(d)(1)(iv)	Were there any significant deficiencies in internal control reported for major federal programs?	No
(d)(1)(v)	Type of Major Programs' Compliance Opinion	Unmodified for all major programs except for Epidemiology and Laboratory Capacity for Infectious Diseases, AL# 93.323, which we qualified.
(d)(1)(vi)	Are there any reportable findings under 2 CFR § 200.516(a)?	Yes
(d)(1)(vii)	Major Programs (list):	Special Supplemental Nutrition Program for Women, Infants & Children, AL# 10.557, Coronavirus Relief Fund, AL# 21.019 and Epidemiology and Laboratory Capacity for Infectious Diseases, AL# 93.323.
(d)(1)(viii)	Dollar Threshold: Type A\B Programs	Type A: > \$ 750,000 Type B: all others
(d)(1)(ix)	Low Risk Auditee under 2 CFR § 200.520?	No

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2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS

None

3. FINDINGS AND QUESTIONED COSTS FOR FEDERAL AWARDS

1. Performance Reporting and Subrecipient Monitoring

Finding Number: 2021-001

Assistance Listing Number and Title: AL # 93.323 COVID-19 Epidemiology and

Laboratory Capacity for Infectious Diseases

Federal Award Identification Number / Year: 76-1-001-2-EO-0121 & 76-1-001-2-CT-0121 /

2021

Federal Agency: U.S. Dept. of Health and Human Services Agency

Compliance Requirement: Subrecipient Monitoring Requirement

Pass-Through Entity: Ohio Department of Health

Repeat Finding from Prior Audit? No

NONCOMPLIANCE AND MATERIAL WEAKNESS

45 CFR § 75.342(b)(1) states in part, the HHS awarding agency must use standard, OMB-approved data elements for collection of performance information including performance progress reports. The non-Federal entity must submit performance reports at the interval required by the HHS awarding agency or pass-through entity to best inform improvements in program outcomes and productivity. Intervals must be no less frequent than annually nor more frequent than quarterly except in unusual circumstances, for example where more frequent reporting is necessary for the effective monitoring of the Federal award or could significantly affect program outcomes.

In addition, **45 CFR § 75.352(d)** states that all pass-through entities must monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of the subaward; and that subaward performance goals are achieved. Pass-through entity monitoring of the subrecipient must include:

- (1) Reviewing financial and performance reports required by the pass-through entity.
- (2) Following-up and ensuring that the subrecipient takes timely and appropriate action on all deficiencies pertaining to the Federal award provided to the subrecipient from the pass-through entity detected through audits, on-site reviews and other means.
- (3) Issuing a management decision for audit findings pertaining to the Federal award provided to the subrecipient from the pass-through entity as required by § 75.521.

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For the Epidemiology and Laboratory Capacity for Infectious Diseases - Enhanced Operations and Contact Tracing Supplemental federal program (AL#93.323), seven of the nine program reports selected for testing in which the documentation compiled from the District and/or City Health departments (i.e. - District's subrecipients) and provided by the District did not support the amounts on the respective program reports submitted to the Ohio Department of Health. Since the District did not have adequate monitoring of the subrecipients, amounts on the program reports were not properly supported and verified.

The District should obtain, monitor and retain documentation from subrecipients to support the program reports being submitted to the Ohio Department of Health that adheres to 45 CFR § 75.342(b)(1) program reporting requirements. A review of the program reports and the related support documentation should be performed by District personnel to help ensure the accuracy of these program reports prior to their submission to the Ohio Department of Health that adheres to 45 CFR § 75.352(d) related to subrecipient monitoring requirements.

Official's Response: See Corrective Action Plan

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Kirkland Norris, RS, MPH, Health Commissioner Karen Hiltbrand, President of the Board of Health Maureen Ahmann, DO, Medical Director

CORRECTIVE ACTION PLAN

2 CFR § 200.511(c) December 31, 2021

Finding Number:

2021-001

Planned Corrective Action:

The District has implemented a plan to monitor subrecipients of federal pass through funding to ensure that program reports are properly monitored. This will occur no less than once per year. Items to be monitored are activities of the subrecipient to ensure that funds are used for intended purposes and that goals are being achieved. Financial statements and audit reports will be reviewed to ensure compliance with applicable grant

requirements. Program reports will be compared to underlying and supporting records of the subrecipients to ensure that

amounts being reported are correct.

Anticipated Completion Date:

12/08/2022

Responsible Contact Person:

Steven T. Ling

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STARK COUNTY DISTRICT BOARD OF HEALTH

STARK COUNTY

AUDITOR OF STATE OF OHIO CERTIFICATION

This is a true and correct copy of the report, which is required to be filed pursuant to Section 117.26, Revised Code, and which is filed in the Office of the Ohio Auditor of State in Columbus, Ohio.



Certified for Release 1/5/2023

88 East Broad Street, Columbus, Ohio 43215 Phone: 614-466-4514 or 800-282-0370