7. Coordination and cooperation

After allocating all of the categorical formula grants to official State agencies, the only authorized recipient under the law, we work closely with States to coordinate and cooperate in the administration of the Federal funds. This includes such items as budget and plan development, proper expenditures of the formula grant, and the required State and local matching, and the periodic reporting to the Public Health Service of program and expenditure experiences. There are close working relationships between the various community health divisions within the Bureau of State Services, as it relates to fund administration, program execution, adequate reporting of accomplishments by State health agencies and as needed, policy and procedure changes directed toward improving effectiveness and efficiency in utilizing the Federal formula grant funds at the State and local level. We coordinate our programs with other units in the Department as well as other Federal Government agencies which also allocate funds to States to support health programs or kindred activities. As examples, we work very closely with the Bureau of State Service's environmental health section in radiological health, water pollution, and air pollution. Currently we are providing the grants management requirements necessary to administer their formula grants. We also work closely with the community mental health program of National Institute for Mental Health. Here again we provide the grants management function in order to better coordinate the administration of all Public Health Service formula grant funds appropriated by Congress to support health and health-like activities. We have coordinated our efforts so closely with the Children's Bureau in welfare administration that for the past several years we have been using a health grants administrative manual which was jointly and cooperatively developed by Children's Bureau and Public Health Service personnel. This manual continues to be used and is updated and revised as legislative changes become effective. We also coordinate and cooperate with the poverty program, the Office of Economic Opportunity, the Appalachian Regional Commission, the Social Security Administration, the Department of Labor, and the Office of Education. Because our formula grant funds can only be allocated to official State health agencies, we do not cooperate to any significant extent with foreign governments, international organizations, nonprofit organizations and institutions, and business enterprises except to occasionally exchange information. Even though the formula grants are allocated only to States, we do attempt to cooperate with local city and county health departments. The regulations in our health grants manual have purposely been designed to permit the reallocation of a portion of the individual State's share of the formula grant funds to local health units. The technique has resulted in a closer working relationship between State and local health officials and as a consequence there has been a gradual increase, over the last 15 years, of both the level of program activity and the amount of funds available for expenditures to support health programs. On occasion, and as the need exists, we have also assigned specially trained public health personnel to States for use at either the State or local level. Such assignments are made on the basis of need, inability to recruit, and