1. Call to Order
a. Opening ceremonies - Pledge Allegiance to the Flag of the United States of America
b. Roll Call
c. Approval of the Agenda*
d. Approval of the Minutes*
2. Public Comment
3. Health Officer's Report
4. Medical Director's Report
5. Committee Reports
a. Finance Committee - Approval of the minutes from the 2/22/21 meeting.
b. Program, Policies, and Appeals - Did not meet.
6. Financial Reports
a. Approve Payments*
b. Review Financials
7. Unfinished Business
a.
8. New Business
a. Budget Amendment \#2*
b. Immunization Fee Schedule*
9. Departmental Reports
a. Personal Health \& Disease Prevention
b. Environmental Health
c. Area Agency on Aging
10. Adjournment - Next meeting: March 25, 2021 via zoom

## January 28, 2021 - Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order at 9:00 a.m. with the Pledge of Allegiance to the Flag of the United States and roll call as follows: Tom Matthew, Jon Houtz, Mark Wiley, Brent Leininger, Kathy Pangle, and Jared Hoffmaster.

Also present from BHSJ: Rebecca Burns, Dr. Vogel, Theresa Fisher, Kali Nichols, Paul Andriacchi, and Laura Sutter.

- Mr. Wiley moved to close nominations for the panel of officers and to cast a unanimous ballot for Ms. Pangle as Chairperson and Mr. Matthew as Vice-Chairperson. The motion was supported by Mr. Houtz. A roll call vote was taken and the motion passed 6-0 (Mr. Matthew, yes; Mr. Houtz, yes; Mr. Wiley, yes; Mr. Leininger, yes; Ms. Pangle, yes; Mr. Hoffmaster, yes)

Mr. Leininger moved to approve the agenda with support from Mr. Hoffmaster. The motion carried.

Mr. Wiley moved to approve the minutes from the previous meeting with support from Mr. Matthew. The motion carried.

Public comment:

- None

Rebecca Burns, Health Officer, reviewed her monthly report. Items discussed: New Year/New Board of Health, Getting to Know BHSJCHA, Board of Health Education, Pop-Up Testing, How We Partner on COVID-19, COVID-19 Vaccination, Using our Website for Online Service Requests, Health Department Offices Open, Small Construction Project in Coldwater, Staff Capacity, Strategic Planning, and Health Promotion \& Education Updates.

Dr. Vogel, Medical Director, reviewed the Medical Director's monthly report. This month's reports covered the COVID-19 Timeline - A Medical Report.

Committee Reports:

- Finance Committee - Did not meet.
- Program, Policy, and Appeals Committee - Did not meet.

Financial Reports/Expenditures

- Mr. Matthew moved to approve the expenditures as reported with support from Mr . Hoffmaster. A roll call vote was taken and the motion passed 6-0 (Mr. Matthew, yes; Mr. Houtz, yes; Mr. Wiley, yes; Mr. Leininger, yes; Ms. Pangle, yes; Mr. Hoffmaster, yes)


## Unfinished Business

- There was no unfinished business to discuss.

New Business:

- Mr. Hoffmaster moved to appoint Mr. Matthew, Mr. Wiley, and Ms. Pangle to the Program, Policy, and Appeals Committee; and appoint Mr. Houtz, Mr. Leininger, and Mr. Hoffmaster to the Finance Committee. The motion was supported by Mr. Leininger. A roll call vote was taken and the motion passed 6-0 (Mr. Matthew, yes; Mr. Houtz, yes; Mr. Wiley, yes; Mr.
Leininger, yes; Ms. Pangle, yes; Mr. Hoffmaster, yes)
- Mr. Wiley moved to approve the proposed meeting schedule as presented with support from Mr. Matthew. A roll call vote was taken and the motion passed 6-0 (Mr. Matthew, yes; Mr. Houtz, yes; Mr. Wiley, yes; Mr. Leininger, yes; Ms. Pangle, yes; Mr. Hoffmaster, yes)
- Mr. Houtz moved to approve the Bylaws as presented, with support from Mr. Wiley. A roll call vote was taken and the motion passed 6-0 (Mr. Matthew, yes; Mr. Houtz, yes; Mr.
Wiley, yes; Mr. Leininger, yes; Ms. Pangle, yes; Mr. Hoffmaster, yes)
Departmental Reports:
- Environmental Health
- Area Agency on Aging
- Personal Health \& Disease Prevention

With no further business the meeting was adjourned.
An educational presentation was done immediately after the BOH Meeting. This month's presentation was on Public Health Law.

Respectfully Submitted by:
Theresa Fisher, BS


Health Officer's Report to the Board of Health for February 25, 2021 Prepared by: Rebecca A. Burns, M.P.H., R.S.

## Agency Updates

Vaccination Continue: I am so proud of the efforts of the BHSJCHA team, our volunteers, the Michigan National Guard, and partner agencies in getting every available dose provided to the tri-county area into arms over the past month. We have had an overwhelming response from people wanting to get vaccinated. However, this week when we put out the schedules on our website for eligible individuals, they did not fill in 6-10 minutes as they had in weeks prior. After monitoring the schedules for 24 hours and them still not filling, I opened them to 60-64 year olds. The 60-64 year old group is a target for those areas with high Social Vulnerability Index. The tri-county area has a higher SVI and some census tracts within each county are especially vulnerable. As we work to target those vulnerable populations, we can lower the age limit down to 60 years and older. There is also a special allocation pilot for targeting high SVI areas with potential for additional vaccine allocation that I plan to submit an application for.

I want to give you some specifics on the number of vaccines given by provider in the tri-county area. A few things to remember; early-on the hospitals received more vaccine so that healthcare workers could be vaccinated with public health receiving smaller amounts. Then there was a shortage of Moderna due the federal Long-Term Care vaccination program and state allocations of Moderna going to Walgreens and CVS to support that vaccination effort. In recent weeks, the shift has been to allocate statewide, $60 \%$ to local public health and $40 \%$ to hospital systems. In the tri-county area that has resulted in nearly all vaccine coming to the local health department and when the local hospital received an allocation, they partnered to bring that vaccine to the BHSJCHA mass clinic. Mass clinics are efficient and very cost effective. They result in large numbers of the population being vaccinated quickly with minimal cost to the government.

The following table shows the number of vaccines provided by each provider in the tri-county area as of $2 / 21$. Definitions: MDOC = MI Dept of Corrections, CBHC = Covered Bridge Healthcare, HOSP1 = by county; ProMedica, Hillsdale Hospital, Three Rivers Health, HOSP2 = Sturgis Hospital

| BRANCH | TOTAL | BHSJ | MDOC/CBHC | HOSP1 | HOSP2 | WALGREENS | MEIJER |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| MODERNA | 5435 | 2476 | 807 | 1790 |  | 256 | 106 |
| PFIZER | 1091 | 1091 |  |  |  |  |  |
| HILLSDALE |  |  |  |  |  |  |  |
| MODERNA | 3021 | 2408 |  |  |  |  |  |
| PFIZER | 4319 |  |  | 4319 |  |  |  |
| ST JOSEPH |  |  |  |  |  |  |  |
| MODERNA | 6241 | 3701 | 81 | 1131 | 401 | 718 |  |
| PFIZER | 1221 | 1221 |  |  |  |  |  |

As of Monday, March $1^{\text {st }}$, MDHHS has expanded the categories for vaccination to include Agricultural and Farm Processing Workers. We are already in discussion with many of the companies in the tricounty area and we will set-aside some of our vaccine over the coming weeks to vaccinate these workers.

At BHSJCHA, we have chosen to vaccinate without charging people's health insurance for the administration fee. I feel strongly that this public health effort that is aimed at stopping this pandemic should be done so that there are no barriers to the public. Therefore, I don't want someone whose insurance doesn't pay for vaccines or those that lack insurance to keep them from receiving the vaccine.

The Johnson \& Johnson vaccine will be discussed by the FDA on Friday by a panel called the Vaccines and Related Biological Products Advisory Committee. This is a critical step in the vaccine receiving approval for use in the United States. The vaccine is a single dose with an efficacy of $66 \%$, but the company and the National Institute of Health state it is $85 \%$ effective in preventing severe disease. In meetings I have attended with MDHHS staff, the vaccine is considered ideal for populations that may be hard to find for a second dose such as the homeless.

|  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Total Vaccine Doses given by BHSJCHA and community partners \& pharmacies December through 2-21-21 <br> 21,328 <br> Branch - 6,526 <br> Hillsdale - 7,340 <br> Saint Joseph - 7,462 |  |  |  |  |  |
| BHSJCHA is following CDC and MDHHS's priority guidelines for administering vaccine. can schedule a vaccine appointment from BHSJCHA right now? |  |  |  |  |  |
|  |  |  |  |  |  |
| Also includes mortuary workers. <br> Residents of longterm care facilities. |  |  | Not yet, eligible by March 1 : |  |  |
|  |  |  | Agricultural and food processing workers |  | 1) BRAMCH-HLLSOALE-ST. Joseph |

Mobile Clinic Van: We are getting closer to having our mobile clinic on the road. We have obtained the title and plates, have submitted named drivers to our insurer, and are just waiting for Motor Vehicle Reports for those named drivers. We will take this unit out to provide smaller more targeted vaccination clinics in areas of the tri-county area with high Social Vulnerability.

COVID-19 Testing: We have a date to begin the testing for COVID-19 at our facility in Coldwater, March $4^{\text {th }}$. This testing uses the state's contracted testing company called Honu, who will travel to our facility and test individuals that drive-up to be tested. The testing is provided at no cost to residents of Michigan. This is essentially the same testing we were doing as a drive-through during the summer, fall, and early winter, but requires no staffing by us. Because I need BHSJCHA staff to focus on vaccination, this will continue to provide a needed free service to residents of the tri-county area and if it goes well, may be expanded to our other offices.

Board of Health Education: As discussed last month, Board of Health trainings will be provided through the calendar year and will begin directly after the board meeting ends. Last month I provided a Public Health Law primer. For those that were unable to join after the meeting, the training could be done on your own. If you need information on how to access that training, please let me know.

The training planned for February is on Public Health finance. Local health departments in Michigan are funded through a myriad of program grants, local county appropriations, and direct fee for service collections. We are audited annually and the presentation to the Board of Health from the audit firm is scheduled in March with our budget year beginning on October $1^{\text {st }}$ and ending on September $30^{\text {th }}$.

At the next BOH Education session, we will have a presentation on the Open Meetings Act by the Agency's Counsel, Andrew Brege. This will be at the April $22^{\text {nd }}$ meeting. There is no BOH Education scheduled for the March meeting.

AAA3C \& Health Education and Promotion: Last month I shared that we had a small construction project just being completed in our Coldwater office to provide AAA with a larger suite and move our Health Ed and Promotion team into new smaller quarters. The move is now complete and both teams are now settling into their new more appropriately sized spaces.

Staff Capacity: We are feeling some relief with lower positive cases and some of our Case Investigators are now being redirected to assist with vaccination clinics. We have also recently signed an agreement for temporary workers with Robert Half Agency. Most of these temp workers will be assisting with vaccination clinics but we will also use them for screening at our building entrances.

Strategic Planning: This continues to be paused.
Health Promotion \& Education Updates - Alex has been working with our partner, the Michigan Center for Rural Health, on writing for the implementation grant that follows the current HRSA planning grant we have for Rural Communities Opioid Response Planning. We are hopeful for a successful application that will take this work to actual implementation.

Also in Health Promotion \& Education, the Medical Marijuana grant applications were approved for each county, so that work is now beginning.

Oral Health Screenings for Kindergartners: PA 261 oral health screening, passed December, 2020 for oral health screening of kindergartners. While the law targets this new screening process to be implemented in the 2021-22 school year, there is also a provision that states if no funds are allocated in the state budget, the screening does not have to take place. The current budget (FY21) has no funding approved for this oral health screening law so there is no expectation that oral health screenings will begin for the coming school year (2021-2022).

# Medical Director's Report to the Board of Health H. Lauren Vogel, D.O., M.P.H. <br> February 2021 - COVID-19 Q\&A 

## Virology 101

The Pfizer and Moderna vaccines are mRNA vaccines. Within a cell the 'brain' nucleus is a DNA protein. This nucleus directs all the functions in the cell by creating a messenger, mRNA, that travels to other areas within the cell or to other cells giving them specific directions. In a virus infection, once the virus has penetrated the cell it redirects the nucleus to give instructions to make more virus. This is done via the mRNA system.

Both the Pfizer and Moderna vaccines are designed to create specific antibodies that create a barrier between the spike on the coronavirus and the cell wall. This prevents the virus from entering the cell and prevents infection. The antibody made from a part of the covid spike coats the virus spike preventing it from attaching to the human cell. The vaccines do not interact directly with the nucleus of the virus. This vaccination prevents the person from getting the infection but may not prevent them from passing on the virus. It has proved to be effective against the current mutations.

The Oxford AstraZeneca, Johnson \& Johnson and Novavax vaccines work differently. These vaccines attach a piece of the viral spike to an adenovirus that is made to be non infective. The vaccine penetrates the human cell and injects the modified virus into the cell's nucleus where it instructs the cell to produce DNA antigen that is not infective. The body recognizes the mutant DNA and makes an antibody against it. ${ }^{1}$

When the antibodies generated by the vaccination attach to the virus they also prevent the virus from penetrating the human cell. The DNA antibody response is less effective than the mRNA response but the DNA is more stable and more easily stored. Studies have shown this type of vaccine to be subject to mutant variation more so than the mRNA antibody vaccines.

## What are the side effects from the vaccinations?

The most common side effects from the Moderna or Pfizer mRNA vaccination are pain and swelling at the injection site. Other effects may include fever, chills, rash, headache, malaise and lethargy and lymph node swelling surrounding the injection site. To date our Health Agency has given over 13,000 vaccinations using both the Moderna and Pfizer vaccines and we have seen mild arm pain in many and only headache and
malaise in a few. We have had no serious allergic reactions. Facts from the CDC state that after over 4 million vaccinations have been given there have only been 14 documented anaphylactic infections.

## Dr. Fauci has been referencing a booster shot, what is that?

Data from vaccination recipients has documented that both the Moderna and Pfizer vaccines are more than $94 \%$ effective and that their immunity has lasted for a year (that's the duration of the data to date). Both vaccines have been documented to be effective against all of the current known covid19 mutations. However, newer mutations may figure out how to resist the current vaccines and the vaccine will need to be updated to control any new mutations. Also, how long immunity to the current viruses lasts is not known. Although the mRNA vaccines are different they may in fact require booster dosing, like the seasonal influenza, to update and continue protection. Bottom line, we currently do not know whether booster vaccination will be required.

The second generation covid19 vaccines using the adenovirus technique have not been studied long enough to know how long they will be effective, if they will be effective against newly emerging mutations or if booster immunizations will be necessary.

## Are there new strains of Covid and how are they differing from the first one?

Viruses cannot mutate unless they propagate. Mutations are common with coronaviruses. When the virus replicates, numerous mutations are created. Most have no adverse effects to the host (us). Most have no benefit to the virus and fade away as replication continues. A few make the virus more effective, either more contagious and/or more lethal and these become dominate and continue to multiply. The most effective mutation will become dominant as it spreads (propagates) in a community or locale.

Coronavirus has a central core, lipid shell and protein spites (corona). The current vaccines affect selected areas within these spikes. The virus modifies the protein makeup in the spikes as they mutate. Scientists are able to look at the virus genome to determine exactly which proteins are changed and where these changes occur on the specific spikes. The scientific names of the mutations reflect these specific changes but the common names often refer to the location of the mutation.

There are multiple mutations circulating currently. The UK variant (B.1.1.7) is dominant in the UK and in the US. Both the South African (B.1.351) and Brazilian (P.1) strains are also present in the US but remain overshadowed by our dominant B.1.1.7 strain. The new California strain (C.1) is apparently a South African variant. Newer and more stable mutant strains of the SARS-CoV-2 virus are expected. ${ }^{2,3}$ The Oxford AstraZeneca vaccine has been shown to be minimally effective ( $22 \%$ ) against the South African variant and it's use there has be canceled.

## What age have children been approved for the vaccination?

Pfizer can be given to children aged 16 and Moderna is approved for children aged 18. Pfizer is currently in trials for children down to age 12. The age limitations for the vaccines soon coming, Johnson \& Johnson, Oxford AstraZeneca and Novavax, have not been announced but will not include children.

A protein (ACE2) is found on the nasal and respiratory mucosa. This protein is necessary for coronavirus to attach to human cells. Younger children (<age 9) have lower levels of ACE2 protein in their nasal mucosa and this offers the younger children some protection against SARS-CoV-2 infection. ${ }^{4}$

How can workers best protect themselves from the virus when returning to the office. Is an updated ventilation system recommended?

The absolute best way to protect yourself is to wear an appropriate mask correctly. The mask must have multiple layers, cover both the nose and mouth tightly and be worn continuously while in public. Maintaining social distancing of a minimum of 6 feet is as important. If you don't feel good, don't come to work. Do not touch your face or food without washing or sanitizing your hands - this must be a conscious effort.

An effective way to reduce the concentrations of indoor contaminants of covid19 is to increase ventilation - the amount of outdoor air coming indoors. Ensuring proper ventilation with outside air can help reduce the concentration of covid19 indoors. However increasing ventilation alone is not enough to protect people from COVID-19. Recirculating indoor air may increase covid19 exposure. Good ventilation and the use of HEPA filters make the air safer but will not completely eliminate the risk.

When everyone in the environment is appropriately masked the protection is about $96 \%$ from recent studies. ${ }^{5}$ This is significantly reduced if anyone in the group is not masked correctly.

## Is double masking necessary and what are the best masks for public use?

The N-95 mask is the most efficient mask in use today and should be limited to use by first-line Healthcare Workers. Like all masks, they must be used correctly to be effective. However, other masks designed and worn correctly give adequate protection against covid19 and it's mutants. Masks are appropriate when [1] they are constructed with two or more layers of washable, breathable fabric, cotton preferred; [2] they completely cover your nose and mouth; [3] they fit snugly against the sides of your face without gaps; [4] they do NOT have exhalation vents. ${ }^{6,7}$ A gater type mask meeting all of the conditions listed above is an acceptable mask.

Using double masking offers no benefit when the single mask is used correctly. In some cases, the second mask is effective in making the initial mask fit more snugly but this may come at the expense of ease of breathing. If your glasses fog up when breathing this indicates that your mask is NOT fitting correctly.

## SARS-CoV-2 Mutations

A characteristic of coronaviruses is their ability to mutate. Once the virus has inhabited a human host it directs that host to make more virus. This propagation of viral particles leads to changes in the genetic makeup of the new viruses. Most of the changes do not benefit the host (us) or the virus and they are not sustained. In some cases however, the mutant change does benefit the virus either by making the new mutant more contagious or more lethal. These more effective mutants spread within a community and become the new dominant strain. With each effective mutation the virus derives some benefit.

The majority of the current viral mutations such as the UK variant have proven to be significantly more contagious. The Brazilian variant may prove to be more lethal. Imposing travel restrictions may prove effective in preventing the spread of the known mutations. However, travel restrictions do not prevent the current viruses circulating within the US from developing more successful mutations. Dr. Fauci has stated that propagation is necessary for mutation. We are seeing this in new strains identified in California.

The potential for viral propagation to allow for a more lethal strain of virus is real. We have not vaccinated enough of our population to reduce this risk. Our only current way to reduce the risk for mutation of the SARS-CoV-2 into a more dangerous strain is to limit human infection with the virus. Our best protection for this is to wear an appropriate mask covering the nose and mouth whenever in public and to maintain social distancing
among non-family members. President Biden has asked the public to mask appropriately for 100 days.

There is significant evidence that masking reduces viral spread and that reduces risk of community infection and the ability of the virus to mutate. Assuming individual responsibility for that 100 days of masking reduces our risk and allows more time to get more of our community vaccinated and protected. Without community cooperation we allow the virus an opportunity to mutate to a yet more effective stain with every individual infection.

## REFERENCE

1. Corum J. Zimmer C. How the Johnson \& Johnson Vaccine Works. The NY Times. February 2021. https://www.nytimes.com/interactive/2020/health/johnson-johnson-covid-19-vaccine.html. Accessed February 2021.
2. Emerging SARS-CoV-2 Variants. CDC. January 2021.
https://www.cdc.gov/coronavirus/2019-ncov/more/science-and-research/scientific-brief-emerging-variants.html. Accessed February 2021.
3. SARS-CoV-2 Variants. CDC. January 2021. https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/variant-surveillance/variant-info.html. Accessed February 2021.
4. Patel AB. Verma A. Nasal ACE2 Levels and COVID-19 in Children. JAMA. May 2020. https://jamanetwork.com/journals/jama/fullarticle/2766522. Accessed February 2021.
5. Ventilation and Coronavirus (COVID-19). EPA. July 2020.
https://www.epa.gov/coronavirus/ventilation-and-coronavirus-covid-19. Accessed February 2021.
6. Howard J. et.al. An evidence review of face masks against COVID-19. PNAS. January 2021. https://www.pnas.org/content/118/4/e2014564118. Accessed February 2021.
7. Your Guide to Masks. CDC. January 2021. https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/about-face-coverings.html. Accessed February 2021.

## February 22, 2021 - Board of Health Finance Committee Meeting Minutes

The meeting was called to order at 10:06 a.m. by Commissioner Brent Leininger, with roll call as follows: Jared Hoffmaster and Brent Leininger.

Also present from BHSJ: Rebecca Burns, Theresa Fisher, Kali Nichols, and Brenae Corbeil.
Public comment:

- None

New Business:

- Mr. Hoffmaster moved to recommend that the full Board approve the FY20/21 Budget Amendment \#2 as presented, with support from Mr. Leininger. A roll call vote was taken and the motion passed (Mr. Hoffmaster, yes; Mr. Leininger, yes)
- Mr. Hoffmaster moved to recommend that the full Board approve the Immunization Fee Schedule as presented, with support from Mr. Leininger. A roll call vote was taken and the motion passed (Mr. Leininger, yes; Mr. Hoffmaster, yes).

With no further business the meeting was adjourned at 2:49 PM.
Respectfully Submitted by:
Theresa Fisher, BS


| January 1 through January 31, 2021 |  |  |
| :---: | :---: | :---: |
| A+ Nursing | Care Management | 490.50 |
| Abila | Quarterly Subscription | 5,418.14 |
| ACD.Net | Telephones 3 offices | 2,574.56 |
| Aetistry Technologies | Web Hosting | 650.00 |
| AFLAC | Payroll Deduction | 1,249.14 |
| Alerus Financial (Retirement) | Payroll Deduction | 2,126.00 |
| Amazon | CSHCS Client - AED | 1,398.00 |
| Amazon | Medical Supplies - 5 invoices | 2,284.25 |
| Arden Yoder | Refund of Septic Permit | 172.00 |
| Armstrong Health Care | WIC / AAA Contractual Consultant | 3,658.00 |
| Availity | Eligibility Software - EMR | 55.00 |
| Blue Cross Blue Shield | Health Insurance | 67,738.42 |
| Branch Area Transit Authority | Elderly Transportation Service | 2,928.00 |
| Branch County Commission COA | Home \& Community Based Services | 13,742.09 |
| Branch County Complex | Rent - Coldwater Office | 5,694.28 |
| Branch County Complex Quarterly | Maintenance (Work orders \& Grounds) | 139.50 |
| Branch County Complex Quarterly | Building Repair \& Maintenance | 636.63 |
| Branch County Complex Quarterly | Internet | 997.50 |
| Branch County Complex Quarterly | Utilities (Gas, Electric, Trash Pickup \& Pest) | 4,049.40 |
| CAA of South Central | Home \& Community Based Services | 27,072.18 |
| CDW Government Inc. | MS OfficeProPlus License | 4,123.20 |
| Century Bank - Master Card | Zoom licenses Sales Tax Refund | (43.28) |
| Century Bank - Master Card | Office Supplies | 47.35 |
| Century Bank - Master Card | AAA Services | 432.00 |
| Century Bank Basic Flex Health Plan | Payroll Deduction | 2,353.10 |
| Century Bank EFPTS | Federal \& Fica Taxes | 49,370.82 |
| Century Bank Mers | Forfeiture | 104.84 |
| Century Bank Mers | MERS DB /Retirement | 70,233.52 |
| Century Bank State | Michigan Tax | 8,356.66 |
| Charter Communications | Sturgis Internet \& Phone Line | 126.97 |
| Cintas | Lab Coats/Rugs - Cleaning | 138.93 |
| City of Coldwater | Water Lab Test | 60.00 |
| City Of Three Rivers | Water / Sewage | 21.08 |
| Companion Life Insurance Co. | Life Insurance Premiums | 1,045.36 |
| Crossroads Health \& Home Services | Care Management | 3,147.05 |
| Current Office Solutions | Office Supplies/Copier Charges - 2 Invoices | 522.04 |
| Dr. S. Jay Bowman | CSHCS Client - Dental Copay | 1,600.00 |
| Dr. Vogel | Medical Director - Contractual | 4,501.54 |
| FedEx | Mailing | 34.41 |
| Frontier | Sensaphone \& Fax Line Service | 290.69 |


| January 1 through January 31, 2021 |  |  |
| :---: | :---: | :---: |
| Heartsmart.com | 3 AED \& AED Pads - 2 Invoices | 4,144.72 |
| Hillsdale Board Of Utilities | Building Expense - HD | 1,714.58 |
| Hillsdale County Treasurer | Building Supplies Expense - HD - Gas | 155.35 |
| Hillsdale County Treasurer | Building Supplies Expense - HD | 162.88 |
| Hillsdale County Treasurer | Building Refuse Expense - HD | 165.00 |
| Hillsdale County Treasurer | Building Labor Expense - HD | 239.26 |
| Hillsdale County Treasurer | Building Snow/Mow Expense - HD | 285.00 |
| Home Care Wellness | Care Management | 453.97 |
| HomeJoy Care-N-Assist | Care Management | 3,933.15 |
| Indiana Michigan Power | Building Expense - TR | 1,049.71 |
| iSolved - Infinisource Cobra Compliance | Cobra Notices Admin. Yearly Fee | 20.00 |
| Jim Nabozny | Refund of Septic Permit | 98.00 |
| Kalamazoo County Human Service | Ombudsman | 500.00 |
| Kali Nichols | Misc Office Supplies | 120.49 |
| Katelyn Hamlin | AAA Services | 44.00 |
| Legal Service Of South Central Mi. | Older Adult Legal Assistance | 1,060.00 |
| Malph | 10/1/20-9/30/21 Malph Dues | 4,737.00 |
| Maner Costerisan | Field Work - 2019-20 Audit | 6,100.00 |
| Maplecrest | Rent - Sturgis Office | 590.00 |
| Marana Group | Postage Pick Up Service | 142.00 |
| Maxim Healthcare Staffing Services Inc. | Contracted Services | 18,577.69 |
| McKesson | Medical Supplies - 6 Invoices | 7,399.82 |
| Medical Care Alert | Care Management | 129.75 |
| Mers 5\% Alerus Financial DC | Defined Contributions 5\% EES 2 Months | 13,327.60 |
| Michigan Center for Rural Health | RCOR Planning | 2,000.00 |
| Michigan Ear Institute PLLC | CSHCS Out of Pocket | 250.00 |
| Michigan Public Health | Workforce Contract | 1,466.47 |
| Michigan State Disbursement Unit | Payroll Deduction | 380.22 |
| Nationwide | Payroll Deduction | 2,380.00 |
| One Stop Promotions | Promotional Supplies AAA \& Voca | 1,629.25 |
| Pitney Bowes | Quarterly Subscription | 539.10 |
| ProAssurance Casualty Company | Professional Liability - Physician | 1,128.00 |
| Prompt Care | Drug Testing-1 Employee | 69.00 |
| Republic Waste Services | Building Expense - TR Quarterly | 47.02 |
| Richard Clark | Building Cleaning Expense - Sturgis | 325.00 |
| Richard Clark | Building Cleaning Expense - CW | 1,800.00 |
| Riley Pumpkin Farm | TR Building Expense - Winter Care | 500.00 |
| Roberts Brothers Excavating Inc | TR Repair sewer line \& install clean outs | 1,179.00 |
| Rosati Schultz Joppich Amtsbueshler | Attorney | 2,865.00 |


| January 1 through January 31, 2021 |  |  |
| :---: | :---: | :---: |
| Ruth Brown | Contractual | 3,645.91 |
| Sanofi Pasture | Medical Supplies | 3,615.47 |
| SEMCO Energy | Building Expense - TR | 136.70 |
| Sensaphone | Monitoring System | 400.60 |
| Shaffmaster U-Stor | Storage 3 Months | 150.00 |
| Shred It | Document Destruction | 90.00 |
| Sonit | Internet Consultant | 110.00 |
| St Joseph County COA | Home \& Community Based Services | 30,099.73 |
| St Joseph Trans Authority | Older Adult Transportation | 2,585.37 |
| Staples | Office Supplies - 5 Invoices | 535.94 |
| State Of Michigan | CSHCS Client Fees | 720.00 |
| State Of Michigan | Food Licenses Surcharge | 1,506.00 |
| State Of Michigan | Approp. Match Dental Clinic | 21,966.19 |
| State Of Michigan EGLE | Water Lab Test | 34.00 |
| Stratus Video | Translator - 12/2/20-12/7/20 | 72.60 |
| Three Rivers Health | Rent - Dental Clinic | 2,775.00 |
| Thurston Woods | Home \& Community Based Services | 827.24 |
| Verizon | Cell Phones | 797.70 |
| VRI Lifeline Of Michigan | Care Management | 651.00 |
| Xmission | Email Provider - 2 months | 265.50 |
|  |  | 442,232.85 |


| Assets |  |  |  |
| :---: | :---: | :---: | :---: |
| Cash on Hand |  |  | 4,051.00 |
| Cash with County Treasurer |  |  | 3,680,041.39 |
| Community Foundation Grant |  |  | 309,955.94 |
| Accounts Receivable |  |  | 95,988.36 |
| Due from Dental DAPP |  |  | 21,966.19 |
| Due from State |  |  | $(199,776.44)$ |
| Due from Branch County |  |  | 53,485.75 |
| Due from Other Funding Sources |  |  | 338,031.42 |
| Prepaid Expenses |  |  | 150,803.73 |
| Biologic Inventory |  |  | 94,329.82 |
| Total Assets |  |  | $\underline{\underline{4,548,877.16}}$ |
| Liabilities |  |  |  |
| Accounts Payable |  |  | 135,992.72 |
| Payroll Liabilites |  |  | 155,959.68 |
| Capital Improvements |  |  | 25,000.00 |
| Deferred Revenue |  |  | 1,041,165.04 |
| Deferred Revenue BR |  |  | 35,657.00 |
| Deferred Revenue HD |  |  | 39,062.00 |
| Deferred Revenue SJ |  |  | 51,283.00 |
| Biologics |  |  | 94,329.82 |
| Total Liabilities |  |  | $\underline{1,578,449.26}$ |
| Net Assets |  |  |  |
| Operation Fund Balance |  |  | 546,779.62 |
| Restricted Fund Balance |  |  | 439,252.24 |
| Designated Fund Balance |  |  | 1,984,396.04 |
| Total Net Assets |  |  | 2,970,427.90 |
| Total Liabilities and Net Assets |  |  | $\underline{\underline{4,548,877.16}}$ |
| Prior Year Fund Balance Comparison at 1/31/2020: |  |  |  |
|  | Operation Fund Balance |  | 317,102.45 |
|  | Restricted Fund Balance |  | 411,649.43 |
|  | Designated Fund Balance |  | 2,363,268.63 |
|  | Total Fund Balance | \$ | 3,092,020.51 |

BHSJ Community Health Agency
Schedule of Cash Receipts and Disbursements
July 31, 2020 thru
January 31, 2021
\$ 807,979.96

| Plus: Cash Receipts |
| :--- |
| Less: Cash Disburse |
| $\mathbf{7 / 3 1 / 2 0 2 0}$ Cash |
| Plus: Cash Receipts |

\$ $(554,075.52)$

| Less: Cash Disbursements For Payroll/AP | \$ $(643,804.59)$ |
| :---: | :---: | :---: |
| $\mathbf{8 / 3 1 / 2 0 2 0}$ Cash Balance | $\$ \mathbf{3 , 1 1 1 , 7 3 9 . 3 5}$ |


| Plus: Cash Receipts | $\$$ | $808,564.34$ |
| :--- | ---: | ---: |
| Less: Cash Disbursements For Payroll/AP | $\$$ | $(541,250.67)$ |
| $\mathbf{9 / 3 0 / 2 0 2 0}$ Cash Balance | $\mathbf{3 , 3 7 9 , 0 5 3 . 0 2}$ |  |
|  |  |  |
| Plus: Cash Receipts | $\$$ | $742,412.00$ |
| Less: Cash Disbursements For Payroll/AP | $\$$ | $(703,299.71)$ |
| $\mathbf{1 0 / 3 1 / 2 0 2 0}$ Cash Balance | $\mathbf{3}$ | $\mathbf{3 , 4 1 8 , 1 6 5 . 3 1}$ |


| Plus: Cash Receipts | \$ | $449,573.56$ |
| :--- | ---: | ---: |
| Less: Cash Disbursements For Payroll/AP | $\$$ | $(853,627.98)$ |
| $\mathbf{1 1 / 3 0 / 2 0 2 0}$ Cash Balance | $\mathbf{\$}$ | $\mathbf{3 , 0 1 4 , 1 1 0 . 8 9}$ |


| Plus: Cash Receipts | \$ | $737,095.97$ |
| :--- | ---: | :---: |
| Less: Cash Disbursements For Payroll/AP | $\$$ | $(786,499.45)$ |
| $\mathbf{1 2 / 3 1 / 2 0 2 0}$ Cash Balance | $\mathbf{\$}$ | $\mathbf{2 , 9 6 4 , 7 0 7 . 4 1}$ |


| Plus: Cash Receipts | $\$ 1,634,883.92$ |  |
| :--- | ---: | ---: |
| Less: Cash Disbursements For Payroll/AP | $\$$ | $(609,594.00)$ |
| $\mathbf{1 / 3 1 / 2 0 2 1}$ Cash Balance | $\mathbf{\$ 3 , 9 8 9 , 9 9 7 . 3 3}$ |  |

## BRANCH HILLSDALE ST JOSEPH COMMUNITY HEALTH AGENCY

Expense by Program-1/1/2021-1/31/2021

| Program | Program Title | Current <br> Month | Year to Date | Total Budget Amendment1 | Percent Total <br> Expended <br> Amend1 |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 353 | CRFLCT Contact Tracing | 48,840.95 | 321,622.45 | 141,299.00 | 227.61\% |
| 354 | CRF LHD Testing | 0.00 | 151,670.33 | 155,349.00 | 97.63\% |
| 360 | CRFIMM - Immunization COVID Response | 31,662.70 | 34,671.50 | 66,226.00 | 52.35\% |
| 008 | Salary \& Fringe Payoff | 101.39 | 34,209.15 | 70,000.00 | 48.87\% |
| 032 | Emergency Preparedness | 10,847.84 | 48,486.48 | 118,446.00 | 40.93\% |
| 012 | Area Agency on Aging | 121,733.75 | 476,002.88 | 1,195,632.00 | 39.81\% |
| 351 | CELC Infection Prevention | 9,236.59 | 33,123.04 | 90,095.00 | 36.76\% |
| 326 | Vision (ELPHS) | 7,523.43 | 31,689.98 | 90,598.00 | 34.97\% |
| 021 | Dental Clinic - Three Rivers | 2,775.00 | 11,100.00 | 33,300.00 | 33.33\% |
| 745 | Type II Water | 6,258.44 | 27,015.88 | 83,564.00 | 32.32\% |
| 325 | CSHCS | 14,434.00 | 58,625.33 | 187,311.00 | 31.29\% |
| 327 | Hearing (ELPHS) | 6,173.47 | 27,947.18 | 90,295.00 | 30.95\% |
| 321 | CHC Tele-A-Health | 3,572.27 | 13,233.80 | 42,998.00 | 30.77\% |
| 338 | Immunization Vaccine Handling | 27,258.44 | 107,831.77 | 356,522.00 | 30.24\% |
| 605 | General EH Services | 2,553.56 | 10,688.00 | 36,606.00 | 29.19\% |
| 714 | Onsite Sewage Disposal | 24,258.84 | 101,535.89 | 351,765.00 | 28.86\% |
| 721 | Drinking Water Supply | 24,258.84 | 101,535.89 | 351,765.00 | 28.86\% |
| 345 | Lead Testing | 1,305.20 | 6,105.89 | 22,493.00 | 27.14\% |
| 109 | WIC | 64,865.43 | 247,772.43 | 945,423.00 | 26.20\% |
| 341 | Infectious Disease | 15,140.86 | 69,606.20 | 270,175.00 | 25.76\% |
| 014 | VOCA | 2,160.94 | 52,922.93 | 205,743.00 | 25.72\% |
| 108 | WIC Breastfeeding | 5,414.57 | 23,840.28 | 96,760.00 | 24.63\% |
| 329 | MCH Enabling Children | 2,145.68 | 9,525.12 | 39,034.00 | 24.40\% |
| 201 | CSF Carseats | 1,395.47 | 5,212.45 | 22,759.00 | 22.90\% |
| 138 | Immunization IAP | 20,323.91 | 169,408.54 | 752,337.00 | 22.51\% |
| 704 | Food Service | 23,861.66 | 103,807.27 | 470,256.00 | 22.07\% |
| 115 | MCH Enabling Women | 6,871.55 | 11,905.42 | 55,375.00 | 21.49\% |
| 331 | STD | 7,833.19 | 29,417.88 | 154,163.00 | 19.08\% |
| 029 | Dental Clinic - Hillsdale | 117.56 | 1,442.62 | 8,000.00 | 18.03\% |
| 101 | Workforce Development | 1,468.52 | 7,277.99 | 45,795.00 | 15.89\% |
| 352 | ELCCT Contact Tracing, | 68,217.66 | 118,007.65 | 857,888.00 | 13.75\% |
| 332 | HIV Prevention | 1,451.31 | 6,212.91 | 45,453.00 | 13.66\% |
| 400 | HRSA 20RCORP | 4,780.57 | 18,384.48 | 200,000.00 | 9.19\% |
| 010 | Agency Support | 8,552.97 | 5,546.99 | 70,524.00 | 7.86\% |
| 107 | Medicaid Outreach | 520.96 | 7,004.46 | 102,200.00 | 6.85\% |
| 024 | MERS Pension Underfunded Liability | 0.00 | 3,864.07 | 119,590.00 | 3.23\% |
| 023 | Capital Expenditures | 0.00 | 0.00 | 78,000.00 | 0.00\% |
| 035 | Vector Borne Disease Surveillance | 0.00 | 0.00 | 29,281.07 | 0.00\% |
| 038 | COVID-19 | 0.00 | 0.00 | 207,232.00 | 0.00\% |
| 112 | CSHCS Medicaid Outreach | 0.00 | 0.00 | 63,744.00 | 0.00\% |
| 200 | ELPHS Marketing | 1,892.35 | 7,659.51 | 0.00 | 0.00\% |
| 723 | PFAS Response - White Pigeon | $\underline{0.00}$ | 1,346.29 | 0.00 | 0.00\% |
|  | Total Total Expense | $\underline{\text { 579,809.87 }}$ | $\underline{\text { 2,497,260.93 }}$ | 8,323,996.07 | 30.00\% |

The Agency is currently $3.33 \%$ under budget.
*4/12 Months = 33.33\%
**4/9 Months $=44.44 \%$
\# 3/3 Months = 100\% *CRF Ended 1/31/2021
**9-Month Program
\# 3-Month Program

RU 353: Grant award increased after the last budget amendment. The current budget amendment will bring 227.61\% this program to actual and there will have no further expenses in this grant.

## RU 354:

97.63\%

3 month grant - The grant period is over, this program will have not futher expenses.

RU 360:
52.35\%

3 month grant - The grant period is over, this program will have not futher expenses.

RU 008:
48.72\%

Over budget due to annual Sick Time Payout. Program will fall back in line with budget at FY progresses

# BRANCH-HILLSDALE-ST.JOSEPH COMMUNITY HEALTH AGENCY 

## FISCAL YEAR 2020-2021

## Amendment \#2 Budget

February 25, 2021

BRANCH-HILLSDALE-ST. JOSEPH
TOTAL REVENUES:


## OCTOBER 2020- SEPTEMBER 2021

Amendment \#2 Budget 2/19/2021

## TOTAL EXPENSES

| Amendment \#2 Budget2/19/2021 | Original Budget 2020-21 |  | Amendment \#1 Budget 2020-21 |  | Amendment \#2 <br> Budget 2020-21 |  | $\begin{array}{r} \text { DIFFERENCE } \\ \hline 1,019,953 \\ \hline \end{array}$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | \$ | 6,866,514 | \$ | 8,366,875 | \$ | 9,386,828 |  |
| OTHER: |  |  |  |  |  |  |  |
| Salary/Fringe Payoff | \$ | 70,000 | \$ | 70,000 | \$ | 70,000 | 0 |
| Capital Improvements | \$ | - | \$ | 78,000 | \$ | 128,000 | 50,000 |
| MERS Pension Underfunded | \$ | 22,590 | \$ | 119,590 | \$ | 122,590 | 3,000 |
| Dental Clinic - St. Joseph Co. | \$ | 33,300 | \$ | 33,300 | \$ | 33,300 | 0 |
| Dental Clinic - Hillsdale Co. | \$ | 8,000 | \$ | 8,000 | \$ | 8,000 | 0 |
| TOTAL OTHER | \$ | 133,890 | \$ | 308,890 | \$ | 361,890 | 53,000 |
| CORE SUPPORT SERVICES: |  |  |  |  |  |  |  |
| General Administration | \$ | 74,216 | \$ | 70,524 | \$ | 26,728 | $(43,796)$ |
| Area Agency on Aging | \$ | 1,205,632 | \$ | 1,195,632 | \$ | 1,275,371 | 79,739 |
| VOCA | \$ | 205,743 | \$ | 205,743 | \$ | 226,338 | 20,595 |
| Emergency Preparedness | \$ | 187,219 | \$ | 161,324 | \$ | 154,762 | $(6,562)$ |
| TOTAL CORE SUPPORT | \$ | 1,672,810 | \$ | 1,633,223 | \$ | 1,683,199 | 49,976 |
| PREVENTION SERVICES: |  |  |  |  |  |  |  |
| COVID-19 Response | \$ | 114,204 | \$ | 207,232 | \$ | 263,415 | 56,183 |
| CELC Infection Prevention | \$ | - | \$ | 90,095 | \$ | 91,721 | 1,626 |
| ELCCT Contact Tracing, Coord | \$ | - | \$ | 857,888 | \$ | 869,198 | 11,310 |
| CRF Contact Tracing | \$ | - | \$ | 141,299 | \$ | 322,808 | 181,509 |
| CRF Testing | \$ | - | \$ | 155,349 | \$ | 152,120 | $(3,229)$ |
| CRF Immunizations | \$ | - | \$ | 66,226 | \$ | 61,988 | $(4,238)$ |
| COVID-19 Immz Influenza | \$ | - | \$ | - | \$ | 55,371 | 55,371 |
| COVID-19 Immunization | \$ | - | \$ | - | \$ | 120,253 | 120,253 |
| COVID-19 Immz MI Supplemental | \$ | - | \$ | - | \$ | 674,831 | 674,831 |
| Medicaid Outreach | \$ | 152,358 | \$ | 102,200 | \$ | 80,441 | $(21,759)$ |
| WIC - Breastfeeding | \$ | 117,057 | \$ | 96,760 | \$ | 100,798 | 4,038 |
| WIC - Women, Infants, \& Children | \$ | 1,045,442 | \$ | 945,424 | \$ | 924,737 | $(20,687)$ |
| CSHCS Medicaid Outreach | \$ | 69,720 | \$ | 63,743 | \$ | 36,276 | $(27,467)$ |
| MCH Enabling Women | \$ | 55,375 | \$ | 55,375 | \$ | 55,375 | 0 |
| Immunization Clinics | \$ | 663,512 | \$ | 752,337 | \$ | 721,360 | $(30,977)$ |
| Immunization/Vaccine Handling | \$ | 412,142 | \$ | 356,522 | \$ | 344,597 | $(11,925)$ |
| Children's Special Health Care Services | \$ | 183,879 | \$ | 187,311 | \$ | 187,311 | 0 |
| School Vision \& Hearing Clinics | \$ | 223,716 | \$ | 180,893 | \$ | 170,339 | $(10,554)$ |
| MCH Enabling Children | \$ | 39,034 | \$ | 39,034 | \$ | 39,034 | 0 |
| STD Prevention \& Control | \$ | 160,300 | \$ | 154,163 | \$ | 122,540 | $(31,623)$ |
| HIV Prevention \& Control | \$ | 36,269 | \$ | 45,453 | \$ | 27,872 | $(17,581)$ |
| Infectious Disease | \$ | 303,351 | \$ | 270,175 | \$ | 269,355 | (820) |
| Lead Testing | \$ | 22,373 | \$ | 22,493 | \$ | 22,043 | (450) |
| TOTAL PREVENTION | \$ | 3,598,732 | \$ | 4,789,972 | \$ | 5,713,783 | 923,811 |
| HEALTH PROMOTION: |  |  |  |  |  |  |  |
| Medical Marihuana BR | \$ | - | \$ | - | \$ | 23,152 | 23,152 |
| Medical Marihuana HD | \$ | - | \$ | - | \$ | 14,034 | 14,034 |
| Medical Marihuana SJ | \$ | - | \$ | - | \$ | 8,402 | 8,402 |
| Workforce Development | \$ | 50,684 | \$ | 45,794 | \$ | 44,135 | $(1,659)$ |
| Car seat | \$ | - | \$ | 22,759 | \$ | 20,370 | $(2,389)$ |
| Community Stablization (Marketing) | \$ | - | \$ | - | \$ | 21,919 | 21,919 |
| HRSA RCORP | \$ | - | \$ | 200,000 | \$ | 197,643 | $(2,357)$ |
| Tel-A-Health | \$ | 44,906 | \$ | 42,998 | \$ | 42,782 | (216) |
| TOTAL HEALTH PROMOTION | \$ | 95,590 | \$ | 311,551 | \$ | 372,437 | 60,886 |
| ENVIRONMENTAL HEALTH PROTECTION |  |  |  |  |  |  |  |
| General Environmental Health | \$ | 37,367 | \$ | 36,607 | \$ | 35,484 | $(1,123)$ |
| Food Protection | \$ | 520,464 | \$ | 470,256 | \$ | 416,148 | $(54,108)$ |
| Onsite Sewage | \$ | 359,877 | \$ | 351,766 | \$ | 337,097 | $(14,669)$ |
| Drinking Water Supply | \$ | 359,877 | \$ | 351,766 | \$ | 337,096 | $(14,670)$ |
| PFAS - Mendon | \$ | - | \$ | - | \$ | 1,028 | 1,028 |
| PFAS - White Pigeon | \$ | - | \$ | - | \$ | 17,721 | 17,721 |
| Type II Water | \$ | 87,907 | \$ | 83,564 | \$ | 83,945 | 381 |
| Vector Borne | \$ | - | \$ | 29,280 | \$ | 27,000 | $(2,280)$ |
| TOTAL ENVIRONMENTAL HEALTH | \$ | 1,365,492 | \$ | 1,323,239 | \$ | 1,255,519 | $(67,720)$ |

for
Comprehensive Local Health Services

| Local Agency <br> Branch-Hillsdale-St. Joseph CHA <br> Agreement Period <br> $10 / 1 / 2020-9 / 30 / 2021$ | Prepared By: Brenae Corbeil \& Theresa Fisher <br> Approved By: Board of Health |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | 008 | 009 | 010 | 012 | 014 |
| Budget Amendment \#2 EXPENDITURE CATEGORY: | SALARY/FRINGE PAYOFF | SPACE <br> ALLOCATION | GENERAL ADMINISTRATION | AREA AGENCY ON AGING | voca |
| 1. SALARIES \& WAGES | 70,000 |  | 344,178 | 188,387 | 104,884 |
| 2. FRINGE BENEFITS |  | - | 163,049 | 97,565 | 55,579 |
| 3. CAP EXP FOR EQUIP \& FAC |  | - | - | - |  |
| 4. CONTRACTUAL (SUBCONTRACTS) |  | - | - | 894,883 | - |
| 5. OTHER EXPENSES: |  | - | - | - |  |
| 6. SUPPLIES |  | - | 22,600 | 6,800 | 10,425 |
| 7. TRAVEL |  | - | 8,000 | 5,000 | 8,000 |
| 8. COMMUNICATIONS |  | - | 26,000 | 3,500 | 2,000 |
| 9. COUNTY/CITY CENTRAL SERVICES |  | - | - | - |  |
| 10. SPACE COSTS |  | 236,867 | - | - |  |
| 11 .ALL OTHERS (ADP \& MISC.) |  |  | 168,015 | 26,500 | 17,328 |
| 12. TOTAL DIRECT EXPENDITURES | 70,000 | 236,867 | 731,842 | 1,222,635 | 198,216 |
| 13. ADMINISTRATIVE INDIRECT EXP |  | - | $(800,388)$ | 46,387 | 26,030 |
| 16.22196\% |  |  |  |  |  |
| 15. TOTAL DIRECT \& ADM EXP | 70,000 | 236,867 | $(68,546)$ | 1,269,022 | 224,246 |
| 16. OTHER COST DISTRIBUTIONS: |  |  |  |  |  |
| Prevention Serv. Administration |  |  |  |  |  |
| Community Health Services |  |  |  |  |  |
| Community Stablization |  |  |  |  |  |
| Immunization Distribution |  |  |  |  |  |
| CSHCS Distribution |  |  |  |  |  |
| General Environmental Distribution |  |  |  |  |  |
| Communical Disease Distribution |  |  |  |  |  |
| Space Allocation |  | $(236,867)$ | 95,274 | 6,349 | 2,092 |
| 17. TOTAL EXPENDITURES | 70,000 | - | 26,728 | 1,275,371 | 226,338 |
|  |  |  | 827,116 |  |  |
| Exclusion Items: |  |  |  |  |  |
| 18. FEES 1ST \& 2ND PARTY |  | - | 20 | - |  |
| 19. FEES \& COLLECTIONS 3RD PARTY |  | - | - | - |  |
| 20. FED/STATE FUNDING (NON-MDCH) |  | - | - | 1,214,867 | 223,943 |
| 21. LOCAL (NON-LPHO) |  | - | - | - |  |
| MATCH FOR FULL COST REIMB. |  | - | - | - |  |
| FULL COST REIMB. |  |  |  |  |  |
| OTHER | 70,000 | - | 26,708 | 60,504 | 2,395 |
| BCCF Funds |  | - | - | - |  |
| MCDC Excess Dental Revenue |  | - | - | - |  |
|  |  | - | - | - |  |
| 22. OTHER NON-LPHO |  | - | - | - |  |
| 23. MDCH - NON-CPBC |  | - | - | - |  |
| 24. MDCH - CPBC HIV Testing |  | - | - | - |  |
| VFC Visits |  | - | - | - |  |
| Care Coordination |  | - | - |  |  |
| Nurse Ed |  | - | - |  |  |
| MCH Block Grant |  | - | - | - |  |
| State Allocation |  | - | - | - |  |
|  |  |  |  |  |  |
| 25. TOTAL MDCH - CPBC |  | - | - | - | - |
| 26. TOTAL EXCLUSIONS: | 70,000 | - | 26,728 | 1,275,371 | 226,338 |
| Net Allowable Expenditures |  | - | - |  |  |
|  |  | - | - |  |  |
| 27. NET ALLOWABLE EXPENDITURES | - | - | - | 0 | 0 |
| 27. STATE ELPHS |  | - | - | - |  |
| 28. COUNTY APPROPRATIONS | - | - | - | 0 | 0 |
| 29. USE OF FUND BALANCE |  | - | - | - |  |

## Comprehensive Local Health Services



## Comprehensive Local Health Services



## Comprehensive Local Health Services

| Branch-Hillsdale-St. Joseph CHAAgreement Period |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |
| 10/1/2020-9/30/2021 | 112 | 115 | 138 | 199 | 200 | 201 |
| Budget Amendment \#2 EXPENDITURE CATEGORY: | CSHCS MEDICAID OUTREACH | MCH ENABLING WOMEN | IMMUNIZATION/ <br> IAP | PREVENTION SERV ADM. | COMMUNITY <br> STABLIZATION | CARSEAT |
| 1. SALARIES \& WAGES |  | 14,073 | 196,563 | 43,079 | 16,560 | 13,199 |
| 2. FRINGE BENEFITS |  | 6,154 | 86,437 | 12,004 | 1,267 | 1,010 |
| 3. CAP EXP FOR EQUIP \& FAC | - | - | - | - |  | - |
| 4. CONTRACTUAL (SUBCONTRACTS) | - | - | - | - |  | - |
| 5. OTHER EXPENSES: | - | - | - | - |  | - |
| 6. SUPPLIES | - | 800 | 260,100 | 360 | 300 | 100 |
| 7. TRAVEL | - | 100 | 3,000 | 1,200 | 500 | 3,000 |
| 8. COMMUNICATIONS | - | 50 | 600 | 300 | 200 | 50 |
| 9. COUNTY/CITY CENTRAL SERVICES | - | - | - | - |  | - |
| 10. SPACE COSTS | - | - | - | - |  | - |
| 11.ALL OTHERS (ADP \& MISC.) | - | 24,401 | 346,079 | 334 | 200 | 500 |
| 12. TOTAL DIRECT EXPENDITURES | - | 45,578 | 892,779 | 57,277 | 19,027 | 17,859 |
| 13. ADMINISTRATIVE INDIRECT EXP | - | 3,281 | 45,908 | 8,936 | 2,892 | 2,305 |
| 16.22196\% |  | - |  |  |  |  |
| 15. TOTAL DIRECT \& ADM EXP | - | 48,859 | 938,687 | 66,213 | 21,919 | 20,164 |
| 16. OTHER COST DISTRIBUTIONS: |  |  |  |  |  |  |
| Prevention Serv. Administration |  | 1,209 | 16,914.00 | $(102,956)$ |  | - |
| Community Health Services |  | 4,985 | 4,985 |  |  |  |
| Community Stablization |  |  |  |  | - |  |
| Immunization Distribution |  |  | $(250,000)$ | - |  |  |
| CSHCS Distribution | 36,276 |  | - |  |  |  |
| General Environmental Distribution |  |  | - |  |  |  |
| Communical Disease Distribution |  |  |  |  |  |  |
| Space Allocation | - | 322 | 10,774 | 36,743 | - | 206 |
| 17. TOTAL EXPENDITURES | 36,276 | 55,375 | 721,360 | (0) | 21,919 | 20,370 |
|  |  |  |  |  |  |  |
| Exclusion Items: |  |  |  |  |  |  |
| 18. FEES 1ST \& 2ND PARTY | - | - | 12,000 | - |  |  |
| 19. FEES \& COLLECTIONS 3RD PARTY | - | - | 146,950 | - |  |  |
| 20. FED/STATE FUNDING (NON-MDCH) | 12,650 |  | 300,000 |  |  |  |
| 21. LOCAL (NON-LPHO) | - | - | - | - |  |  |
| MATCH FOR FULL COST REIMB. | 12,649 | - | - | - |  |  |
| FULL COST REIMB. |  |  | 188,121 |  |  |  |
| OTHER |  |  | 2,500 | - | 21,919 | - |
| BCCF Funds | - | - | - | - |  |  |
| MCDC Excess Dental Revenue | - | - | - | - |  |  |
|  | - | - | - | - |  |  |
| 22. OTHER NON-LPHO | - | - | - | - |  |  |
| 23. MDCH - NON-CPBC | - | - | - | - |  |  |
| 24. MDCH - CPBC HIV Testing | - | - | - | - |  |  |
| VFC Visits | - | - | - | - |  |  |
| Care Coordination |  |  |  |  |  |  |
| Nurse Ed |  |  |  |  |  |  |
| MCH Block Grant | - | 55,375 |  | - |  |  |
| State Allocation | - | - | 71,789 | - |  |  |
|  |  |  |  |  |  |  |
| 25. TOTAL MDCH - CPBC | - | 55,375 | 71,789 | - | - | - |
| 26. TOTAL EXCLUSIONS: | 25,299 | 55,375 | 721,360 | - | - | - |
| Net Allowable Expenditures |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| 27. NET ALLOWABLE EXPENDITURES | 10,977 | 0 | 0 | (0) | - | 20,370 |
| 27. STATE ELPHS | - | - | - | - |  | - |
| 28. COUNTY APPROPRATIONS | 10,977 | 0 | 0 | (0) | - | 20,370 |
| 29. USE OF FUND BALANCE | - | - | - | - |  |  |

## Comprehensive Local Health Services

| Local Agency <br> Branch-Hillsdale-St. Joseph CHA <br> Agreement Period <br> 10/1/2020-9/30/2021 | $212$ | 230 | 275 | 255 | 321 | 325 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |
| Budget Amendment \#2 EXPENDITURE CATEGORY: | MED MARIJUANA BRANCH | MED MARIJUANA HILLSDALE | MED MARIJUANA ST JOSEPH | COMMUNITY HEALTH SERVICES | CHC-TELE A HEALTH | CSHCS OR \& ADVOCACY |
| 1. SALARIES \& WAGES | 5,278 | 3,167 | 2,111 | 39,389 | 26,320 | 125,469 |
| 2. FRINGE BENEFITS | 1,567 | 939 | 628 | 22,581 | 9,169 | 35,549 |
| 3. CAP EXP FOR EQUIP \& FAC | - | - | - |  | - | - |
| 4. CONTRACTUAL (SUBCONTRACTS) | - | - | - |  | - | - |
| 5. OTHER EXPENSES: | - | - | - |  | - | - |
| 6. SUPPLIES | 120 | 120 | 120 | 500 | 410 | 2,450 |
| 7. TRAVEL | 25 | 25 | 25 | 500 | 800 | 5,000 |
| 8. COMMUNICATIONS | 25 | 25 | 25 | 150 | 20 | 300 |
| 9. COUNTY/CITY CENTRAL SERVICES | - | - | - |  | - | - |
| 10. SPACE COSTS | - | - | - |  | - | - |
| 11 .ALL OTHERS (ADP \& MISC.) | 14,963 | 9,054 | 5,024 | 735 | 100 | 10,618 |
| 12. TOTAL DIRECT EXPENDITURES | 21,978 | 13,330 | 7,933 | 63,855 | 36,819 | 179,386 |
| 13. ADMINISTRATIVE INDIRECT EXP | 1,110 | 666 | 444 | 10,053 | 5,757 | 26,120 |
| 16.22196\% |  |  |  |  |  |  |
| 15. TOTAL DIRECT \& ADM EXP | 23,088 | 13,996 | 8,377 | 73,908 | 42,576 | 205,506 |
| 16. OTHER COST DISTRIBUTIONS: |  |  |  |  |  |  |
| Prevention Serv. Administration | - | - | - |  |  | 9,623 |
| Community Health Services |  |  |  | $(74,735)$ |  | 4,985 |
| Community Stablization |  |  |  |  |  |  |
| Immunization Distribution | - | - | - |  |  |  |
| CSHCS Distribution |  |  |  |  |  | $(36,276)$ |
| General Environmental Distribution |  |  |  |  |  | - |
| Communical Disease Distribution |  |  |  |  |  |  |
| Space Allocation | 64 | 38 | 25 | 827 | 206 | 3,473 |
| 17. TOTAL EXPENDITURES | 23,152 | 14,034 | 8,402 | (0) | 42,782 | 187,311 |
|  |  |  |  |  |  |  |
| Exclusion Items: |  |  |  |  |  |  |
| 18. FEES 1ST \& 2ND PARTY |  |  |  |  | - | - |
| 19. FEES \& COLLECTIONS 3RD PARTY |  |  |  |  | - | - |
| 20. FED/STATE FUNDING (NON-MDCH) |  |  |  |  |  |  |
| 21. LOCAL (NON-LPHO) |  |  |  |  | - | - |
| MATCH FOR FULL COST REIMB. |  |  |  |  | - | - |
| FULL COST REIMB. |  |  |  |  |  |  |
| OTHER |  |  |  |  | 35,000 | 2,582 |
| BCCF Funds |  |  |  |  | - | - |
| MCDC Excess Dental Revenue |  |  |  |  | - | - |
|  |  |  |  |  | - | - |
| 22. OTHER NON-LPHO |  |  |  |  | - | - |
| 23. MDCH - NON-CPBC |  |  |  |  | - | - |
| 24. MDCH - CPBC HIV Testing |  |  |  |  | - | - |
| VFC Visits |  |  |  |  | - | - |
| Care Coordination |  |  |  |  |  | 68,000 |
| Nurse Ed |  |  |  |  |  |  |
| MCH Block Grant |  |  |  |  | - | - |
| State Allocation | 23,152 | 14,034 | 8,402 |  | - | 116,729 |
|  |  |  |  |  |  |  |
| 25. TOTAL MDCH - CPBC | 23,152 | 14,034 | 8,402 | - | - | 184,729 |
| 26. TOTAL EXCLUSIONS: | 23,152 | 14,034 | 8,402 | - | 35,000 | 187,311 |
| Net Allowable Expenditures |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| 27. NET ALLOWABLE EXPENDITURES | 0 | 0 | 0 | (0) | 7,782 | 0 |
| 27. STATE ELPHS | - | - | - | - |  | - |
| 28. COUNTY APPROPRATIONS | 0 | 0 | 0 | (0) | 7,782 | 0 |
| 29. USE OF FUND BALANCE |  |  |  |  | - | - |


| Local Agency <br> Branch-Hillsdale-St. Joseph CHA <br> Agreement Period <br> $10 / 1 / 2020-9 / 30 / 2021$ | 326 | 327 | 329 | 331 | 332 |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Budget Amendment \#2 EXPENDITURE CATEGORY: | VISION | HEARING | MCH - ENABLING <br> SERVICES CHILDREN | SEXUAL TRANS. DISEASES | HIV PREVENTION |
| 1. SALARIES \& WAGES | 36,949 | 35,414 | 10,459 | 51,310 | 11,402 |
| 2. FRINGE BENEFITS | 22,639 | 22,164 | 4,869 | 27,897 | 6,277 |
| 3. CAP EXP FOR EQUIP \& FAC | - | - |  | - | - |
| 4. CONTRACTUAL (SUBCONTRACTS) | - | - |  | - | - |
| 5. OTHER EXPENSES: | - | - |  | - | - |
| 6. SUPPLIES | 1,250 | 550 | 10,600 | 1,825 | 365 |
| 7. TRAVEL | 3,000 | 3,200 | 50 | 850 | 300 |
| 8. COMMUNICATIONS | 250 | 300 | 25 | 200 | 50 |
| 9. COUNTY/CITY CENTRAL SERVICES | - | - |  | - | - |
| 10. SPACE COSTS | - |  |  | - | - |
| 11. ALL OTHERS (ADP \& MISC.) | 3,252 | 3,292 | 4,494 | 16,252 | 400 |
| 12. TOTAL DIRECT EXPENDITURES | 67,340 | 64,920 | 30,497 | 98,334 | 18,794 |
| 13. ADMINISTRATIVE INDIRECT EXP | 9,666 | 9,340 | 2,487 | 12,849 | 2,868 |
| 16.22196\% |  |  |  |  |  |
| 15. TOTAL DIRECT \& ADM EXP | 77,006 | 74,260 | 32,984 | 111,183 | 21,662 |
| 16. OTHER COST DISTRIBUTIONS: |  |  |  |  |  |
| Prevention Serv. Administration | 3,561 | 3,441 | 916 | 4,734 | 1,057.00 |
| Community Health Services | 4,985 | 4,985 | 4,985 | 4,985 | 4,977 |
| Community Stablization |  |  |  |  |  |
| Immunization Distribution |  |  |  |  |  |
| CSHCS Distribution |  |  |  |  |  |
| General Environmental Distribution |  |  |  |  |  |
| Communical Disease Distribution |  |  |  |  |  |
| Space Allocation | 1,050 | 1,050 | 149 | 1,638 | 176 |
| 17. TOTAL EXPENDITURES | 86,602 | 83,736 | 39,034 | 122,540 | 27,872 |
|  |  |  |  |  |  |
| Exclusion Items: |  |  |  |  |  |
| 18. FEES 1ST \& 2ND PARTY | 21,000 | 21,000 |  | 800 | - |
| 19. FEES \& COLLECTIONS 3RD PARTY | - | - |  | - | - |
| 20. FED/STATE FUNDING (NON-MDCH) |  |  |  |  |  |
| 21. LOCAL (NON-LPHO) | - | - |  | - | - |
| MATCH FOR FULL COST REIMB. |  | - |  | - | - |
| FULL COST REIMB. | 11,056 | 9,110 |  |  |  |
| OTHER | - |  |  |  |  |
| BCCF Funds | - | - |  | - |  |
| MCDC Excess Dental Revenue | - | - |  | - | - |
|  | - | - |  | - | - |
| 22. OTHER NON-LPHO | - | - |  | - | - |
| 23. MDCH - NON-CPBC | - | - |  | - | - |
| 24. MDCH - CPBC HIV Testing | - | - |  | - | - |
| VFC Visits | - | - |  | - | - |
| Care Coordination |  |  |  |  |  |
| Nurse Ed |  |  |  |  |  |
| MCH Block Grant | - | - | 39,034 | - | - |
| State Allocation | - | - |  | - | 20,000 |
|  |  |  |  |  |  |
| 25. TOTAL MDCH - CPBC | - | - | 39,034 | - | 20,000 |
| 26. TOTAL EXCLUSIONS: | 32,056 | 30,110 | 39,034 | 800 | 20,000 |
| Net Allowable Expenditures |  |  |  |  |  |
|  |  |  |  |  |  |
| 27. NET ALLOWABLE EXPENDITURES | 54,546 | 53,626 | (0) | 121,740 | 7,872 |
| 27. STATE ELPHS | 48,509 | 48,509 |  | 98,026 | - |
| 28. COUNTY APPROPRATIONS | 6,037 | 5,117 | (0) | 23,714 | 7,872 |
| 29. USE OF FUND BALANCE | - | - | - | - | - |


| Branch-Hillsdale-St. Joseph CHA <br> Agreement Period |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |
| 10/1/2020-9/30/2021 | 338 | 341 | 345 | 351 | 352 |
| Budget Amendment \#2 EXPENDITURE CATEGORY: | IMMUNIZATION/ VACCINE HANDLING | INFECTIOUS DISEASE | LEAD TESTING | COVID INFECTION PREVENTION | COVID CONTACT TRACING-COORD |
| 1. SALARIES \& WAGES | 41,180 | 105,240 | 12,284 | 49,772 | 465,121 |
| 2. FRINGE BENEFITS | 19,212 | 53,419 | 4,113 | 23,846 | 127,561 |
| 3. CAP EXP FOR EQUIP \& FAC |  | - | - |  |  |
| 4. CONTRACTUAL (SUBCONTRACTS) | - | - | - |  |  |
| 5. OTHER EXPENSES: | - | - | - |  |  |
| 6. SUPPLIES | 500 | 32,620 | 310 | 270 | 15,100 |
| 7. TRAVEL | 300 | 1,600 | 1,000 | 3,500 | 5,000 |
| 8. COMMUNICATIONS | 2,000 | 450 | 25 | 500 | 5,000 |
| 9. COUNTY/CITY CENTRAL SERVICES | - | - | - |  |  |
| 10. SPACE COSTS | - | - | - |  |  |
| 11. ALL OTHERS (ADP \& MISC.) | 12,065 | 33,508 | 500 | 700 | 147,500 |
| 12. TOTAL DIRECT EXPENDITURES | 75,257 | 226,837 | 18,232 | 78,588 | 765,282 |
| 13. ADMINISTRATIVE INDIRECT EXP | 9,797 | 25,738 | 2,660 | 11,942 | 96,145 |
| 16.22196\% |  |  |  |  |  |
| 15. TOTAL DIRECT \& ADM EXP | 85,054 | 252,575 | 20,892 | 90,530 | 861,427 |
| 16. OTHER COST DISTRIBUTIONS: |  |  |  |  |  |
| Prevention Serv. Administration | 3,609 | 9,482 | 980 |  |  |
| Community Health Services | 4,977 | 4,977 |  |  |  |
| Community Stablization |  |  |  |  |  |
| Immunization Distribution | 250,000 |  |  |  |  |
| CSHCS Distribution | - |  |  |  |  |
| General Environmental Distribution | - |  |  |  |  |
| Communical Disease Distribution |  |  |  |  |  |
| Space Allocation | 957 | 2,321 | 171 | 1,191 | 7,771 |
| 17. TOTAL EXPENDITURES | 344,597 | 269,355 | 22,043 | 91,721 | 869,198 |
|  |  |  |  |  |  |
| Exclusion Items: |  |  |  |  |  |
| 18. FEES 1ST \& 2ND PARTY | - | 1,000 | - |  |  |
| 19. FEES \& COLLECTIONS 3RD PARTY | 47,410 | 70,672 | - |  |  |
| 20. FED/STATE FUNDING (NON-MDCH) |  |  | 6,000 |  |  |
| 21. LOCAL (NON-LPHO) | - | - | - |  |  |
| MATCH FOR FULL COST REIMB. | - | - | - |  |  |
| FULL COST REIMB. | 80,463 |  |  |  |  |
| OTHER | 125 |  |  |  |  |
| BCCF Funds | - | - | - |  |  |
| MCDC Excess Dental Revenue | - | - | - |  |  |
|  | - | - | - |  |  |
| 22. OTHER NON-LPHO | - | - | - |  |  |
| 23. MDCH - NON-CPBC | - | - | - |  |  |
| 24. MDCH - CPBC HIV Testing | - | - | - |  |  |
| VFC Visits | 5,500 | - | - |  |  |
| Care Coordination |  |  |  |  |  |
| Nurse Ed | 800 |  |  |  |  |
| MCH Block Grant | - | - | - |  |  |
| State Allocation | 32,681 | 166 | - | 90,000 | 850,556 |
|  |  |  |  |  |  |
| 25. TOTAL MDCH - CPBC | 38,981 | 166 | - | 90,000 | 850,556 |
| 26. TOTAL EXCLUSIONS: | 166,979 | 71,838 | 6,000 | 90,000 | 850,556 |
| Net Allowable Expenditures |  |  |  |  |  |
|  |  |  |  |  |  |
| 27. NET ALLOWABLE EXPENDITURES | 177,618 | 197,517 | 16,043 | 1,721 | 18,642 |
| 27. STATE ELPHS | 165,117 | 196,652 | - |  |  |
| 28. COUNTY APPROPRATIONS | 12,501 | 865 | 16,043 | 1,721 | 18,642 |
| 29. USE OF FUND BALANCE | - | - | - |  |  |


for
Comprehensive Local Health Services

for
Comprehensive Local Health Services


797,450 Fees<br>694,653 Local Approp<br>7,272,577 State/Federal<br>622,148 Other<br>9,386,828 Total Revenues

665,654 Maintenance of Effort 756,017 Agency FY County Approp.

## Proposed Immunization Fee Schedule - February 2021

| Vaccines | Cost per dose | Cost + . 3 <br> Rounded Up | Admin Fee | Total Cost |
| :---: | :---: | :---: | :---: | :---: |
| DTaP (pediatric) Infanrix | \$20.79 | \$28.00 | \$23.00 | \$51.00 |
| DTaP-Hep B-IPV Pediarix | \$72.14 | \$94.00 | \$23.00 | \$117.00 |
| DTaP-IPV Kinrix, Quadracel | \$51.72 | \$68.00 | \$23.00 | \$91.00 |
| Hep A (adult) Havrix | \$39.54 | \$52.00 | \$23.00 | \$75.00 |
| Hep A(ped/adol Havrix Pediatric | \$27.63 | \$36.00 | \$23.00 | \$59.00 |
| Hep A-Hep B (Twinrix) | \$84.56 | \$110.00 | \$23.00 | \$133.00 |
| Hep B (adult) Engerix | \$43.08 | \$57.00 | \$23.00 | \$80.00 |
| Hep B (ped/adol) Engerix | \$16.00 | \$21.00 | \$23.00 | \$44.00 |
| MenB-4C (Bexsero) | \$158.67 | \$207.00 | \$23.00 | \$230.00 |
| Zoster RZV (Shingrix) | \$151.26 | \$197.00 | \$23.00 | \$220.00 |
| HPV9 | \$227.93 | \$297.00 | \$23.00 | \$320.00 |
| MMR | \$78.68 | \$103.00 | \$23.00 | \$126.00 |
| MMRV (ProQuad) | \$224.94 | \$293.00 | \$23.00 | \$316.00 |
| PPSV23 (Pneumovax) | \$105.19 | \$137.00 | \$23.00 | \$160.00 |
| RV5 (Rotateq) | \$84.53 | \$110.00 | \$23.00 | \$133.00 |
| Varicella (Varivax) | \$134.98 | \$176.00 | \$23.00 | \$199.00 |
| PCV13 (Prevnar13) | \$202.00 | \$263.00 | \$23.00 | \$286.00 |
| DTaP-Hib-IPV (Pentacel) | \$92.43 | \$121.00 | \$23.00 | \$144.00 |
| Hib (ActHib/Hiberix) | \$11.37 | \$15.00 | \$23.00 | \$38.00 |
| Influenza cclIV4 (Flucelvax Quad P-Free, Inj) | \$15.33 | \$20.00 | \$23.00 | \$43.00 |
| Influenza IIV3 High Dose | \$52.75 | \$69.00 | \$23.00 | \$92.00 |
| Influenza IIV4 (P-Free Inj) | \$17.80 | \$24.00 | \$23.00 | \$47.00 |
| Influenza IIV4 (Inject) | \$16.62 | \$22.00 | \$23.00 | \$45.00 |
| IPV (polio) IPOL | \$34.42 | \$45.00 | \$23.00 | \$68.00 |
| MCV4 (Menactra) | \$128.38 | \$167.00 | \$23.00 | \$190.00 |
| Td PF (adol/adult) Tenivac | \$34.80 | \$46.00 | \$23.00 | \$69.00 |
| Tdap (adol/adult) Adacel | \$44.55 | \$58.00 | \$23.00 | \$81.00 |

BRANCH-HILLSDALE-ST. JOSEPH
COMMUNITYHEALTH
AGENCY| YOUR Local
HEALTH DEPARTMENT
www.bhsj.org

## Personal Health and Disease Prevention: February 25, 2021

## Communicable Disease:

The past couple of months the number of cases being reported to our tri-county area have significantly decreased. In response to this change we have been training some of our full-time investigators to assist in other areas such as vaccine clinics, other communicable diseases, and immunizations. School transmission seems to be among the cases that we are receiving due to sporting events and activities of the like. We have a stock of antigen tests that we can distribute to schools or we can work with them to perform testing.
We are still awaiting the Peg dashboard rollout which will be another method of communication for case follow-up.

## Immunizations/STI/HIV:

We have received new guidance on isolation for those fully vaccinated. Those individuals are not required to quarantine if they meet all of the following criteria:

- Are fully vaccinated (i.e., $\geq 2$ weeks following receipt of the second dose in a 2 -dose series, or $\geq 2$ weeks following receipt of one dose of a single-dose vaccine).
- Are within 3 months following receipt of the last dose in the series.
- Have remained asymptomatic since the current COVID-19 exposure.

The CDC has also provided guidance on vaccinating homebound individuals. We still need to develop our own agency policy and procedures for how we can properly support this category.

## Women, Infant, and Children (WIC):

The WIC program has extended remote services through May. I have been actively interviewing to replace our WIC Coordinator and Clinic Supervisor in Hillsdale County. We will continue to keep you updated on the status of this.

## Children's Special Health Care Services (CSHCS), Lead, and Hearing \& Vision:

Schools are now scheduling kindergarten round up. Some schools are letting the vision technicians come into the schools during that time to do the hearing and vision screenings on upcoming kindergartners but others will not. We will be scheduling those kids to be screened at our offices in the spring.

U of M Motts came to one of our communities and did a clinic with a team that consisted of an ENT, 2 audiologists, hearing aid repairs, and our local CSHCS team. We were able to provide services for 28 kids and repaired 42 hearing aids that day.

Kali Nichols MPH
Personal Health \& Disease Prevention Director

Branch - Hillsdale - St. Joseph Community Health Agency Personal Health and Disease Prevention

| January-21 | 2020-2021 |  |  |  | FYTD 2020-2021 |  |  |  | 2019-20 FYTD |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | BR HD SJ Total |  |  |  | BR HD |  | SJ | Total | BR HD |  | SJ | Total |
| Animal Bite/Rabies potential exposure | 3 | 4 | - | 7 | 13 | 17 | - | 30 | 7 | 16 | 1 | 24 |
| Brucellosis | - | - | 1 | 1 | - | - | 1 | 1 | - | - | - | - |
| Campylobacter | - | - | 2 | 2 | - | 1 | 3 | 4 | 4 | 2 | 5 | 11 |
| Chicken Pox | - | - | - | - | - | - | - | - | - | 1 |  | 1 |
| Chlamydia | 9 | 5 | 11 | 25 | 37 | 37 | 48 | 122 | 36 | 35 | 74 | 145 |
| Coccidioidomycosis | - | - | - | - | - | - | - | - | - | - | - |  |
| Colds W/O Fever | 40 | 49 | 103 | 192 | 214 | 272 | 524 | 1,010 | 572 | 284 | 1,022 | 1,878 |
| CRE Carbapenem Resistant Enterobac. | - | - | - | - | - | - | - | - | - | 1 | 1 | 2 |
| Cryptosporidiosis | - | - | - | - | - | - | 1 | 1 | 2 | 1 | - | 3 |
| Ehrlichiosis, Anaplasma | - | - | - | - | - | - | - | - | - | - | - | - |
| Flu Like Disease | 69 | 29 | 27 | 125 | 391 | 90 | 197 | 678 | 452 | 305 | 570 | 1,327 |
| GI Illness | 158 | 67 | 111 | 336 | 462 | 337 | 399 | 1,198 | 1,283 | 583 | 946 | 2,812 |
| Giardiasis | - | - | - | - | - | - | - | - | 2 | 2 | 3 | 7 |
| Gonorrhea | 3 | 6 | 5 | 14 | 19 | 30 | 24 | 73 | 16 | 12 | 26 | 54 |
| Guillian-Barre Syndrome | - | - | - | - | - | - | - | - | 1 | - | - | 1 |
| H. Influenzae Disease - Inv. | - | 1 | - | 1 | - | 1 | - | 1 | - | 1 | 2 | 3 |
| Head Lice | 13 | 5 | 26 | 44 | 44 | 30 | 98 | 172 | 198 | 76 | 206 | 480 |
| Hepatitis A | - | - | - | - | - | - | - | - | 1 | - | - | 1 |
| Hepatitis B - Acute | - | - | - | - | - | - | - | - | - | - | 1 | 1 |
| Hepatitis B - Chronic | - | - | - | - | 1 | - | - | 1 | - | 1 |  | 1 |
| Hepatitis C-Acute | - | - | - | - | - | - | 1 | 1 | 2 | - | 2 | 4 |
| Hepatitis C - Chronic | - | 3 | - | 3 | 6 | 4 | 4 | 14 | 8 | 9 | 16 | 33 |
| Histoplasmosis | - | - | - | - | - | - | - | - | - | - | - | - |
| HIV/AIDS | - | - | - | - | - | - | - | - | 2 | - | - | 2 |
| Impetigo | - | - | - | - | 4 | - | 1 | 5 | 5 | 3 | 15 | 23 |
| Influenza | - | - | - | - | - | - | - | - | 11 | 18 | 11 | 40 |
| Legionellosis | - | - | - | - | - | - | - | - | - | 1 | 1 | 2 |
| Lyme Disease | - | - | - | - | - | - | - | - | 1 | - | 5 | 6 |
| Menengitis - Aseptic | - | - | - | - | - | - | - | - | 1 | - | - | 1 |
| Menengitis - Bacterial | - | - | - | - | - | - | - | - | - | - | - | - |
| Meningococcal Disease | - | - | - | - | - | - | - | - | - | - | - | - |
| Mononucleosis | - | 1 | - | 1 | 2 | 2 | - | 4 | 5 | 7 | 11 | 23 |
| Mumps | 1 | - | - | 1 | 1 | - | - | 1 | - | - | - | - |
| Mycobacterium - Other | - | - | - | - | - | - | - | - | - | 3 | 1 | 4 |
| Norovirus | - | - | - | - | - | - | - | - | - | - | - | - |
| Novel Coronavirus | 527 | 527 | 785 | 1,839 | 3,001 | 2,778 | 3,611 | 9,390 | - | - | - | - |
| Pertussis | - | - | - | - | - | - | - | - | - | 1 | 1 | 2 |
| Pink Eye | - | 1 | 2 | 3 | 4 | 8 | 14 | 26 | 90 | 43 | 105 | 238 |
| Q Fever | - | - | - | - | - | - | - | - | - |  | 1 | 1 |
| Salmonellosis | - | - | - | - | 3 | - | - | 3 | 2 | 2 | 2 | 6 |
| Scabies | - | - | - | - | 2 | - | - | 2 | 2 | 2 | 4 | 8 |
| Shiga Toxin-prod. (STEC) | - | - | - | - | - | - | - | - | 2 | 3 | 2 | 7 |
| Shigellosis | - | - | - | - | - | - | - | - | - | - | 2 | 2 |
| Shingles | - | - | - | - | - | - | - | - | - | - | - | - |
| Staphylococcus Aureus Infect. | - | - | - | - | - | - | - | - | - | - | - | - |
| Strep Invasive Gp A | - | - | - | - | - | - | 1 | 1 | 2 | 2 | 1 | 5 |
| Strep Pneumonia Inv Ds. | - | - | - | - | 1 | 1 | 1 | 3 | 3 | 2 | 1 | 6 |
| Strep Throat | 9 | 7 | 9 | 25 | 50 | 49 | 76 | 175 | 159 | 136 | 244 | 539 |
| Syphilis - Primary | - | - | - | - | - | - | - | - | - | - | - | - |
| Syphilis - Secondary | - |  | 1 | 1 | - | - | 1 | 1 | - |  | - | - |
| Syphilis To Be Determined | - | - | - | - | - | - | - | - | 2 | - | - | 2 |
| Unusual Outbreak/Occurrence | - | - | - | - | - | - | - | - | 2 | - | 1 | 3 |
| Vibriosis | - | - | - | - | - | - | - | - | - | - | 1 | 1 |
| VZ Infection, Unspecified | - | - | - | - | - | - | 1 | 1 | 1 | 1 | 2 | 4 |
|  | 832 | 705 | 1,083 | 2,620 | 4,255 | 3,657 | 5,006 | 12,918 | 2,874 | 1,553 | 3,286 | 7,713 |

# Branch - Hillsdale - St. Joseph Community Health Agency Personal Health and Disease Prevention 

|  | Jan-21 |  |  |  |  | YTD |  | 2020-21 |  |  | YTD |  | 2019-2020 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | BR | HD | ST | TR | Total | BR | HD | ST | TR | Total | BR | HD | ST | TR | Total |
| CHILD IMMUNIZATIONS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| \# Vaccines Given CHA | 28 | 66 | 31 | 69 | 194 | 362 | 582 | 87 | 401 | 1,432 | 795 | 718 | 218 | 438 | 2,169 |
| All VFC Doses Given | 645 | 530 | - | 875 | 2,050 | 3,475 | 2,414 | - | 4,310 | 10,199 | 3,909 | 2,728 | - | 4,684 | 11,321 |
| Waivers | 1 | - | - | - | 1 | 15 | 22 | 6 | 13 | 56 | 25 | 35 | 1 | 39 | 100 |
| ADULT IMMUNIZATIONS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| \# Vaccines Given | 1,261 | 715 | 5 | 1,575 | 3,556 | 1,643 | 814 | 14 | 1,708 | 4,179 | 761 | 315 | 90 | 290 | 1,456 |
| All AVP Doses Given | 21 | 10 | - | 6 | 37 | 83 | 30 | - | 99 | 212 | 138 | 113 | - | 112 | 363 |
| TRAVEL VACCINATIONS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Branch Office | - | - | - | - | - | - | - | - | - | - | 4 | - | - | - | 4 |
| COMMUNICABLE DISEASE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| TB Tests Done | 6 | 25 | - | 2 | 33 | 32 | 37 | - | 4 | 73 | 47 | 45 | - | 16 | 108 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| New LTBI on Rx | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | - |
| STD treatments | - | 3 | - | 2 | 5 | - | 8 | 1 | 9 | 18 | 2 | 7 | - | 23 | 32 |
| New STD Investigations | 12 | 11 | - | 17 | 40 | 56 | 67 | - | 73 | 196 | 54 | 47 | - | 100 | 201 |
| HIV Testing | - | - | - | - | - | - | 1 | 2 | - | 3 | - | 5 | - | 12 | 17 |
| ENROLLMENTS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Medicaid \& Michild | - | - | - | - | - | - | - | - | - | - | 10 | 3 | - | 9 | 22 |
| REFERRAL SERVICE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| MCDC Referrals | 2 | 36 | 10 | 15 | 63 | 31 | 95 | 17 | 42 | 185 | 41 | 163 | 7 | 55 | 266 |
| MIHP referrals | 17 | 1 | 15 | 24 | 57 | 63 | 9 | 89 | 81 | 242 | 27 | 13 | 65 | 73 | 178 |


| Pre-school | - | 29 | - | 19 | 48 | - | 177 | - | 280 | 457 | 23 | 102 | - | 168 | 293 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| School Age | 138 | 13 | - | 337 | 488 | 416 | 629 | - | 938 | 1,983 | 828 | 625 | - | 1,564 | 3,017 |


| Vision Screens |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Pre-school | - | 30 | - | 23 | 53 | - | 187 | - | 320 | 507 | 25 | 86 | - | 175 | 286 |
| School Age | 513 | 350 | - | 500 | 1,363 | 1,327 | 1,059 | - | 1,349 | 3,735 | 3,151 | 1,804 | - | 3,174 | 8,129 |


| Diagnostics | 1 | - | - | - | 1 | 2 | - | - | - | 2 | 9 | 12 | - | - | 21 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Assessments-Renewal | 16 | 22 | - | 20 | 58 | 57 | 68 | - | 77 | 202 | 60 | 55 | - | 84 | 199 |
| Assessments-New | 5 | 4 | - | 7 | 16 | 12 | 13 | - | 22 | 47 | 21 | 21 | - | 28 | 70 |

## WIC CLINIC CASELOAD STATISTICS PER CLINIC

|  | Oct-20 | Nov-20 | Dec-20 | Jan-21 | Feb-21 | Mar-21 | Apr-21 | May-21 | Jun-21 | Jul-21 | Aug-21 | Sep-21 | 20-21 YTD | 20-21 Avg | 19-20 Avg | 18-19 Avg | 17-18 Avg |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| BRANCH | 1,438 | 1,438 | 1,444 | 1,442 |  |  |  |  |  |  |  |  | 5,762 | 1,441 | 1,337 | 1,247 | 1,315 |  |
| HILLSDALE | 1,013 | 988 | 895 | 857 |  |  |  |  |  |  |  |  | 3,753 | 938 | 1,004 | 988 | 1,115 |  |
| STURGIS | 783 | 749 | 729 | 692 |  |  |  |  |  |  |  |  | 2,953 | 738 | 810 | 766 | 768 |  |
| THREE RIVERS | 1,241 | 1,136 | 1,064 | 997 |  |  |  |  |  |  |  |  | 4,438 | 1,110 | 1,127 | 982 | 1,024 |  |
| Totals | 4,475 | 4,311 | 4,132 | 3,988 |  |  |  |  |  |  |  |  | 16906 | 4,227 | 4,286 | 3,988 | 4,223 |  |

This reflects WIC clients who have enrolled and are using their WIC benefits. These are the numbers that our funding is dependent upon. We need to maintain a caseload at $97 \%$ or greater than our assigned caseload.


## Branch-Hillsdale-St. Joseph Community Health Agency Environmental Public Health Services Report for the February 25, 2021 Board of Health Meeting Prepared by Paul Andriacchi R.E.H.S, Director of Environmental Health

Since there are three new members to the Board of Health, I thought it would be appropriate to give a brief overview of the major programs we administer in environmental health in this report.

## Food Service Sanitation

The food program is responsible for the licensing and inspection of food establishments. The local health departments are responsible for the oversight restaurants, mobile food units, temporary food operations, school lunch programs and other food service establishments that provide food for immediate consumption. The Michigan Department of Agriculture and Rural
 Development (MDARD), licenses and inspects retail food operations such as grocery stores, convenience stores and butcher shops. Food establishments that are open year-round are required to have two inspections per year, seasonal establishments are only required to have one inspection per year. All of our inspections are conducted without prior notification with the exception of temporary facilities that normally only operate for a day or two. The inspection process is designed to review the various processes that operation conducts in the course of food preparation. The focus of our inspection is on risk factors which include sanitation, food handling practices, temperature control, employee health and overall managerial controls. Violations are grouped into three categories: Core, Priority Foundation or Priority. A core violation is on that is usually associated with general maintenance of equipment or the facility. A priority violation is one that can generally lead to an illness such as improper handwashing or improper food temperatures. A priority foundation violation is a violation that supports a priority violation such as hot having soap or towels at a handwash sink. If a facility has any priority or priority foundation violations on an inspection, they are expected to correct those violations during the inspection. If they cannot be corrected immediately, a follow up inspection is scheduled with a prescribed timeframe for correction.

## General Programs

Our general programs include well, septic, campgrounds, swimming pools, daycare/foster care inspections, body art, septage disposal, mortgage evaluations and nuisance complaints. The majority of that work is done in the well and septic program where we issue construction permits for sewage disposal systems and water wells. When issuing a septic permit our sanitarians will go out to the site and take an auger boring in the area of the proposed septic system. The auger boring will help us determine the soil type as well as the presence or absence of a seasonal high water table. Our environmental health code requires the bottom of a sewage disposal system to be at least 4' above the seasonal high water table to protect the aquifer from contamination. The sewage disposal system is then designed based on the soil conditions and depth to the seasonal water table. When issuing permits for water well our sanitarians again visit the site to determine the best location for the well factoring in proper isolation distances from septic systems, bodies of water, potential sources of contamination and away from areas subject to flooding. The campground and swimming pool inspections are primarily seasonal activities with the exception of indoor pools. We respond to a wide variety of complaints from sewage on the ground to unsanitary living conditions.

BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

2020/2021

|  | JANUARY |  |  |  | YTD 2020/2021 |  |  |  | YTD 2019/2020 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | BR | HD | SJ | TOTAL | BR | HD | SJ | TOTAL | BR | HD | SJ | TOTAL |
| WELL/SEWAGE SYSTEM EVAL. | - | - | 1 | 1 | 2 | - | 2 | 4 | 3 | - | 5 | 8 |
| CHANGE OF USE EVALUATIONS - FIELD | 1 | 1 | 5 | 7 | 10 | 15 | 10 | 35 | 6 | 18 | 9 | 33 |
| CHANGE OF USE EVALUATIONS - OFFICE | 3 | 3 | 8 | 14 | 21 | 15 | 30 | 66 | 20 | 7 | 9 | 36 |
| ON-SITE SEWAGE DISPOSAL |  |  |  |  |  |  |  |  |  |  |  |  |
| PERMITS NEW CONSTRUCTION | 3 | - | 2 | 5 | 8 | 24 | 23 | 55 | 12 | 16 | 27 | 55 |
| REPAIR/REPLACEMENT | 5 | 1 | 11 | 17 | 28 | 18 | 38 | 84 | 17 | 16 | 27 | 60 |
| VACANT LAND EVALUATION | 6 | - | 2 | 8 | 8 | 8 | 6 | 22 | 2 | 4 | 6 | 12 |
| PERMITS DENIED | - | - | - | - | - | - | - | - | - | - | 1 | 1 |
| TOTAL | 14 | 1 | 13 | 30 | 44 | 50 | 65 | 161 | 32 | 29 | 61 | 128 |
| SEWAGE PERMITS INSPECTED | 9 | 1 | 12 | 22 | 44 | 49 | 67 | 160 | 28 | 47 | 43 | 118 |
| WELL PERMITS ISSUED | 7 | 8 | 17 | 32 | 48 | 49 | 81 | 178 | 38 | 34 | 85 | 157 |
| WELL PERMITS INSPECTED | 12 | 13 | 45 | 70 | 79 | 52 | 54 | 185 | 38 | 50 | 89 | 177 |
| FOOD SERVICE INSPECTION |  |  |  |  |  |  |  |  |  |  |  |  |
| PERMANENT | 13 | 15 | 23 | 51 | 69 | 60 | 71 | 218 | 75 | 102 | 118 | 295 |
| NEW OWNER / NEW ESTABLISHMENT | - | - | - | - | - | 1 | - | 1 | 3 | 2 | 5 | 10 |
| FOLLOW-UP INSPECTION | 1 | - | - | 1 | 2 | - | 2 | 8 | 5 | 1 | 5 | 11 |
| TEMPORARY | - | - | 1 | 1 | 1 | 4 | 10 | 15 | 2 | 9 | 15 | 26 |
| MOBILE, STFU | - | 1 | 1 | 2 | - | 1 | 4 | 5 | 3 | 1 | - | 4 |
| PLAN REVIEW APPLICATIONS | - | - | - | - | - | - | - | - | - | 2 | 3 | 5 |
| FOOD COMPLAINTS RECEIVED | 2 | 2 | 2 | 6 | 4 | 19 | 7 | 24 | 4 | 5 | 5 | 14 |
| FOODBORNE ILLNESS INVESTIGATED | - | - | - | - | - | - | - | - | 1 | - | 1 | 2 |
| FOOD CLASSES |  |  |  |  |  |  |  |  |  |  |  |  |
| MANAGEMENT CERTIFICATION CLASS | - | - | - | - | n/a | n/a | n/a | n/a | $\mathrm{n} / \mathrm{a}$ | n/a | n/a | n/a |
| FOOD HANDLERS CLASS | - | - | - | - | n/a | n/a | n/a | - | n/a | n/a | n/a | - |
| METH LAB REFERRALS | - | - | - | - | - | - | - | - | - | - | - |  |
| METH LAB LETTERS SENT | - | - | - | - | - | - | - | - | - | - | - | - |
| CAMPGROUND INSPECTION | - | - | - | - | - | - | - | - | - | - | - | - |
| NON-COMM WATER SUPPLY INSP. | - | - | - | - | - | 4 | 4 | 8 | 1 | 9 | 7 | 17 |
| SWIMMING POOL INSPECTION | - | - | - | - | - | - | - | - | 1 | 3 | - | 4 |
| PROPOSED SUBDIVISION REVIEW | - | - | - | - | - | - | - | - | - | - | - | - |
| SEPTIC TANK CLEANER | - | - | - | - | - | - | - | - | - | - | - | - |
| DHS LICENSED FACILITY INSP. | 2 | 3 | 1 | 6 | 3 | 12 | 6 | 21 | 3 | 17 | 11 | 31 |
| COMPLAINT INVESTIGATIONS | - | 6 | - | 6 | - | 9 | 4 | 13 | 6 | 14 | 12 | 32 |
| LONG TERM MONITORING | - | - | - | - | - | - | - | - | - | - | - | - |
| BODY ART FACILITY INSPECTIONS | 1 | 3 | - | 4 | 2 | 3 | - | 5 | 2 | 1 | - | 3 |

## Inspection Type Count by County

| counis | Inspection 1 Vpe | Comit |
| :---: | :---: | :---: |
| Branch |  | 1 |
|  | Complaint | 2 |
|  | Enforcement | 3 |
|  | Follow-Up | 1 |
|  | Routine | 13 |
| Hillsdale | Complaint | 2 |
|  | Enforcement | 3 |
|  | Progress Note | 2 |
|  | Routine | 15 |
|  | STFU/Mobile | 1 |
| St. Joseph | Complaint | 2 |
|  | Progress Note | 4 |
|  | Routine | 23 |
|  | Routine - Phone | 3 |
|  | STFU/Mobile | 1 |
|  | Temporary | 1 |
|  | Total number of inspections | 77 |

Inspection Type Count
F
Inspection type count1
Complaint ..... 6
Enforcement ..... 6
Follow-Up ..... 1
Progress Note ..... 6
Routine ..... 51
Routine - Phone ..... 3
STFU/Mobile ..... 2
Temporary ..... 1
Total number of inspections ..... 77

## Establishment Inspection Report

| Name | Location | Date | Insprection Type | \# P | \# Pr | ; P/RI <br> Hixed <br> During <br> Inspection | \# core |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ADVENTURE ZONE, INC | COLDWATER | 1/5/2021 | Routine | 0 | 0 | 0 |  |
| Aman's Test | Coldwater | 1/27/2021 |  | 0 | 0 | 0 |  |
| Amaz'n Nutrition | Three Rivers | 1/8/2021 | Routine | 0 | 0 | 0 |  |
| Applebee's \#8399 | Three Rivers | 1/4/2021 | Routine | 0 | 0 | 0 |  |
| ARBY'S | THREE RIVERS | 1/5/2021 | Routine | 0 | : 1 | 0 |  |
| ARBY'S | COLDWATER | 1/5/2021 | Complaint | 0 | 0 | 0 |  |
| ARBY'S | THREE RIVERS | 1/21/2021 | Progress Note | 0 | 0 | 0 |  |
| Big King Buffet of Dong INC | Three Rivers | 1/21/2021 | Progress Note | 0 | 0 | 0 | . |
| Bowman Place | Three Rivers | 1/22/2021 | Progress <br> Note | 0 | 0 | 0 | 0 |
| Bowman Place | Three Rivers | 1/28/2021 | Routine | 0 | 0 | 0 | 0 |
| BURGERS UNLOCKED | HILLSDALE | 1/29/2021 | Routine | 0 | 0 | 0 |  |
| CAMDEN UNITED METHODIST CHURCH | Camden | 1/25/2021 | Routine | 0 | 0 | 0 | 0 |
| CAVONIS | HILLSDALE | 1/25/2021 | Routine | 0 | 0 | 0 | 1 |
| Culver's of Three Rivers | Three Rivers | 1/6/2021 | Routine | 0 | 0 | 0 | 0 |
| Deadilif Coffee Tin | Three Rivers | 1/22/2021 | STFU/Mobile | 0 | 0 | 0 | 0 |
| DICKEY'S BBQ | COLDWATER | 1/12/2021 | Complaint | 0 | 0 | 0 | 0 |
| DQ GRILL \& CHILL | Three Rivers | 1/5/2021 | Routine | 0 | 0 | 0 | 0 |
| El Camino Real | Three Rivers | 1/5/2021 | Routine | 0 | 0 | 0 | 1 |
| family affair RESTAURANT | MENDON | 1/12/2021 | Complaint | 0 | 0 | 0 | 0 |
| FAMILY AFFAIR RESTAURANT | MENDON | 1/20/2021 | Progress <br> Note | 0 | 0 | 0 | 0 |
| FIRST BAPTIST CHURCH | COLDWATER | 1/26/2021 | Routine | 0 | 0 | 0 | 0 |
| Five Lakes Coffee INC | STURGIS | 1/28/2021 | Routine | 0 | 0 | 0 | 0 |
| FOE JONESVILLE 4290 | JONESVILLE | 1/29/2021 | Routine | 0 | 0 | 0 | 0 |
| Frankie's by the Tracks, LLC | THREE RIVERS | 1/21/2021 | Routine | 0 | 0 | 0 | 1 |
| HANDMADE SANDWICHES \& BEVERAGES | Hillsdale | 1/6/2021 | Routine | 0 | 0 | 0 | 0 |
| Hank's Tavern On The River | Three Rivers | 1/4/2021 | Routine | 0 | 0 | 0 | 0 |
| healthies of hillsdale | Hillsdale | 1/13/2021 | Routine | 0 | 0 | 0 | 1 |
| HILLSDALE HOT DOG LLC | Hillsdale | 1/7/2021 | STFU/Mobile | 0 | 0 | 0 | 0 |
| JIMMY JOHN'S | COLDWATER | 1/26/2021 | Routine | 0 | 0 | 0 | 0 |


| Name | Location | Date | Incpection Type | \% P |  | \% P/ Pr rixed During Inspeation | \# core |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| JOHNNY T'S BISTRO | HILLSDALE | 1/13/2021 | Routine | 0 |  | 0 | 0 |
| Kentucky Fried Chicken | Three Rivers | 1/13/2021 | Routine | 0 |  | - 0 | 2 |
| Kentucky Fried Chicken Coldwater | COLDWATER | 1/27/2021 | Routine | 0 |  | 0 | 1 |
| LIL.' LOUIE'S PIZZA AND SUBS LLC | Centreville | 1/26/2021 | Routine | 0 | 0 | 0 | . 0 |
| LITTLE CAESARS \#1200-001 | Three Rivers | 1/6/2021 | Routine | 0 | 0 | 0 | 0 |
| LITTLE CAESARS \#1200-002 | Sturgis | 1/28/2021 | Routine | 0 | 0 | 0 | 1 |
| LITTLE CAESARS PIZZA | Hillsdale | 1/8/2021 | Routine | 0 | 0 | 0 | 0 |
| Main Street Cafe II | Three Rivers | 1/21/2021 | Routine Phone | 0 | 0 | 0 | 0 |
| MASONVILLE PLACE | COLDWATER | 1/26/2021 | Routine | 0 | 1 | 1 | 1 |
| MCDONALDS OF COLDWATER | COLDWATER | 1/27/2021 | Routine | 0 | 0 | 0 | 0 |
| MCDONALD'S OF QUINCY | QUINCY | 1/19/2021 | Routine | 0 | 0 | 0 | 0 |
| MCDONALDS OF THREE RIVERS \#2196 | Three Rivers | 1/6/2021 | Routine | 0 | 0 | 0 | 1 |
| MCDONALD'S-HILLSDALE | HILLSDALE | 1/8/2021 | Routine | 0 | 0 | 0 | 0 |
| MCDONALD'S-HILLSDALE | HILLSDALE | 1/14/2021 | Complaint | 0 | 0 | 0 | 0 |
| MESSIAH LUTHERAN CHURCH | Constantine | 1/28/2021 | Routine | 0 | 0 | 0 | 1 |
| MR GYROS | COLDWATER | 1/26/2021 | Routine | 0 | 0 | 0 | 0 |
| NUTRITION XTREME | Jonesville | 1/12/2021 | Routine | 0 | 0 | 0 | 0 |
| OUTPOST GRILLE | ALLEN | 1/4/2021 | Routine | 0 | 1 | 0 | 0 |
| OUTPOST GRILLE | ALLEN | 1/19/2021 | Complaint | 0 | 0 | 0 | 0 |
| Pigeon Inn | White Pigeon | 1/12/2021 | Routine | 0 | 0 | 0 | 0 |
| PIPER'S GRINDERS GALORE | Constantine | 1/28/2021 | Routine | 0 | 0 | 0 | 0 |
| Quincy Diner | QUINCY | 1/5/2021 | Enforcement | 0 | 0 | 0 | 0 |
| RACHAEL'S | White Pigeon | 1/12/2021 | Routine | 0 | 0 | 0 | 2 |
| READING PIZZA BARN | READING | 1/14/2021 | Routine | 0 | 0 | 0 | 0 |
| READING UNITED METHODIST CHURCH | READING | 1/14/2021 | Routine | 0 | 0 | 0 | 0 |
| SPANGLER'S FAMILY RESTAURANT | Jonesville | 1/27/2021 | Enforcement | 0 | 0 | 0 | 0 |
| SPANGLER'S FAMILY RESTAURANT | Jonesville | 1/28/2021 | Enforcement | 0 | 0 | 0 | 0 |
| SPANGLER'S FAMILY RESTAURANT | Jonesville | 1/29/2021 | Enforcement | 0 | 0 | 0 | 0 |
| St. Joseph County COA @ Kline's Resort | Three Rivers | 1/19/2021 | Routine Phone | 0 | 0 | 0 | 0 |
| Sturgis Biggby Coffee \#484 | Sturgis | 1/28/2021 | Routine | 0 | 0 | 0 | 0 |


| Name | Location | Date | Inspection Lype | \#P | \% Pr | \#P/EA <br> Fized <br> During <br> Inspection | Core |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SUBWAY \#37408 | Three Rivers | 1/8/2021 | Routine | 0 | 0 | 0 | 0 |
| Subway At Wal-Mart | STURGIS | 1/28/2021 | Routine | 0 | 1 | 1 | 1 |
| SUBWAY-JONESVILLE | Jonesville | $1 / 4 / 2021$ | Progress Note | 0 | 0 | 0 | 0 |
| Taco Bell \#32989 | COLDWATER | 1/5/2021 | Routine | 0 | 0 | 0 | 0 |
| Taqueria El Tejano | Three Rivers | 1/20/2021 | Temporary | 0 | 0 | 0 | 0 |
| TASTY TWIST | COLDWATER | 1/27/2021 | Routine | 1 | 0 | 1 | 0 |
| THE DECK DOWN UNDER | Jerome | 1/12/2021 | Routine | 0 | 0 | 0 | 0 |
| THE GOODIE SHOP | COLDWATER | 1/4/2021 | Enforcement | 0 | 0 | 0 | 0 |
| THE GOODIE SHOP | COLDWATER | 1/5/2021 | Enforcement | 0 | 0 | 0 | 0 |
| THE GREAT WALL | Hillsdale | 1/29/2021 | Routine | 0 | 0 | 0 | 0 |
| The Landmark Tap House \& Grille | Three Rivers | 1/21/2021 | Routine Phone | 0 | 0 | 0 | 0 |
| THREE RIVERS PIZZA HUT | THREE RIVERS | 1/5/2021 | Complaint | 0 | 0 | 0 | 0 |
| Tropical Smoothie Cafe | Coldwater | 1/21/2021 | Routine | 0 | 0 | 0 | 0 |
| Twin County Community Probation Center | Three Rivers | 1/19/2021 | Routine | 0 | 0 | 0 | 2 |
| UNION CHURCH OF QUINCY | QUINCY | 1/19/2021 | Routine | 0 | 0 | 0 | 1 |
| WALDRON FRIENDLY <br> TAVERN | WALDRON | 1/26/2021 | Progress Note | 0 | 0 | 0 | 0 |
| ZHENG'S SUPER GRAND BUFFET | COLDWATER | 1/5/2021 | Routine | 1 | 2 | 3 | 1 |
| ZHENG'S SUPER GRAND BUFFET | COLDWATER | 1/21/2021 | Follow-Up | 0 | 1 | 0 | 0 |

Food Inspection Codes:
$P$-This indicates a priority violation which is a violation which includes a quantifiable measure to show control of hazards such as cooking, cooling, reheating and handwashing. It is in general terms a violation that can potentially lead directly to an illness.

Pf-This is a priority foundation violation which is a violation that supports a priority violation. For example, the lack of soap or towels at a handwash sink is a Pf. This supports the priority violation of not washing hands.
C-This is a core violation-This is an item the usually relates to general sanitation, operational controls and maintenance of facilities and equipment.

Area
Agency on $\boldsymbol{A g i n g}$ (IIIC)
Branch-St. Joseph

February 25, 2021
Director's Report

## Enclosure:

1. AAA IIIC - Annual Conflict of Interest \& Disclosure Statement *

## Updates:

1. We continue to disburse personal protective equipment to our providers, vendors and various community partners. Please let us know if you are aware of organizations who are in need of masks.
2. Services to Victims of Elder Abuse Program Updates:
a. Our team was awarded the special allocation request that we applied for in January!
b. We continue to prepare for the upcoming Division of Victim Services "Contract Review" in March. This engages direct care staff, financial staff, our authorized official and virtually tours our offices in Three Rivers and Coldwater.
3. We continue to search for candidates to fill our open positions: full time Nurse Care Consultant and part-time Outreach Specialist.
4. I want to take a moment to share a few highlights from the past month! Our staff have continued to shift gears to support local vaccination efforts. We've handled thousands of phone calls and voicemails and I'm proud to report we've surpassed the "one-thousand appointments made" mark from the waiting list!

Gratitude continues to be shared from many community members and this note was particularly meaningful to me, so I thought I would share it with you:

Note of appreciation to all:
Just a short note to tell you how apperceive I am of the group you have serving the seniors. The staff I interacted with while scheduling our Covid shots were spectacular. Everyone I talked to during this very stressful time treated me with respect and made me feel like I was the only person in the world. This also goes for the folks at the shot site. It didn't matter if it was your staff, volunteers or the guard, no one seemed like they were having a bad day.
Thank everyone for their service to our community.
-Art
Sturgis, MI
5. Our current Statement of Grant Award from the Aging \& Adult Services Agency is set to end on February 28, 2021. In addition to our "regular" AASA funding, we do anticipate an allocation specifically for the AAA's involvement in local vaccination efforts. Our work with the finance team is on-going and we will keep the Board updated as awards are made.

## Annual Conflict of Interest and Disclosure Policy

Section 1. Purpose of Policy. This policy sets forth principles and procedures intended to maintain the integrity of the Area Agency on Aging Region 3C (AAA 3C), as well as comply with Michigan Office of Services to the Aging Operating Standards for Area Agencies on Aging. Members of the Branch-Hillsdale-St. Joseph Community Health Agency (CHA) Board of Health (serving as the AAA 3C Policy Board) are expected to conduct their personal/business affairs so that no conflict of interest or duality of interest interferes with their duties and responsibilities to the CHA/AAA 3C.

Section 2. Covered Individuals. This policy applies to the members and officers of the Board of Health.

Section 3. Conflict of Interest and Duality of Interest. This policy covers both conflicts of interests, involving the financial interests of or financial benefit to a covered individual as owner, employee, agent, consultant or otherwise, and duality of interests, involving the interests of an association, governmental entity, business or other entity (whether profit or nonprofit) in which a covered individual has a substantial personal interest as a director, officer, trustee, commissioner or substantial contributor or through another substantial relationship.

Section 4. Covered Transactions, Relationships and Affiliations. This policy applies to existing and proposed transactions, relationships and affiliations, including contracts for goods, facilities and services, leases, grants, gifts, financial assistance, partnerships, endorsements, policy positions, joint ventures and other undertakings and dealings, between the CHA/AAA 3 C and (a) a covered individual; (b) a member of a covered individual's immediate family; and (c) an association, governmental entity, business or other entity (whether profit or nonprofit) with respect to which a covered individual has a conflict of interest or a duality of interests.

Section 5. Disclosure. All covered individuals shall provide a written disclosure annually to the CHA/AAA 3C of any conflict of interest or duality of interest between them and the CHA/AAA 3C as described in Section 3 and of any covered transactions, relationships, endorsements, policy positions or affiliations involving them as described in Section 4. In addition, a covered individual shall provide prompt disclosure to the Board of Health at any time that he or she becomes aware of any such conflict of interest, duality of interest or covered transaction, relationship or affiliation.

Section 6. Review, Report and Record. In the event that the CHA/AAA 3C becomes aware of a conflict of interest, or duality of interest of a covered transaction, relationship, endorsement, policy position or affiliation involving a covered individual, whether through disclosure made pursuant to Section 5 or otherwise, the matter shall be reviewed by a committee of disinterested members of the Board of Health. The review shall be reported to the Board of Health and shall be made a matter of record.

Section 7. Procedures. Any member of the Board of Health having a duality of interest or conflict of interest, real or apparent, with respect to any covered transaction, relationship, endorsement, policy position or affiliation that comes before the Board of Health shall not vote or use his or her personal influence on the matter, and shall not be counted in determining a quorum for the meeting at which the matter is voted upon. In deciding any such matter, the Board of Health shall obtain appropriate comparability data, including data as to the fair market value for any goods, services or facilities that may be involved. The minutes of the meeting shall adequately document the basis of the determination and shall reflect that the disclosure was made, that the interested Board member abstained from voting, and that his or her presence was not considered. No interested Board member and no interested officer shall take part in the discussion and, in appropriate instances, as determined by the officer conducting the meeting, shall be absent from the discussion and vote. However, an interested Board member or an interested officer may state a policy position relevant to the matter under consideration, explain the transaction or affiliation, and answer questions from Board members relating to the matter.
$\qquad$ I do not have a conflict of interest or duality of interest. I have read this policy and agree to follow it.
$\qquad$ I do have a conflict of interest or duality of interest, as follows:
$\qquad$ I have read this policy and agree to follow it.

