

BOARD OF HEALTH Meeting **Agenda for April 27, 2023 at 9:00 AM**

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 from March 23, 2023*
2. AAA/Branch County Commission on Aging Senior Nutrition Program Update
3. Public Comment
4. Health Officer's Report
5. Medical Director's Report
6. Departmental Reports
 - a. Personal Health & Disease Prevention
 - b. Environmental Health
 - c. Area Agency on Aging
 - d. Health Education and Promotion
7. Committee Reports
 - e. Finance Committee – Approval of the March 23, 2023 Finance Committee meeting.
 - f. Program, Policies, and Appeals – Approval of the April 19, 2023 PPA Committee meeting.
8. Financial Reports
 - a. Approve Payments*
 - b. Review Financials*
9. New Business
 - a. AAA ByLaws*
 - b. Form 5572
 - c. Strategic Plan Update
10. Public Comment
11. Adjournment - Next meeting: May 25, 2023

Public Comment:

For the purpose of public participation during public hearings or during the public comment portion of a meeting, every speaker prior to the beginning of the meeting is requested but not required to provide the Board with his or her name, address and subject to be discussed. Speakers are requested to provide comments that are civil and respectful. Each speaker will be allowed to speak for no more than three (3) minutes at each public comment opportunity.

March 23, 2023 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Brent Leininger at 9:07 AM with the Pledge of Allegiance to the Flag of the United States. Roll call was completed as follows: Tom Matthew, Jared Hoffmaster, Brent Leininger, Rusty Baker, and Steve Lanius. The following members were absent: Jon Houtz.

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

Mr. Hoffmaster moved to approve the agenda with support from Mr. Baker. The motion passed unopposed.

Mr. Hoffmaster moved to approve the minutes from the February 23, 2023 meeting with support from Mr. Baker. The motion passed unopposed.

Public Comment: No public comments were given.

Dane Porter, CPA, Senior Manager at Maner Costerisan provided a presentation on the Audit for the year completed on September 30, 2022. The audit resulted in an unmodified opinion with no findings.

Mr. Hoffmaster moved to accept the audit and place it on file with support from Mr. Lanius. The motion passed unopposed.

Rebecca Burns, Health Officer, reviewed her monthly report. Items included: Agency Meetings and Trainings, MALPH's Day at the Capital, Michigan's Public Health Week/Hometown Health Hero Award Winners, Community Health Needs Assessment (CHNA)/Community Health Improvement Plan (CHIP), MCDC Dental Centers, COVID, Highly Pathogenic Avian Influenza, Accreditation, Personnel Policy Committee, Opioid Settlement Funds, Coldwater Office, Hillsdale Office, Three Rivers Office, and Sturgis Office.

Dr. Luparello reviewed the Medical Director's monthly report. This month's educational report was titled, "Listeria Infection".

Departmental Reports:

- Environmental Health
- Area Agency on Aging
- Personal Health & Disease Prevention
- Health Education & Promotion

Financial Reports/Expenditures

- Mr. Baker moved to approve the expenditures for February as reported with support from Mr. Hoffmaster. The motion passed unopposed.
- Mr. Hoffmaster moved to place the financials from February on file with support from Mr. Matthew. The motion passed unopposed

Committee Reports:

- Finance Committee – The Committee met on March 23, 2023 prior to the full Board meeting. The minutes for this meeting had not been completed and will not be available for approval until the next meeting.
- Program, Policy, & Appeals Committee – Mr. Hoffmaster moved to approve the minutes for the March 15, 2023 Program, Policy, & Appeals Committee meeting with support from Mr. Lanius. The motion passed unopposed.

New Business:

- Mr. Hoffmaster moved to approve the appointments of Pam Riley, Michelle Lock, Trish Wood, Kelly Jonker, Amy Duff, Madelene Wirgau, and Denny Brieske to the Area Agency on Aging Advisory Committee with support from Mr. Matthew. The motion passed unopposed.
- Mr. Baker moved to approve the Personnel Policy Manual, as presented, with support from Mr. Hoffmaster. The motion passed unopposed.
- Mr. Hoffmaster moved to approve the Plan of Organization, as presented, with support from Mr. Matthew. A roll call vote was taken and the motion passed 5-0 (Mr. Matthew, Yes; Mr. Hoffmaster, Yes; Mr. Leininger, Yes; Mr. Baker, Yes; Mr. Lanius, Yes).
- Mr. Lanius moved to approve the immunization fee schedule, as presented, effective April 1, 2023 with support from Mr. Hoffmaster. A roll call vote was taken and the motion passed 5-0 (Mr. Matthew, Yes; Mr. Hoffmaster, Yes; Mr. Leininger, Yes; Mr. Baker, Yes; Mr. Lanius, Yes).

Mr. Hoffmaster left the meeting at 10:41 AM.


- Mr. Lanius moved to approve the Environmental Health fee schedule, as presented, effective April 1, 2023 with support from Mr. Baker. The motion passed unopposed.
- Mr. Baker moved to accept the proposal to acquire Hedgerow software for Environmental Health Services, with support from Mr. Lanius. A roll call vote was taken and the motion passed 4-0 (Mr. Matthew, Yes; Mr. Leininger, Yes; Mr. Baker, Yes; Mr. Lanius, Yes).
- Mr. Matthew moved to accept the bid from R. Johnson Builders Inc. in the amount of \$58,630 to complete the work, as specified in the invitation to bid building exterior renovation project, on the Three Rivers facility. The motion received support from Mr. Baker. A roll call vote was taken and the motion passed 4-0 (Mr. Matthew, Yes; Mr. Leininger, Yes; Mr. Baker, Yes; Mr. Lanius, Yes).
- Mr. Lanius moved to accept the bid from RDK's LLC Asphalt & Sealcoating in the amount of \$95,100 to mill and replace three parking lots at the Hillsdale location. The motion received support from Mr. Baker. A roll call vote was taken and the motion passed 4-0 (Mr. Matthew, Yes; Mr. Leininger, Yes; Mr. Baker, Yes; Mr. Lanius, Yes).
- Mr. Matthew moved to approve contributing up to \$10,000 toward the build out cost for the renovated space in the Sturgis office, providing we have receipts and an itemized list for expenses. The motion received support from Mr. Lanius. The motion passed unopposed.

- Mr. Baker moved to approve the Agency to send out requests to each of the three counties for opioid funding. The motion received support from Mr. Matthew. The motion passed unopposed.

Public Comment: Public comments were provided by one individual.

With no further business, Mr. Baker moved to adjourn the meeting with support from Mr. Lanius. The motion passed unopposed and the meeting was adjourned at 11:23 AM.

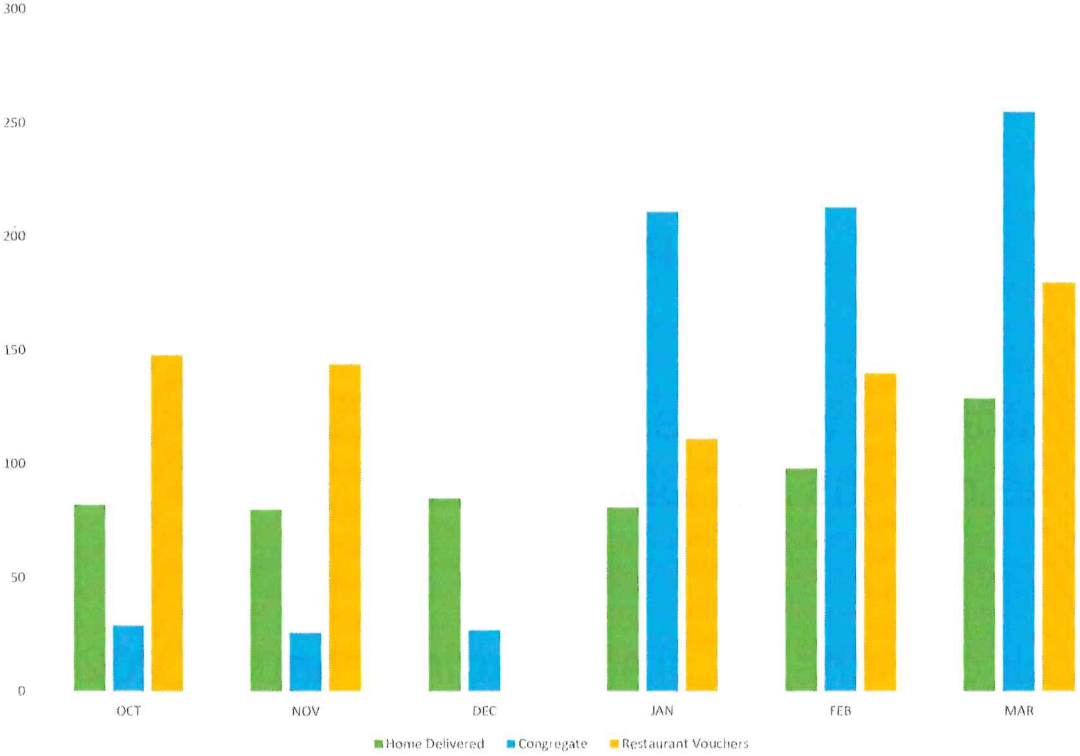
Respectfully Submitted by:


Theresa Fisher,
Administrative Services Director
Secretary to the Board of Health

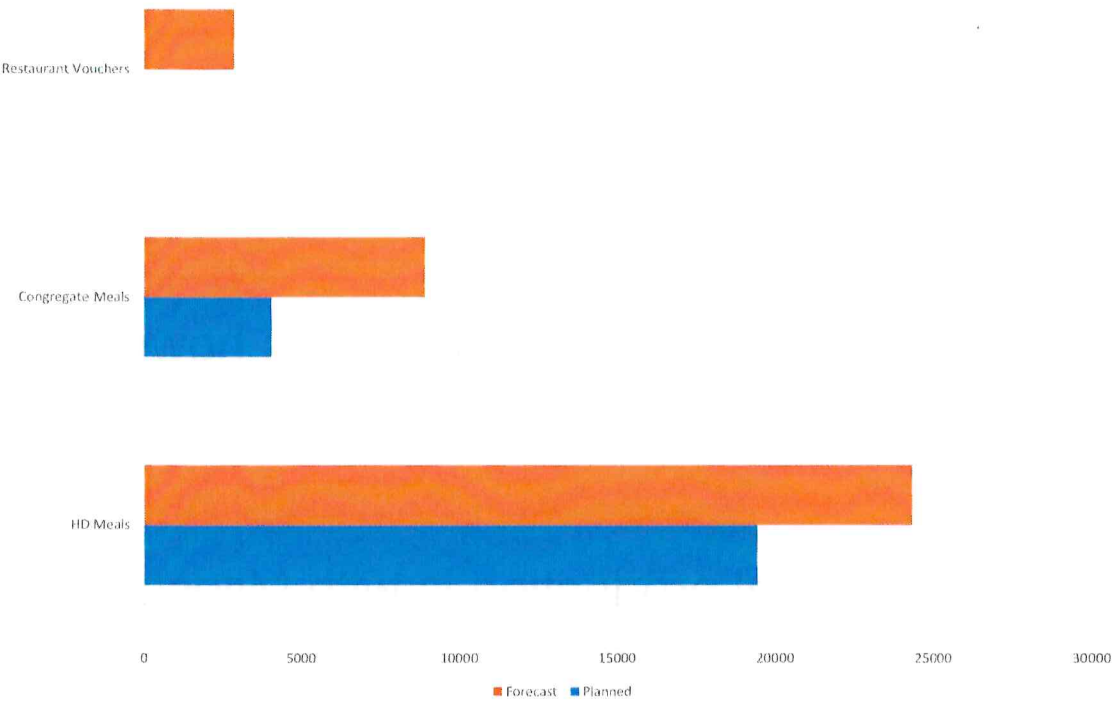
**Branch County Commission on Aging
Nutrition Program
Six Month Update
April 2023**

- Contracted with previous provider for the first three months (October – December 2022)
- Took over the program starting January 2023
- Two paid staff and twenty-three volunteers
- Congregate lunch is Monday, Tuesday, Thursday at Burnside Center
- Home delivered is on the same days however five meals are sent (two are frozen)
- Contracted meal production is with Milestone Senior Services in Battle Creek

Commission on Aging - Clients Served



Commission on Aging - Meals



VOLUNTEER

With Home Delivered Meals @ Burnside Center

Enable people to live independently at home through the provision of nutritious meals, personal contact and related services.



Deliver meals to homebound seniors and disabled individuals
*Monday, Tuesday, Thursday.

Openings:

1 Full-Time (Monday, Tuesday and Thursday)

2 Part-time (1 or 2 days per week)

- *Receive Mileage Pay
- *Must have Valid Drivers License
- *Must have reliable vehicle and be able to drive anywhere in Branch County.
- *Background Checks Required.



Contact Michael Searing, Nutrition Director 517-279-6565
msearing@burnsidecenter.com
65 Grahl Drive Coldwater, Michigan

PUBLIC COMMENT

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Health Officer's Report to the Board of Health for April 21, 2023
Prepared by: Rebecca A. Burns, M.P.H., R.S.

Agency Updates

Public Health Accreditation in Michigan: Michigan's Local Public Health Accreditation Program began statewide accreditation of 45 Michigan local health departments in 1998. The program, intended to improve performance of Michigan's public health system, was a collaborative effort between the Michigan Public Health Institute, the Michigan Department of Agriculture and Rural Development, the Michigan Department of Health and Human Services, the Michigan Department of Environment, Great Lakes, and Energy, the Michigan Association for Local Public Health, and Michigan's 45 local public health departments. We have just begun Cycle 8 after pausing Cycle 7 at the beginning of the pandemic response, with Branch-Hillsdale-St. Joseph Community Health Agency scheduled 2nd out of 45. Our accreditation week started on Monday, April 24th and we are nearly wrapped up. The review is slightly different for Cycle 8 as it is focused on consultation and assistance. This type of review was chosen for Cycle 8 in recognition of how all local health department efforts have been focused on COVID with many new staff also in place.

Our food program had their review a week early upon the request of the accreditors from the Michigan Department of Agriculture and Rural Development. The accreditors pointed out many positives of our food program.

As the final reports come in, I will share that information for your review.

Agency Meetings and Trainings: With our new Emergency Preparedness Coordinator in place and a thorough review of our strengths and weaknesses under way, we are moving to improve our training of Agency staff on the National Incident Management System (NIMS). All staff will now be required to complete ICS 100 and ICS 700 courses. Staff positions have been reviewed and some of those will require additional training courses which may include ICS 200, ICS 300, ICS 400, and/or ICS 800. The staff is making great progress in completing these.

The Agency's Annual All-Staff Meeting is scheduled for Friday, April 21st. The day begins at 9 am and wraps-up at 3 pm at the ProMedica Conference Room (old Kmart building) in Coldwater. Our focus this day is to train our staff on what we do as a local health department. With 58 percent of our staff having less than 4 years at the Agency, we have noted that many staff don't know much about what we do outside of their immediate department.

MALPH's Day at the Capitol: On April 11th Dr. Luparello, Kris Dewey (Emergency Preparedness Coordinator) and I attended the Day at the Capitol for Local Public Health Leaders. It was a busy day starting with the County Health Rankings, then visits with our State Representatives, the presentation of Public Health Week awards including our own Hometown Health Hero JJ Hodshire, and wrapping up with visits to our State Senators. As a result of our visits, we now have an appointment to see Representative Carra at our Three Rivers location on Friday, May 26th at 11:00 am. Commissioners Hoffmaster and Baker we hope you can attend Representative Carra's visit.

County Health Rankings: The annual updated County Health Rankings were released at the end of March. I have included today the rankings sheet for each county. As you can see, out of 83 counties in Michigan, Hillsdale ranks 32, Branch is 57 and St. Joseph is 63. This means that overall, Hillsdale is the healthiest in the tri-county area. We also shared this information with our legislators when we were visiting them at the Day at the Capitol.

Community Health Needs Assessment (CHNA)/Community Health Improvement Plan (CHIP): Marcus and Thomas have now finished up focus groups and have a first draft nearly ready for our review. I expect we will have a plan for you to review as early as the June meeting and certainly by July.

COVID: The testing kiosks will continue for now, but we are still waiting to hear if they will extend beyond the end of the Public Health Emergency.

Strategic Plan Update: We have been working the work plan for the Strategic Plan with a focus on putting the deliverables for this into VMSG Dashboard, our performance management software, and assigning projects to staff. One of those items is to create a multi-department and level employee satisfaction team which I have been working to pull together.

Personnel Policy Committee: Theresa and I continue to meet with the Personnel Policy Committee with a task of reviewing and updating the Agency's Exposure Control Plan and Chemical Hygiene Plan.

Opioid Settlement Funds: I have not yet heard anything on the funding proposal that was shared with each county.

Agency's Annual Report: The Health Education & Promotion division is pulling together the FY22 Annual Report which I expect to have ready for the May meeting.

Coldwater Office: Theresa is still waiting to hear back from Branch County maintenance on if they will get to restroom facility updates in our Coldwater building.

Hillsdale Office: The contractor that will be doing the Hillsdale parking lot replacement has received their down payment. We don't have a date for the project yet.

Three Rivers Office: The contractor who will be doing the wood wrap on the building has been notified of his approved bid proposal. I have communicated a completion date of 9/30/2023 and am waiting on a start date.

Sturgis: The addition of space project in Sturgis is moving along.

County Health Rankings – Branch County 2023

The Robert Wood Johnson Foundation is collaborating with the University of Wisconsin Population Health Institute to develop these Rankings for each state's counties.



	BRANCH COUNTY	ERROR MARGIN	US	MI	RANK (OF 83)
HEALTH OUTCOMES					57
<i>Length of Life</i>					53
Premature Death – Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2018-2020)	8,400	7,400-9,400	7,300	7,500	
<i>Quality of Life</i>					60
Poor or Fair Health** - % of adults reporting fair or poor health. (age-adjusted) (2020)	16%	14-18%	12%	15%	
Poor Physical Health Days** – Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2020)	3.7	3.4-4.0	3.0	3.3	
Poor Mental Health Days** – Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2020)	5.6	5.3-5.9	4.4	5.3	
Low Birth Weight – % of live births with low birth weight (< 2500 grams). (2014-2020)	7%	6-8%	8%	9%	
HEALTH FACTORS					51
<i>Health Behaviors</i>					58
Adult Smoking**-% of adults who are current smokers. (2020)	23%	20-26%	16%	19%	
Adult Obesity–% of adults that report a BMI >=30. (2020)	38%	31-47%	32%	35%	
Food Environment Index-Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019,2020)	7.4		7.0	7.0	
Physical Inactivity-% of adults aged 20 and over reporting no leisure-time physical activity. (2020)	23%	20-25%	22%	20%	
Access to Exercise Opportunities-% of population with adequate access to locations for physical activity. (2020, 2022)	61%		84%	85%	
Excessive Drinking**-% of adults reporting binge or heaving drinking. (2020)	20%	19-21%	19%	20%	
Alcohol-impaired Driving Deaths–% of driving deaths with alcohol involvement. (2016-2020)	36%	24-47%	27%	29%	
Sexually Transmitted Infections–No. of newly diagnosed Chlamydia cases per 100,000 population. (2020)	245.9		481.3	448.3	
Teen Births–No. of births per 1,000 female population, ages 15-19 years. (2014-2020)	28	24-31	19	17	
<i>Clinical Care</i>					78
Uninsured-% of population under age 65 without health insurance. (2020)	9%	8-11%	10%	6%	
Primary Care Physicians–Ratio of population to primary care physicians. (2020)	2,410:1		1,310:1	1,240:1	
Dentists–Ratio of population to dentists. (2021)	2,040:1		1,380:1	1,270:1	
Mental Health Providers- Ratio of population to mental health providers. (2022)	3.0:1		340:1	320:1	
Preventable Hospital Stays–Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2020)	3,541		2,809	3,324	
Mammography Screening–% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2020)	39%		37%	38%	
Flu vaccinations–% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2020)	51%		51%	50%	
<i>Social & Economic Factors</i>					38
High School Completion -% of adults ages 25 and over with a high school diploma or equivalent. (2017-2021)	89%	88-90%	89%	92%	
Some College–% of adults aged 25-44 years with some post-secondary education. (2017-21)	51%	46-55%	67%	69%	
Unemployment–% of population age 16 and older unemployed but seeking work. (2021)	5.0%		5.4%	5.9%	
Children in Poverty-% of children under age 18 in poverty. (2021)	18%	12-24%	17%	18%	
Income Inequality– ratio of household income at the 80th percentile to income at the 20th percentile. (2017-2021)	3.7	3.4-3.9	4.9	4.6	
Children in Single-parent Households–% of children that live in a household headed by single parent. (20117-21)	21%	17-26%	25%	25%	
Social Associations–No. of membership associations per 10,000 population. (2020)	9.9		9.6	9.1	
Injury Deaths–No. of deaths due to injury per 100,000 population. (2016-2020)	82	70-94	76	81	
<i>Physical Environment</i>					45
Air Pollution-particulate matter-Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2019)	8.4		7.4	6.8	
Drinking Water Violations-Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2021)	No				
Severe Housing Problems–% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2015-2019)	11%	9-12%	17%	14%	
Driving Alone to Work-% of the workforce that drives alone to work. (2017-2021)	81%	78-84%	73%	79%	
Long Commute-driving Alone –Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2017-2021)	25%	22-27%	37%	33%	

* 10th/90th percentile, i.e., only 10% are better. Note: Blank values reflect unreliable or missing data. **Data should not be compared with prior years due to changes in definition/methods

Additional Indicators – Branch County

	BRANCH COUNTY	MI
Demographics**		
Population (2021)	44,985	10,050,811
% Below 18 Years of Age (2021)	23.3%	21.4%
% 65 and Older (2021)	18.8%	18.1%
% Non-Hispanic African American (2021)	2.3%	13.8%
% American Indian & Alaskan Native (2021)	0.6%	0.7%
% Asian (2021)	0.7%	3.4%
% Native Hawaiian/Other Pacific Islander (2021)	0.0%	0.0%
% Hispanic (2021)	5.8%	5.6%
% Non-Hispanic White (2021)	89.2%	74.2%
% not proficient in English (2021)	2.0%	1.0%
% Females (2021)	47.9%	50.4%
% Rural (2021)	62.7%	25.4%
Health Outcomes		
Diabetes Prevalence (2020)	11%	11%
HIV Prevalence Rate (2020)	69	199
Premature Age-Adjusted Mortality (2018-2020)	420	380
Frequent Physical Distress (2020)	12%	11%
Frequent Mental Distress (2020)	18%	17%
Infant Mortality (2014-2020)	8	6
Child Mortality (2017-2020)	60	50
Health Behaviors		
Food Insecurity (2020)	14%	12%
Limited Access to Healthy Foods (2019)	6%	6%
Drug Overdose Deaths (2018-2020)	12	26
Insufficient Sleep** (2020)	35%	36%
Health Care		
Uninsured Adults (2018)	10%	8%
Uninsured Children (2018)	6%	3%
Other Primary Care Providers (2020)	1,410:1	760:1
Social & Economic Factors		
Disconnected Youth (2017-21)	9%	7%
Median Household Income (2021)	\$60,500	\$63,400
Children Eligible for Free Lunch (2020-2021)	60%	51%
Residential Segregation—black/white (2017-2021)	56	73
Homicides (2014-2020)		6
Firearm Fatalities (2016-2020)	12	13

What Does the Data Mean for My County?

The *Rankings* are based on a model of population health that emphasizes many factors that, if improved, can help make communities healthier places to live, learn, work and play. Michigan's eighty-three counties are ordered according to summaries of a variety of health measures. Those factors having high ranks, e.g. 1 or 2, are considered to be the "healthiest." The model uses the following summary measures:

- **Health Outcomes** are based on an equal weighing of one mortality measure and four morbidity measures.

- **Health Factors** are based on weighted scores of four types of factors: Health Behaviors, Clinical Care, Social & Economic and Physical Environment measures.

Health Outcomes measures are used to understand the current health status of the population, while Health Factors are used to predict its future health needs.

What are the Public Health Cost Savings Associated with Prevention

Funding public health can result in significant cost savings for local communities. Did you know that:

- Every **\$1 spent on immunization saves \$10.90 in medical costs**. In addition, the CDC estimates that for the vaccination of children born between 1994 and 2018 has saved the U.S. nearly **\$406 billion** in direct medical costs and **\$1.88 trillion** in total society costs.
- On average, a **\$46** child safety seat prevents **\$2,200** in medical spending. **This is a return of \$42 for every \$1 invested**. (Child Safety Network and PIRE)
- Every **\$1 spent on preventive dental care** could **save \$8 to \$50 in restorative** and emergency treatment (American Dental Hygienist Assoc.).
- Every **\$1 spent on Sexually Transmitted Disease Screening** results in a **\$2.50 savings** by preventing Pelvic Inflammatory Disease (Return on Investment Analysis of Local Public Health Funding, MALPH, 2013)
- **Neonatal health care costs related to smoking** are equivalent to **\$704 for each maternal smoker**. Randomized controlled trials indicate that a smoking cessation program for pregnant women can save as much as **\$6 for each \$1 spent** (CDC).
- The OMB has shown that every **\$1 spent on WIC** results in a savings of **\$1.77 to \$3.13 in health care costs**, primarily attributed to reduced rates of low birth weight and improved rates of immunizations.
- Investment of **\$10** per person, per year in proven community-based programs that help people increase their physical activity, eat better, and avoid smoking and other tobacco use could save the country more than **\$16 billion** annually within five years. This is a return of **\$5.60** for every **\$1** invested. (Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities, Trust for America's Health.)

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County Health Rankings – Hillsdale County 2023

The Robert Wood Johnson Foundation is collaborating with the University of Wisconsin Population Health Institute to develop these Rankings for each state's counties.

	HILLSDALE COUNTY	ERROR MARGIN	U.S.	MI	RANK (OF 83)
HEALTH OUTCOMES					32
<i>Length of Life</i>					45
Premature Death —Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2018-2020)	8,000	7,000-9,000	7,300	7,900	
<i>Quality of Life</i>					20
Poor or Fair Health **-% of adults reporting fair or poor health. (age-adjusted) (2020)	15%	13-17%	12%	15%	
Poor Physical Health Days **—Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2020)	3.5	3.2-3.8	3.0	3.3	
Poor Mental Health Days **—Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2020)	5.1	4.8-5.5	4.4	5.3	
Low Birth Weight —% of live births with low birth weight (< 2500 grams). (2014-2020)	6%	5-7%	8%	9%	
HEALTH FACTORS					44
<i>Health Behaviors</i>					26
Adult Smoking **-% of adults who are current smokers. (2020)	22%	19-25%	16%	19%	
Adult Obesity —% of adults that report a BMI >=30. (2020)	36%	34-38%	32%	35%	
Food Environment Index —Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019, 2020)	7.7		7.0	7.0	
Physical Inactivity —% of adults aged 20 and over reporting no leisure-time physical activity. (2020)	22%	19-24%	22%	20%	
Access to Exercise Opportunities —% of population with adequate access to locations for physical activity. (2022, 2020)	53%		84%	85%	
Excessive Drinking **-% of adults reporting binge or heaving drinking. (2020)	21%	20-22%	19%	20%	
Alcohol-impaired Driving Deaths —% of driving deaths with alcohol involvement. (2016-2020)	17%	7-26%	11%	29%	
Sexually Transmitted Infections —No. of newly diagnosed Chlamydia cases per 100,000 population. (2020)	244-8		481.3	448.3	
Teen Births —No. of births per 1,000 female population, ages 15-19 years. (2014-2020)	21	18-24	19	17	
<i>Clinical Care</i>					80
Uninsured —% of population under age 65 without health insurance. (2020)	7%	6-8%	10%	6%	
Primary Care Physicians —Ratio of population to primary care physicians. (2020)	4,150:1		1,310:1	1,240:1	
Dentists —Ratio of population to dentists. (2021)	2,530:1		1,380:1	1,270:1	
Mental Health Providers —Ratio of population to mental health providers. (2022)	620:1		340:1	320:1	
Preventable Hospital Stays —Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2020)	3,849		2,809	3,324	
Mammography Screening —% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2020)	37%		37%	38%	
Flu vaccinations —% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2020)	45%		51%	50%	
<i>Social & Economic Factors</i>					40
High School completion —% of adults ages 25 and over with a high school diploma or equivalent. (2017-2021)	90%	89-91%	89%	92%	
Some College —% of adults aged 25-44 years with some post-secondary education. (2017-21)	56%	52-61%	67%	69%	
Unemployment —% of population age 16 and older unemployed but seeking work. (2021)	5.5%		5.4%	5.9%	
Children in Poverty —% of children under age 18 in poverty. (2021)	22%	16-27%	17%	18%	
Income Inequality —ratio of household income at the 80th percentile to income at the 20th percentile. (2017-2021)	3.9	3.7-4.1	4.9	4.6	
Children in Single-parent Households —% of children that live in a household headed by single parent. (2017-21)	20%	16-24%	25%	25%	
Social Associations —No. of membership associations per 10,000 population. (2020)	12.0		9.1	9.6	
Injury Deaths —No. of deaths due to injury per 100,000 population. (2016-2020)	76	64-87	76	81	
<i>Physical Environment</i>					57
Air Pollution-particulate matter —Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2019)	8.5		7.4	6.8	
Drinking Water Violations —Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2021)	No				
Severe Housing Problems —% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2015-2019)	12%	11-13%	17%	14%	
Driving Alone to Work —% of the workforce that drives alone to work. (2017-2021)	79%	78-81%	73%	79%	
Long Commute-driving alone —Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2017-2021)	36%	33-39%	37%	33%	

* 10th/90th percentile, i.e., only 10% are better. Note: Blank values reflect unreliable or missing data. **Data should not be compared with prior years due to changes in definition/methods

Additional Indicators – Hillsdale County

	HILLSDALE COUNTY	MI
Demographics**		
Population (2020)	45,546	10,050,811
% Below 18 Years of Age (2020)	21.3%	21.4%
% 65 and Older (2020)	20.7%	18.1%
% Non-Hispanic African American (2020)	0.7%	13.8%
% American Indian & Alaskan Native (2020)	0.6%	0.7%
% Asian (2020)	0.5%	3.4%
% Native Hawaiian/Other Pacific Islander (2020)	0.0%	0%
% Hispanic (2020)	2.7%	5.6%
% Non-Hispanic White (2020)	94.0%	74.2%
% not proficient in English (2020)	1.0%	1.0%
% Females (2020)	49.9%	50.4%
% Rural (2020)	69.1%	25.4%
Health Outcomes		
Diabetes Prevalence (2020)	10%	11%
HIV Prevalence Rate (2020)	52	199
Premature Age-Adjusted Mortality (2018-2020)	400	380
Frequent Physical Distress (2020)	11%	11%
Frequent Mental Distress (2020)	18%	17%
Infant Mortality (2014-2020)	6	6
Child Mortality (2017-20)	70	50
Health Behaviors		
Food Insecurity (2020)	14%	12%
Limited Access to Healthy Foods (2019)	2%	6%
Drug Overdose Deaths (2018-2020)	15	26
Motor Vehicle Crash Deaths (2013-19)	17	10
Insufficient Sleep** (2020)	36%	36%
Health Care		
Uninsured Adults (2020)	9%	8%
Uninsured Children (2020)	3%	3%
Other Primary Care Providers (2022)	1,630:1	760:1
Social & Economic Factors		
Disconnected Youth (2017-2021)	10%	7%
Median Household Income (2021)	\$54,900	\$63,400
Children Eligible for Free Lunch (2021-2021)	56%	51%
Residential Segregation–black/white (2017-2021)		73
Homicides (2014-2020)		6
Firearm Fatalities (2016-2020)	13	13

What Does the Data Mean for My County?

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- **Neonatal health care costs related to smoking** are equivalent to **\$704 for each maternal smoker**. Randomized controlled trials indicate that a smoking cessation program for pregnant women can save as much as **\$6 for each \$1 spent** (CDC).
- The OMB has shown that every **\$1 spent on WIC** results in a savings of **\$1.77 to \$3.13 in health care costs**, primarily attributed to reduced rates of low birth weight and improved rates of immunizations.
- Investment of **\$10** per person, per year in proven community-based programs that help people increase their physical activity, eat better, and avoid smoking and other tobacco use could save the country more than **\$16 billion** annually within five years. This is a return of **\$5.60** for every **\$1** invested. (Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities, Trust for America's Health.)

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County Health Rankings – St. Joseph County 2023

The Robert Wood Johnson Foundation is collaborating with the University of Wisconsin Population Health Institute to develop these Rankings for each state's counties.



	ST. JOSEPH COUNTY	ERROR MARGIN	US	MI	RANK (OF 83)
HEALTH OUTCOMES					63
<i>Length of Life</i>					68
Premature Death—Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2018-2020)	9,200	8,300-10,100	7,300	7,900	
<i>Quality of Life</i>					44
Poor or Fair Health**—% of adults reporting fair or poor health. (age-adjusted) (2020)	16%	14-18%	12%	15%	
Poor Physical Health Days**—Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2020)	3.6	3.3-4.0	3.0	3.3	
Poor Mental Health Days**—Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2020)	5.3	5.0-5.6	4.4	5.3	
Low Birth Weight—% of live births with low birth weight (< 2500 grams). (2014-2020)	7%	6-8%	8%	9%	
HEALTH FACTORS					57
<i>Health Behaviors</i>					50
Adult Smoking**—% of adults who are current smokers. (2020)	23%	19-26%	16%	19%	
Adult Obesity—% of adults that report a BMI >=30. (2020)	37%	35-38%	32%	35%	
Food Environment Index—Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019, 2020)	7.4		7.0	7.0	
Physical Inactivity—% of adults aged 20 and over reporting no leisure-time physical activity. (2020)	23%	21-33%	22%	20%	
Access to Exercise Opportunities—% of population with adequate access to locations for physical activity. (2020, 2022)	65%		84%	85%	
Excessive Drinking**—% of adults reporting binge or heaving drinking. (2020)	21%	20-22%	19%	20%	
Alcohol-impaired Driving Deaths—% of driving deaths with alcohol involvement. (2016-2020)	26%	20-33%	27%	29%	
Sexually Transmitted Infections—No. of newly diagnosed Chlamydia cases per 100,000 population. (2020)	280.5		481.3	448.3	
Teen Births—No. of births per 1,000 female population, ages 15-19 years. (2014-2020)	29	26-32	19	17	
<i>Clinical Care</i>					74
Uninsured—% of population under age 65 without health insurance. (2020)	10%	9-12%	10%	6%	
Primary Care Physicians—Ratio of population to primary care physicians. (2020)	3,800:1		1,310:1	1,240:1	
Dentists—Ratio of population to dentists. (2021)	2,890:1		1,380:1	1,270:1	
Mental Health Providers—Ratio of population to mental health providers. (2022)	530:1		340:1	320:1	
Preventable Hospital Stays—Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2020)	2,079		2,807	3,324	
Mammography Screening—% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2020)	34%		37%	38%	
Flu vaccinations—% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2020)	51%		51%	50%	
<i>Social & Economic Factors</i>					45
High School completion—% of adults ages 25 and over with a high school diploma or equivalent. (2017-2021)	87%	85-88%	89%	92%	
Some College—% of adults aged 25-44 years with some post-secondary education. (2017-21)	50%	46-53%	67%	69%	
Unemployment—% of population age 16 and older unemployed but seeking work. (2021)	5.1%		5.4%	5.9%	
Children in Poverty—% of children under age 18 in poverty. (2021)	17%	12-23%	17%	18%	
Income Inequality—ratio of household income at the 80th percentile to income at the 20th percentile. (2017-2021)	3.8	3.6-4.0	3.9	4.6	
Children in Single-parent Households—% of children that live in a household headed by single parent. (2017-2021)	17%	14-20%	25%	25%	
Social Associations—No. of membership associations per 10,000 population. (2020)	12.7		9.1	9.6	
Injury Deaths—No. of deaths due to injury per 100,000 population. (2016-2020)	94	83-104	76	76	
<i>Physical Environment</i>					70
Air Pollution-particulate matter—Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2019)	8.6		7.4	6.8	
Drinking Water Violations—Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2019)	Yes				
Severe Housing Problems—% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2015-2019)	12%	11-14%	17%	14%	
Driving Alone to Work—% of the workforce that drives alone to work. (2017-2021)	74%	72-76%	73%	79%	
Long Commute-driving alone —Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2017-2021)	29%	27-32%	37%	33%	

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Additional Indicators – St. Joseph County

	ST. JOSEPH COUNTY	MI
Demographics		
Population (2021)	60,758	10,050,811
% Below 18 Years of Age (2021)	24.4%	21.4%
% 65 and Older (2021)	18.7%	18.1%
% Non-Hispanic African (2021)	2.3%	13.8%
% American Indian & Alaskan Native (2021)	0.6%	0.7%
% Asian (2021)	0.7%	3.4%
% Native Hawaiian/Other Pacific Islander (2021)	0.0%	0%
% Hispanic (2021)	8.8%	5.6%
% Non-Hispanic White (2021)	85.5%	74.2%
% not proficient in English (2017-2021)	2.0%	1.0%
% Females (2021)	49.6%	50.4
% Rural (2020)	54.4%	25.4%
Health Outcomes		
Diabetes Prevalence (2020)	10%	11%
HIV Prevalence Rate (2020)	79	199
Premature Age-Adjusted Mortality (2018-2020)	430	380
Frequent Physical Distress** (2020)	12%	11%
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Child Mortality (2017-2020)	60	50
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Health Care		
Uninsured Adults (2020)	13%	8%
Uninsured Children (2020)	4%	3%
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Social & Economic Factors		
Disconnected Youth (2017-2021)	7%	7%
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MEDICAL DIRECTOR'S REPORT

APRIL 2023

1. Morning checks on CDC website to follow COVID and influenza.
2. Watching communicable disease numbers in our counties.
3. Director and Administrator meetings, in person and zoom.
4. Meetings via zoom and teleconferences. Most recent call discussed candida auris in extended care facilities with some spread from home to home, blastomycosis, overdoses in Kalamazoo, abortion medication and law suits.
5. Continue to review and sign standing orders.
6. Working on Emergency Preparedness certifications.
7. Two spring classes – Culture/Nutrition and Health and Public Health Leadership (almost complete).
8. Lansing visits with Senators and Representatives., April 11.

BLASTOMYCOSIS

Blastomycosis is an uncommon, but potentially serious fungal infection. It primarily affects the lungs, and is caused by the fungus *Blastomyces dermatitidis*. The signs and symptoms of illness that can result from exposure to this soil organism are variable. People can get blastomycosis after breathing in the microscopic fungal spores from the air, often after participating in activities that disturb the soil.

Where is blastomycosis most prevalent?

These fungi can be found in moist soils, particularly in wooded areas and along waterways. Blastomycosis occurs most often in people living in Ontario, Manitoba, and the south-central, south-eastern, and the mid-western United States.

How common is blastomycosis?

Overall, blastomycosis is uncommon. Most cases occur in the United States and Canada. In states where blastomycosis is reportable, yearly incidence rates are approximately 1 to 2 cases per 100,000 population.

How many people have died from blastomycosis?

One analysis found 1,216 deaths related to the illness from 1990 to 2010.

What time of year does blastomycosis occur?

As with human cases, blastomycosis is diagnosed more often in the **fall and early winter**. This is likely due to exposure to the soil-borne fungus in the summer, and an incubation period of 1-3 months.

What is the fastest way to diagnose blastomycosis?

The fastest way to diagnose blastomycosis is direct identification of the broad-based budding yeast forms under microscopy. For most specimens, direct visualization should precede culture to confirm the diagnosis.

Nearly 100 confirmed or probable cases of blastomycosis and one death have been identified in Michigan's Delta and Menominee counties, according to the local health department, and they are believed to be associated with a paper mill in the town of Escanaba.

Personal Health and Disease Prevention: April 27, 2023

Communicable Disease:

It's tick season! – MDHHS [press release](#) educating Michigan residents about how to stay healthy during tick season.

Expert tick identification is available free of charge for Michigan residents through the Michigan Department of Health and Human Services (MDHHS). You can either email a picture of the tick to MDHHS-Bugs@michigan.gov, or you can mail the tick to the MDHHS for identification. MDHHS will identify the tick but they won't test for disease agents.

Marburg Disease: disease outbreaks in Equatorial Guinea and Tanzania. CDC obtains contact information from U.S. Customs and Border Protection for passengers boarding a flight to the U.S. from these locations. Currently, CDC does not recommend risk assessments or monitoring for travelers returning.

[Marburg virus disease](#) is a rare and deadly disease that has, at times, caused outbreaks in several African countries. It is spread by contact with blood or body fluids of a person infected with or who has died from Marburg. It is also spread by contact with contaminated objects (such as clothing, bedding, needles, and medical equipment) or by contact with animals, such as bats and nonhuman primates, who are infected with Marburg virus. Marburg is a viral hemorrhagic fever. Symptoms include fever, chills, headache, muscle pain, rash, sore throat, diarrhea, vomiting, stomach pain, chest pain, and unexplained bleeding or bruising. Infection with Marburg virus is often fatal. There are no approved vaccines or treatments for Marburg. (source: CDC.gov)

H5N1: March 13th detection in Eaton County and March 23rd detection in Lapeer County

Mpox: Only 4 cases reported in Michigan so far in 2023.

Immunizations/STI/HIV:

The [U.S. Food and Drug Administration \(FDA\)](#) amended the emergency use authorizations (EUAs) of the Moderna and Pfizer-BioNTech COVID-19 bivalent mRNA vaccines to simplify the vaccination schedule for most individuals. This action includes authorizing the current bivalent vaccines to be used for all doses administered to individuals 6 months of age and older, including for an additional dose or doses for certain populations. The monovalent Moderna and Pfizer-BioNTech COVID-19 vaccines are no longer authorized for use in the United States.

The CDC and ACIP will meet to discuss updates to the clinical consideration for Covid-19 vaccines and how to proceed moving forward.

Women, Infant, and Children (WIC):

In-person appointments for our WIC clients are now available to all WIC categories.

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

We continue assisting with dental prevention and the heavy referral process with our Smiles on Wheels and MCDC collaboration.

We still do not have final confirmation on the proposed age expansion of 26 years for the CSHCS program.

Kali Nichols MPH

Personal Health & Disease Prevention Director

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

March-23

Confirmed & Probable Case Totals	2022-2023				FYTD 2022-2023				2021-2022 FYTD			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	5	1	-	6	12	14	-	26	7	29	-	36
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	1	1	-	2	8	6	2	16	6	4	3	13
Chicken Pox	-	-	-	-	-	1	1	2	-	-	-	-
Chlamydia	16	9	19	44	63	48	102	213	59	47	92	198
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	1	1
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	1	1	1	-	-	1
Cryptosporidiosis	2	-	1	3	2	2	2	6	1	-	1	2
Encephalitis - Primary	-	-	-	-	-	-	-	-	-	-	-	-
Giardiasis	-	1	1	2	-	1	2	3	-	1	3	4
Gonorrhea	2	6	6	14	7	15	27	49	20	19	54	93
H. Influenzae Disease - Inv.	-	-	-	-	1	-	-	1	3	-	-	3
Hepatitis B - Acute	-	-	-	-	-	-	-	-	2	-	-	2
Hepatitis B - Chronic	-	-	-	-	1	-	-	1	1	-	1	2
Hepatitis C - Acute	1	-	-	1	1	-	-	1	2	-	-	2
Hepatitis C - Chronic	2	1	2	5	9	7	12	28	11	1	4	16
Hepatitis C Unknown	-	-	-	-	-	-	-	-	-	-	-	-
Histoplasmosis	-	-	-	-	2	-	-	2	1	-	1	2
HIV/AIDS	-	-	-	-	-	-	-	-	2	-	2	4
Influenza	-	-	2	2	394	241	283	918	98	135	84	317
Kawasaki	-	-	-	-	-	-	-	-	-	-	-	-
Legionellosis	-	-	-	-	-	-	1	1	-	1	-	1
Listeriosis	-	-	1	1	-	-	1	1	-	-	-	-
Lyme Disease	-	1	1	2	-	1	1	2	-	1	1	2
Measles	-	-	-	-	-	-	-	-	-	1	-	1
Menengitis - Aseptic	-	-	-	-	1	-	-	1	-	-	1	1
Menengitis - Bacterial	-	-	-	-	1	-	-	1	-	-	-	-
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	-	-	-	1	-	-	1	3	3	2	8
Norovirus	-	1	-	1	-	1	-	1	1	-	2	3
Novel Coronavirus	90	140	72	302	859	951	808	2618	5,272	4,799	6,045	16116
Pertussis	-	-	-	-	-	2	-	2	-	4	-	4
Salmonellosis	1	-	1	2	3	1	1	5	2	1	1	4
Scabies	1	-	-	1	2	-	-	2	-	-	-	-
Shiga Toxin-prod. (STEC)	-	-	-	-	1	-	1	2	1	1	-	2
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	1	-	1	-	1	-	1	1	-	-	1
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	1	2	3	-	3	4	7	-	-	-	-
Strep Pneumonia Inv Ds.	-	-	1	1	3	2	7	12	1	6	2	9
Syphilis - Primary	-	-	-	-	-	1	-	1	1	-	-	1

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

	Mar-23					YTD 2022-2023					YTD 2021-2022				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
CHILD IMMUNIZATIONS															
# Vaccines Given CHA	109	122	26	47	304	800	856	100	507	2,263	834	949	-	676	2,459
All VFC Doses Given	633	388	-	734	1,755	4,677	2,357	-	4,595	11,629	4,393	2,492	-	4,282	11,167
Waivers	6	7	-	4	17	62	79	6	39	186	44	81	11	48	184
ADULT IMMUNIZATIONS															
# Vaccines Given	58	22	3	18	101	909	431	11	306	1,657	3,168	1,514	-	1,273	5,955
All AVP Doses Given	14	2	-	10	26	80	78	-	187	345	45	272	-	95	412
COMMUNICABLE DISEASE															
TB Tests Done	7	8	-	1	16	36	47	-	8	91	29	62	-	10	101
STD treatments	-	-	1	10	11	1	4	2	33	40	18	21	2	61	102
HIV Testing	-	1	-	1	2	-	6	1	12	19	-	-	2	17	19
ENROLLMENTS															
Medicaid & Michild	-	1	-	4	5	7	4	-	10	21	9	1	-	2	12
REFERRAL SERVICE															
MCDC Referrals	5	17	10	3	35	41	79	135	256	511	44	-	58	101	203
MIHP referrals	3	-	12	25	40	29	18	108	116	271	180	23	100	129	432
Hearing Screens															
Pre-school	67	142	-	249	458	129	364	-	487	980	158	301	64	194	717
School Age	-	188	-	50	238	1,031	1,058	-	1,596	3,685	873	700	489	1,615	3,677
Vision Screens															
Pre-school	74	164	-	265	503	157	413	-	364	934	188	337	-	244	769
School Age	-	363	-	313	676	2,677	2,187	-	3,961	8,825	2,897	1,660	-	3,775	8,332
Children's Special Health Care Services															
Diagnostics	1	-	-	-	1	9	2	-	-	11	11	7	-	3	21
Assessments-Renewal	14	21	-	18	53	96	113	-	133	342	96	109	-	113	318
Assessments-New	14	9	-	6	29	14	25	-	32	71	7	28	-	33	68

State Participation/Enrollment Ratio [2]:

Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Curr Year P/E Ratio (last 12 months)
94.7%	94.7%	94.9%	95.1%	94.9%	94.5%

Months	Enrollment [3]	Initial Participation [4]	Closeout Participation [5]	% Change in Participation [6]	Participation/ Enrollment Ratio[2]
Oct / 2021	4,026	3,485	3,545		86.56%
Nov / 2021	3,978	3,319	3,413	-3.72%	83.43%
Dec / 2021	3,904	3,293	3,346	-1.96%	84.35%
Jan / 2022	3,931	3,407	3,470	3.71%	86.67%
Feb / 2022	3,932	3,405	3,487	0.49%	86.60%
Mar / 2022	4,020	3,585	3,616	3.70%	89.18%
Apr / 2022	3,974	3,583	3,643	0.75%	90.16%
May / 2022	4,024	3,628	3,674	0.85%	90.16%
Jun / 2022	4,082	3,760	3,802	3.48%	92.11%
Jul / 2022	4,073	3,702	3,782	-0.53%	90.89%
Aug / 2022	4,129	3,783	3,841	1.56%	91.62%
Sep / 2022	4,140	3,849	3,871	0.78%	92.97%
Oct / 2022	4,125	3,844	3,866	-0.13%	93.19%
Nov / 2022	4,149	3,836	3,892	0.67%	92.46%
Dec / 2022	4,161	3,819	3,874	-0.46%	91.78%
Jan / 2023	4,266	3,984	4,027	3.95%	93.39%
Feb / 2023	4,283	3,938	4,005	-0.55%	91.94%
Mar / 2023	4,325	4,010	(est[7]) 4,135		92.72%
Apr / 2023	0	0	(est[7]) 4,076		
May / 2023	0	0	0		
Jun / 2023	0	0	0		
Jul / 2023	0	0	0		
Aug / 2023	0	0	0		
Sep / 2023	0	0	0		

Total (Year to date)	25,309	23,431	19,664		
Curr Year Avg	4,218	3,905	3,933	603.73%	90.08%
Months with Count	6	6	5	5	6
Average to Base % [8]		93.9%	94.52%		
Last yrs Base % [9]		82.9%	84.22%		
Last yrs Average	4,018	3,567	3,624		88.77%

Estimated average participation for current year to date:

Actual average monthly participation current year to date [10]:

3,982
3,933

Funding Allocation Information

Total Funding Allocation:	\$908,156
Assigned Funding Participation Count [11]:	
Current Yr Base:	4,161
Previous Yr Base:	4,303

- [1] **Caseload:** The term used to refer to the number of clients being served in a given time. This is comprised of both enrollment and participation.
- [2] **Participation/Enrollment Ratio:** The number of clients participating divided by the number enrolled.
- [3] **Enrollment:** Number of clients certified to receive benefits in the given month. Final counts available for the month that just ended.
- [4] **Initial Participation:** Number of clients receiving benefits at the beginning of the month. Comparison between this and the closeout participation is indicative of the number of participants added over the course of the month. This can be used to inform staff of participation numbers at the start of the month and enable them to proactively improve participation before it is finalized.
- [5] **Closeout Participation:** Final number of clients who received benefits for the given month. Finalized approx. 5 weeks after the month ends.
- [6] **% Change in Participation:** The % difference in closeout participation when compared to the previous month.
- [7] **est:** It is the estimated participation for the given month. This is available prior to the closeout participation being available. It is a calculated value based on prior months' participation. **NOTE: Last two non 0 values are "Estimates"**
- [8] **Average to Base %:** Compares the current year average participation to the current year base.
- [9] **Last yrs Base %:** Compares last year's average participation to the last year base.
- [10] **Actual Avg. Part. For current year to date:** It is an average that includes the participation counts for all months in the current year where participation has been finalized.
- [11] **Assigned Funding Participant Count:** The value used in the calculation to determine the funding allocated to the local agency for the fiscal year. For additional details, refer to your agency's annual funding allocation letter.

**Branch-Hillsdale-St. Joseph Community Health Agency
Environmental Public Health Services
Report for the April 27, 2023 Board of Health Meeting
Prepared by Paul Andriacchi R.E.H.S, Director of Environmental Health**

Food Service Sanitation

The accreditation team from MDARD did their review of our Food Program on April 17. This review was moved up a week from the accreditation schedule for the rest of the agency due to a scheduling conflict with MDARD staff. The accreditation review process was much different for this cycle as there was no determination of met or unmet for the various minimum program requirements (MPR's). Being the restart of accreditation after the pandemic, the focus of this cycle would be on needs assessment, providing capacity building assistance, and identifying and developing support to meet the needs of the local health departments. We had a very positive experience with the review, it allowed us to discuss some of the challenges we face at the LHD in fulfilling the expectations of the MPR's with feedback from the MDARD staff on strategies to help keep us on track. Through some of these discussions we learned that we were actually being a little over-critical of ourselves when we were doing our self-assessments. That's not necessarily a bad thing because we were holding ourselves to a higher standard but it was a learning experience for us. In the end, the MDARD staff was very pleased with their findings of the food program and complimented us on the manner in which our food program is managed.

I would personally like to recognize our entire food program team for a job well done! Our team consists of: Joe Frazier- food program manager and EH Supervisor, Carrie Southern-food sanitarian- Branch County, Barb Keith-food sanitarian - St. Joseph County and Annalisa Rice-food sanitarian - Hillsdale County.

Other Programs

Additional PFAS sampling from homes near the Westside Landfill in Three Rivers was done in late March. A total of nine wells were tested in this round of sampling. Two of the wells tested had no PFAS chemicals detected in the samples. There were five wells that had PFAS detections but those detections were below the health limits and one additional well had detections that were over the health limit. The well with the detection over the health limit is one that was previously tested in 2022 and it had an exceedance then as well. This is the home that had already been equipped with a PFAS filter. A sample of the treated water from this well was also taken and no PFAS chemicals were detected. I am currently in the process of making arrangements with a plumbing contractor to install PFAS filters for the 5 homes that had detections. Although these 5 wells do not have PFAS levels in exceedance of the health limits, the fact there is one well with an exceedance in the area, the Michigan Department of Health and Human Services (MDHHS) has recommended filters be installed. There is one more home that MDHHS is going to try and sample but they have yet to receive an access agreement from the owner giving permission to take the sample.

EH Service Statistics Report

BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

ENVIRONMENTAL HEALTH SERVICE REPORT 2022/2023

	MARCH				YTD 2022/2023				YTD 2021/2022			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
WELL/SEWAGE SYSTEM EVAL.	-	1	-	1	4	1	-	5	-	-	10	10
CHANGE OF USE EVALUATIONS - FIELD	5	2	6	13	13	23	27	63	7	19	16	42
CHANGE OF USE EVALUATIONS - OFFICE	4	1	20	25	24	9	45	78	8	16	46	70
ON-SITE SEWAGE DISPOSAL												
PERMITS NEW CONSTRUCTION	8	5	8	21	26	23	37	86	28	23	37	88
REPAIR/REPLACEMENT	3	6	12	21	20	21	40	81	31	22	31	84
VACANT LAND EVALUATION	2	3	-	5	5	7	5	17	1	8	11	20
PERMITS DENIED	-	-	-	-	-	-	-	-	1	-	-	1
TOTAL	13	14	20	47	51	51	82	184	50	53	79	193
SEWAGE PERMITS INSPECTED	1	5	5	11	40	63	64	165	32	42	53	121
WELL PERMITS ISSUED	14	12	14	40	76	49	93	218	42	56	142	240
WELL PERMITS INSPECTED	2	6	7	15	74	49	95	218	57	67	129	253
FOOD SERVICE INSPECTION												
PERMANENT	24	4	42	70	119	83	171	373	114	128	148	390
NEW OWNER / NEW ESTABLISHMENT	1	2	-	3	4	6	8	18	3	5	7	15
FOLLOW-UP INSPECTION	-	-	2	2	7	1	10	18	9	2	9	20
TEMPORARY	-	1	1	2	5	3	7	15	3	8	7	18
MOBILE/STFU	1	1	3	5	9	7	5	21	4	1	7	12
PLAN REVIEW APPLICATIONS	1	-	1	2	5	5	7	17	5	2	10	17
FOOD RELATED COMPLAINTS	-	1	2	3	7	8	5	20	5	5	2	12
FOODBORNE ILLNESS INVESTIGATED	-	-	-	-	-	-	-	-	1	-	-	1
FOOD CLASSES												
MANAGEMENT CERTIFICATION CLASS	-	-	12	12	n/a	n/a	n/a	69	n/a	n/a	n/a	-
CAMPGROUND INSPECTION	-	-	-	-	-	-	-	-	-	-	-	-
NON-COMM WATER SUPPLY INSP.	3	2	5	10	8	2	5	15	9	4	3	16
SWIMMING POOL INSPECTION	-	-	-	-	9	5	-	14	6	4	-	10
PROPOSED SUBDIVISION REVIEW	-	-	-	-	-	-	-	-	-	-	-	-
SEPTIC TANK CLEANER	3	-	1	4	-	1	-	1	-	-	-	-
DHS LICENSED FACILITY INSP.	-	2	1	3	4	12	8	24	7	15	18	40
COMPLAINT INVESTIGATIONS	8	2	2	10	19	8	4	31	8	9	11	28
LONG TERM MONITORING	-	-	-	-	-	-	14	14	-	-	-	-
BODY ART FACILITY INSPECTIONS	-	-	3	3	2	5	2	9	3	2	-	6

Inspection Type Count by County

For Date Range: 3/1/2023 - 3/31/2023 and Program: Food Service

County	Inspection Type	Count
Branch	Consult	2
	Pre-opening/New	1
	Routine	24
	STFU/Mobile	1
Hillsdale	Complaint	1
	Pre-opening/New	3
	Routine	4
	STFU/Mobile	1
	Temporary	1
St. Joseph	Complaint	2
	Consult	1
	Follow-Up	2
	Progress Note	4
	Routine	42
	STFU/Mobile	3
	Temporary	1
	Total number of inspections	93

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Inspection Type Count

For Date Range: 3/1/2023 - 3/31/2023 and Program: Food Service

Inspection Type	Count
Complaint	3
Consult	3
Follow-Up	2
Pre-opening/New	4
Progress Note	4
Routine	70
STFU/Mobile	5
Temporary	2
Total number of inspections	93

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Establishment Inspection Report

For Date Range: 3/1/2023 - 3/31/2023 and Program: Food Service

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
American Dream Italian Steakhouse	Coldwater	3/9/2023	Pre-opening/New	0	0	0	3
ANDERSON ELEMENTARY SCHOOL	BRONSON	3/21/2023	Routine	0	0	0	0
Angel's Concessions	Sturgis	3/16/2023	STFU/Mobile	0	0	0	0
APPLEBEE'S	Sturgis	3/8/2023	Routine	1	1	2	0
Azteca Mexican Restaurant	Bronson	3/21/2023	Routine	1	2	2	3
BIGGBY COFFEE #254 V&K CAFE DBA	COLDWATER	3/1/2023	Routine	1	0	1	4
BILL'S GRILL HOUSE	COLDWATER	3/2/2023	Routine	1	0	0	5
BOB EVAN RESTAURANTS LLC #2035	COLDWATER	3/16/2023	Consult	0	0	0	0
Bowman Place	Three Rivers	3/7/2023	Routine	0	0	0	1
Bread and Butter Kitchen	Sturgis	3/8/2023	Routine	2	0	2	1
BROADWAY GRILLE	UNION CITY	3/15/2023	Routine	2	0	2	5
BRONSON DISTRICT - Chicago St School	BRONSON	3/21/2023	Routine	0	0	0	1
BRONSON HIGH SCHOOL	BRONSON	3/21/2023	Routine	0	0	0	0
BUFFALO WILD WINGS (STURGIS)	STURGIS	3/28/2023	Routine	0	0	0	2
Burger King #1416	Three Rivers	3/15/2023	Follow-Up	0	0	0	4
Burger King #1416	Three Rivers	3/20/2023	Complaint	0	0	0	0
Cherries on Top	Litchfield	3/30/2023	Pre-opening/New	0	0	0	2
COLDWATER GARDEN	COLDWATER	3/13/2023	Routine	0	1	1	2
COLDWATER MASONIC TEMPLE BUILDING ASSOC	COLDWATER	3/17/2023	Routine	1	0	1	0
COLON ELEM SCHOOL	Sturgis	3/28/2023	Routine	0	0	0	0
COLON HIGH SCHOOL	COLON	3/28/2023	Routine	0	0	0	0
CONGRESS SCHOOL	STURGIS	3/28/2023	Routine	0	0	0	0
CONSTANTINE COMMUNITY SOUP KITCHEN	Constantine	3/13/2023	Progress Note	0	0	0	0
Country Table Restaurant	White Pigeon	3/24/2023	Routine	0	1	1	1
Creative Dining Services/Abbott Labs	Sturgis	3/28/2023	Routine	0	0	0	1
Cronkwhite Beverage Catering	Coldwater	3/9/2023	STFU/Mobile	0	0	0	0
DAVINCI'S	STURGIS	3/22/2023	Routine	1	0	1	6

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Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
Deadlift Coffee Company LLC	Three Rivers	3/30/2023	Routine	0	0	0	0
DEARTH COMMUNITY CENTER	Coldwater	3/9/2023	Routine	0	0	0	0
Dickey's	Coldwater	3/3/2023	Consult	0	0	0	0
DZ Delicatus	Hillsdale	3/22/2023	Pre-opening/New	0	0	0	0
ELKS LODGE #1248	THREE RIVERS	3/21/2023	Routine	0	0	0	0
ENRICHMENT CENTER	Sturgis	3/22/2023	Routine	0	0	0	0
Factoryville Bible Church	Athens	3/18/2023	Temporary	0	0	0	0
FAMILY AFFAIR RESTAURANT	MENDON	3/22/2023	Routine	0	0	0	0
FIRM FOUNDATION MINISTRIES	CENTREVILLE	3/14/2023	Routine	0	0	0	0
FIRST CHURCH OF GOD	Three Rivers	3/20/2023	Routine	0	0	0	0
FIRST PRESBYTERIAN CHURCH	THREE RIVERS	3/29/2023	Routine	0	1	0	0
FIRST UNITED METHODIST CHURCH	Three Rivers	3/29/2023	Routine	0	2	0	1
Frank Beck Chevrolet	Jonesville	3/23/2023	Temporary	0	0	0	0
Gibby's	Mendon	3/22/2023	Routine	0	0	0	0
HILLCREST BAR & GRILL	Sturgis	3/16/2023	Routine	0	0	0	3
HUNGRY HOWIE'S	HILLSDALE	3/15/2023	Routine	1	1	1	3
Jaspere's Pizza	Mendon	3/22/2023	Routine	0	0	0	0
Jaywalker Restaurant	Mottville	3/31/2023	Routine	1	0	0	0
JEFFERSON ELEMENTARY SCHOOL	COLDWATER	3/20/2023	Routine	0	0	0	1
Kernal Poppers	White Pigeon	3/24/2023	STFU/Mobile	0	0	0	0
LIL' LOUIE'S PIZZA AND SUBS LLC	Centreville	3/14/2023	Routine	0	0	0	0
Main Street Smokehouse	Mendon	3/30/2023	Routine	0	0	0	0
Mancino's of Sturgis	Sturgis	3/14/2023	Routine	0	0	0	0
Mavericks Pizza Hangar	Cement City	3/7/2023	Pre-opening/New	0	0	0	0
McDonald's of Centreville	Centreville	3/14/2023	Routine	0	0	0	0
McDonald's of White Pigeon	White Pigeon	3/9/2023	Progress Note	0	0	0	0
MEEKS MILL CAFE	Constantine	3/13/2023	Routine	1	0	1	0
MEL'S 50s DINER	UNION CITY	3/15/2023	Routine	0	0	0	5
MESSIAH LUTHERAN CHURCH	Constantine	3/13/2023	Routine	0	1	0	0

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Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
MYSTIC STAR #354/MASONIC TEMPLE	BRONSON	3/29/2023	Routine	0	0	0	1
Nutrition Epression		3/7/2023	Routine	0	0	0	0
OASIS RESTAURANT	Three Rivers	3/3/2023	Complaint	0	0	0	0
OSCAR BROWN'S TAVERN	COLDWATER	3/2/2023	Routine	1	0	1	3
OSCAR BROWN'S TAVERN	COLDWATER	3/2/2023	Routine	0	0	0	0
PANSOPHIA ACADEMY	COLDWATER	3/20/2023	Routine	0	0	0	0
Pipers Pizza	Sturgis	3/14/2023	Follow-Up	6	2	6	4
PIZZA HUT	HILLSDALE	3/15/2023	Routine	0	0	0	2
Punjab Group Mendon Inc/Mendon Quick Sto	Mendon	3/30/2023	Routine	0	0	0	1
Refuge Coffee House LLC	Quincy	3/13/2023	Routine	0	0	0	2
River Trade Brewing Co	Constantine	3/7/2023	Progress Note	0	0	0	0
Royal Cafe	CENTREVILLE	3/14/2023	Routine	0	0	0	1
RYAN ELEMENTARY SCHOOL	BRONSON	3/21/2023	Routine	1	0	1	0
SAM'S PLACE	THREE RIVERS	3/7/2023	Routine	0	0	0	0
Samuel Mancino's Restaurant	White Pigeon	3/24/2023	Progress Note	0	0	0	0
Samuel Mancino's Restaurant	White Pigeon	3/28/2023	Routine	0	0	0	0
ST MARY'S ASSUMPTION CHURCH & SCHOOL	BRONSON	3/21/2023	Routine	0	0	0	0
ST. CHARLES SCHOOL	COLDWATER	3/20/2023	Routine	0	1	1	1
Starbucks Coffee Sturgis	Sturgis	3/22/2023	Routine	0	0	0	0
Stateline Bar	White Pigeon	3/31/2023	Routine	0	0	0	1
STURGES-YOUNG CENTER FOR THE ARTS	Sturgis	3/14/2023	Routine	0	0	0	2
Sturgis Biggby Coffee #484	Sturgis	3/22/2023	Routine	0	0	0	1
Subway - Hillsdale	Hillsdale	3/15/2023	Routine	0	0	0	0
Taco Bell #33023	Three Rivers	3/15/2023	Routine	0	0	0	2
TACO BELL #37166	Hillsdale	3/15/2023	Routine	0	0	0	0
Tacos Guerrerenses	Constantine	3/13/2023	Consult	0	0	0	0
Taqueria El Tejano	Three Rivers	3/8/2023	STFU/Mobile	0	0	0	0
THE HUNT CLUB OF HILLSDALE	HILLSDALE	3/17/2023	Complaint	1	0	1	0
THREE RIVERS PIZZA HUT	THREE RIVERS	3/21/2023	Routine	0	0	0	1

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Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
TOMAHAWK TAVERN	White Pigeon	3/13/2023	Routine	0	0	0	0
UNION CITY ELEMENTARY SCHOOL	UNION CITY	3/15/2023	Routine	0	0	0	0
UNION CITY HIGH SCHOOL	UNION CITY-PT	3/15/2023	Routine	0	0	0	0
UNION CITY MIDDLE SCHOOL	UNION CITY	3/15/2023	Routine	0	0	0	0
WENDY'S--STURGIS	Sturgis	3/14/2023	Routine	0	0	0	4
WENZEL SCHOOL	STURGIS	3/28/2023	Routine	0	0	0	0
Wieners and Tacos on the Fly	Hillsdale	3/17/2023	STFU/Mobile	0	0	0	0
YOUTH FOR CHRIST	Sturgis	3/8/2023	Routine	0	0	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.



Enclosures:

1. Services to Victims of Elder Abuse – 2nd quarter report
 2. Older Michiganiaian's Day Advocacy Platform – May 17th in Lansing
-

Updates:

1. Services to Victims of Elder Abuse Program Updates:
 - Branch and St. Joseph Co. Interdisciplinary Teams continue to meet successfully. Great presentations recently from Adult Protective Services and the MI Elder Justice Coalition.
 - Our search continues for a Branch County Elder Abuse Victim Specialist...
 - 2nd quarter programmatic report attached --- Numbers are UP!
2. AAA Advisory Committee Updates: Advisory Committee Bylaws are before you today for action. Thank you to Commissioner Leininger and Commissioner Matthew for your time and suggestions!
3. OLDER MICHIGANIAN'S DAY ** SAVE THE DATE: May 17, 2023 **
The OMD advocacy platform is attached. We hope you can join us in person on the Capital lawn on May 17th! The event will be "livestreamed" starting at 11AM if you can't join us. Please let me know if you are interested in attending OMD in Lansing – it's always an exciting day!
4. FY2023 Provider Budget Amendments: We're working with providers to gather data and feedback to help inform our budget amendments for this current fiscal year. We have our full year funding picture and will also work with the CHA finance team to develop recommendations for provider budget amendments. More to come!
5. FY2023 Provider Monitoring Visits: On-site visits with our providers start in May! As part of our grant and contract monitoring responsibility our Program Specialist, Nichole, and I will be going to each of our contracted service providers to observe programs and review policies, procedures and adherence to ACLS Bureau Operating Standards. In addition to the programmatic review, our CHA finance team will also perform a fiscal assessment. We are quite excited to be on-site after 3 years of "virtual" assessments! A summary of these visits is provided to the Board once all of them are completed (typically by the end of the summer).
6. FY2024 Annual Implementation Plan (AIP) process has begun. Our goal is to present the DRAFT FY24 AIP to the Finance and PPA Committees at their May meetings (5/15 & 5/17). As I've shared previously, we're not anticipating any major increases or decreases in funding or to our scope of services. Please mark your calendar and plan to attend the AIP Public Hearing: Monday, May 8, 2023 at 10:00am at the Community Health Agency, Coldwater office. Thank you for your on-going input and support during this planning process!



Services to Victims of Elder Abuse Grant FY22-23 2nd Quarter Report (St. Joseph County)

01/01/23 to 03/31/23

*Types of Victimization & Services Provided are based on number of occurrences

*Demographic Info is new clients only; all other categories include continuing clients

570 Marshall Road, Coldwater, MI 49036

www.bhsj.org/aaa

Office: (517) 278-2538

Toll Free (888) 615-8009

For additional information or questions please contact:

Toni Laughlin

Ph: (517) 617-5592 Email: laughlint@bhsj.org

Demographics - New Clients	Total	Previous Qtr. Totals	YTD
Black/African-American	0	0	0
Hispanic/Latino	0	0	0
Caucasian/Non-Latino	4	4	8
Female	2	3	5
Male	2	1	3
Vulnerable: Age 18-59	0	0	0
Elderly: Age 60 and Older	4	4	8
<u>New Clients Total</u>	4	4	8
<u>Continuing Clients</u>	3	4	7
<u>Total Clients Served</u>	7	8	15

Types of Victimization	Total	Previous Qtr. Totals	YTD
Arson	0	0	0
Bullying (Verbal, Cyber or Physical)	1	2	3
Domestic or Family Violence	3	4	7
Elder Abuse or Neglect	4	5	9
Identity Theft/Fraud/Financial Crime	3	5	8
Physical Assault	1	1	2
Robbery/Burglary	0	2	2
Sexual Assault	0	0	0
Survivors of Homicide	0	0	0
Multiple Victimizations	3	6	9

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	1	1	2
Disability	7	6	13
Homeless	4	3	7
LGBTQ	0	0	0
Veteran	1	0	1

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	12	10	22
Referral to Other Services	16	22	38
Referral to Other Victim Services	0	6	6
Victim Notification	4	8	12

**Services to Victims of Elder Abuse Grant
FY22-23 2nd Quarter Report (St. Joseph County)
Continued**

Personal Advocacy	Total	Previous Qtr. Totals	YTD
Child/Dependent Assistance	0	0	0
Emergency Medical Care	0	0	0
Individual Advocacy	5	14	19
Intervention with Person or Institutions	18	5	23
Law Enforcement Interview	2	3	5
Transportation	7	3	10

Emotional Support or Safety Services	Total	Previous Qtr. Totals	YTD
Crisis Intervention	8	9	17
Emergency Financial Assistance	1	3	4

Shelter/Housing Services	Total	Previous Qtr. Totals	YTD
Relocation Assistance	9	11	20
Transitional Housing	0	3	3

Criminal Justice Assistance	Total	Previous Qtr. Totals	YTD
Criminal Advocacy	2	0	2
Law Enforcement Interview	2	3	5
Notification of Criminal Justice Event	5	4	9
Other Emergency Assistance	0	0	0
Personal Protective Order	2	0	2
Prosecution Interview	0	0	0
Restitution Assistance	0	8	8
Victim Impact Statement	0	0	0



Services to Victims of Elder Abuse Grant FY22-23 2nd Quarter Report (Branch County)

01/01/23 - 03/31/23

*Types of Victimization & Services Provided are based on number of occurrences

*Demographic Info is new clients only; all other categories include continuing clients

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Caucasian/Non-Latino	2	0	2
Female	1	3	4
Male	1	2	3
Vulnerable: Age 18-59	0	0	0
Elderly: Age 60 and Older	2	5	7
<u>New Clients Total</u>	2	5	7
<u>Continuing Clients</u>	4	2	6
<u>Total Clients Served</u>	6	7	13

Types of Victimization	Total	Previous Qtr. Totals	YTD
Arson	0	0	0
Bullying (Verbal, Cyber or Physical)	0	6	6
Domestic or Family Violence	0	4	4
Elder Abuse or Neglect	0	7	7
Identity Theft/Fraud/Financial Crime	6	5	11
Physical Assault	0	1	1
Robbery/Burglary	0	0	0
Sexual Assault	0	0	0
Survivors of Homicide	0	0	0
Multiple Victimizations	0	2	2

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	0	4	4
Disability	1	4	5
Homeless	0	0	0
LGBTQ	0	0	0
Veteran	0	1	1

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	12	5	17
Referral to Other Services	7	6	13
Referral to Other Victim Services	0	4	4
Victim Notification	0	0	0

**Services to Victims of Elder Abuse Grant
FY22-23 2nd Quarter Report (Branch County)
Continued**

Personal Advocacy	Total	Previous Qtr. Totals	YTD
Child/Dependent Assistance	0	0	0
Emergency Medical Care	0	1	1
Individual Advocacy	0	1	1
Intervention with Person or Institutions	9	2	11
Law Enforcement Interview	0	0	0
Transportation	2	1	3

Emotional Support or Safety Services	Total	Previous Qtr. Totals	YTD
Crisis Intervention	5	0	5
Emergency Financial Assistance	0	0	0

Shelter/Housing Services	Total	Previous Qtr. Totals	YTD
Relocation Assistance	0	1	1
Transitional Housing	0	0	0

Criminal Justice Assistance	Total	Previous Qtr. Totals	YTD
Criminal Advocacy	0	0	0
Law Enforcement Interview	0	0	0
Notification of Criminal Justice Event	2	3	5
Other Emergency Assistance	0	0	0
Personal Protective Order	0	0	0
Prosecution Interview	0	0	0
Restitution Assistance	2	0	2
Victim Impact Statement	0	0	0



Services to Victims of Elder Abuse Grant FY22-23 2nd Quarter Report (Both Counties)

01/01/23 - 03/31/23

*Types of Victimization & Services Provided are based on number of occurrences

*Demographic Info is new clients only; all other categories include continuing clients

570 Marshall Road, Coldwater, MI 49036

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For additional information or questions please contact:

Toni Laughlin PH: (517) 617-5592 Email: laughlint@bhsj.org

Demographics - New Clients	Total	Previous Qtr. Totals	YTD
Black/African-American	0	0	0
Hispanic/Latino	0	0	0
Caucasian/Non-Latino	6	4	10
Female	3	6	9
Male	3	3	6
Vulnerable: Age 18-59	0	0	0
Elderly: Age 60 and Older	6	9	15
<u>New Clients Total</u>	6	9	15
<u>Continuing Clients</u>	7	6	13
<u>Total Clients Served</u>	13	15	28

Types of Victimization	Total	Previous Qtr. Totals	YTD
Arson	0	0	0
Bullying (Verbal, Cyber or Physical)	1	8	9
Domestic or Family Violence	3	8	11
Elder Abuse or Neglect	4	12	16
Identity Theft/Fraud/Financial Crime	9	10	19
Physical Assault	1	2	3
Robbery/Burglary	0	2	2
Sexual Assault	0	0	0
Survivors of Homicide	0	0	0
Multiple Victimizations	3	8	11

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	1	5	6
Disability	8	10	18
Homeless	4	3	7
LGBTQ	0	0	0
Veteran	1	1	2

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	24	15	39
Referral to Other Services	23	28	51
Referral to Other Victim Services	0	10	10
Victim Notification	4	8	12

**Services to Victims of Elder Abuse Grant
FY22-23 2nd Quarter Report (Both Counties)
Continued**

Personal Advocacy	Total	Previous Qtr. Totals	YTD
Child/Dependent Assistance	0	0	0
Emergency Medical Care	0	1	1
Individual Advocacy	5	15	20
Intervention with Person or Institutions	27	7	34
Law Enforcement Interview	2	3	5
Transportation	9	4	13

Emotional Support or Safety Services	Total	Previous Qtr. Totals	YTD
Crisis Intervention	13	9	22
Emergency Financial Assistance	1	3	4

Shelter/Housing Services	Total	Previous Qtr. Totals	YTD
Relocation Assistance	9	12	21
Transitional Housing	0	3	3

Criminal Justice Assistance	Total	Previous Qtr. Totals	YTD
Criminal Advocacy	2	0	2
Law Enforcement Interview	2	6	8
Notification of Criminal Justice Event	7	4	11
Other Emergency Assistance	0	0	0
Personal Protective Order	2	0	2
Prosecution Interview	0	0	0
Restitution Assistance	2	8	10
Victim Impact Statement	0	0	0

PLATFORM FOR LEGISLATIVE ACTION



SENIOR ACTION WEEK: MAY 15-19, 2023

OLDER MICHIGANIANS DAY: MAY 17, 2023

Support Family and Informal Caregivers

Family and Kinship caregivers provide essential care to older adults and loved ones. It is estimated that 23% of Michiganians provide unpaid, informal care and are the largest source of long-term services and supports in the country. With the continuing direct care workforce shortage, support for caregivers is even more important to assist older adults in their homes. Without continued family-provided help, the cost to Michigan's health and Long-Term Services and Supports systems will skyrocket.

ACTION: Urge policymakers to invest one time funding of \$16.8 million to develop and implement a Caregiver Resource Center model designed to identify, serve, and support caregivers.

ACTION: Support policies that provide family and informal caregivers with financial security and other resources.

Support and Strengthen the Direct Care Workforce

Direct care workers (DCW) are essential for older adults planning to age in place. In Michigan, an estimated 36,000 more direct care workers are needed to meet demand but due to low wages, a lack of professional development, and the absence of benefits, it is difficult to attract and retain these workers. There is currently no federal training standard to professionalize the direct care workforce.

ACTION: Support the DCW Wage and Training Workgroup's recommendation of a \$4 per hour DCW wage increase.

ACTION: Support the professionalization of the direct care worker network through training, creating opportunity for advancement, and increasing wages and benefits.

Support & Strengthen the Long-Term Care Ombudsman Program

The Long-Term Care (LTC) Ombudsmen work with residents of licensed long-term care facilities such as nursing homes (NH), home for the aged (HFA), and adult foster care (AFC) homes with a goal of improving quality care for residents. A recent review of the ombudsman program found that to reach the recommended minimum staff-to-bed ratio of 1:2000, Michigan needs to add 33 more full-time ombudsman. The funding formula used to distribute Ombudsman funding has also not been updated since 1987.

ACTION: Urge the Legislature to adequately staff Michigan's Long-Term Care Ombudsman Program by adding 33 new full-time positions at an estimated total cost of \$3 million.

ACTION: Urge the Commission on Services to the Aging to update the Ombudsman Funding Formula to distribute increased funds based on current demographic data.

Increase Access to Home and Community-Based Services

In Michigan, there are currently 7,270 seniors on waiting lists for essential non-Medicaid in-home services provided through Michigan's Administration for Community Living Supports (ACLS). ACLS funded services include home delivered meals, in-home personal care, homemaking, and respite care that delay or prevent the need for more costly long-term care interventions.

ACTION: Support the Silver Key Coalition's request for a \$9 million increase for ACLS in-home services and a \$1 million increase for home delivered meals in ACLS' FY 2024 budget.

Expand Access to MI Choice

Michigan ranks near the bottom in the proportion of taxpayer dollars spent by states to provide long-term care through home and community-based services (HCBS) versus institutional care. In Michigan during Fiscal Year 2019, only 37% of Long-term Services and Supports (LTSS) funding was allocated to HCBS while 63% went to institutional settings. The MI Choice Medicaid Waiver Program is an in-home service program that enables seniors and adults with a disability who meet eligibility requirements to receive LTSS in their home rather than a nursing facility.

ACTION: Urge MDHHS to raise the MI Choice reimbursement rates to keep up with inflation and the increased costs of providing care.

ACTION: Urge the legislature to bring equity between HCBS and institutional care by rebalancing state expenditures.

Included in This Month's Report:

- 1. Health Education & Promotion Department Update***
- 2. 2023 Medicinal Marijuana Operations & Oversight Grant (MMOOG) Update***
- 3. MCRH – Embedding a Community Health Worker (CHWs) Program within the Local Public Health Department Grant Update.***
- 4. Community Events Update***
- 5. March Social Media Data***
- 6. March CHW Client Data***

1. Health Education & Promotion Department Update:

The month of March was very busy for the Health Education & Promotion team. We are very happy to announce that we have hired a new Health Educator, Isabella Stycos; she will not begin at the agency until May but we are very excited to have her on board. We continue to monitor, update, and post relevant messaging through our social media platforms, which is being mostly managed by our Health Educator, Josh Englehart. Our Facebook/Instagram posts for the month of March included, but were not limited to, topics such as: Nutrition month, WIC promotions, Colorectal Cancer, Kidney Disease, Tuberculosis Awareness, Spring Flooding Dangers, Tornado Awareness, Physician's Week, and the Annual County Health Rankings for the state of MI.

The department has largely been busy with planning the all-staff event that will take place on April 21st at the ProMedica Coldwater conference room. This year, we have asked every department to create presentations that explain what it is that they do, but we also encouraged them to have fun with the ways in which they present it. We want all of our staff to have a rudimentary understanding of the other departments, and having some fun whilst doing it is the idea behind this year's all staff event. Furthermore, like the rest of the agency, we have also been helping to prepare for the accreditation process which also begins at the end of April. Alex Bergmooser, the department's Supervisor, has been working on the Agency's 2022 Annual Report and he is nearly finished with that project; the final version will be released in May.

Lastly, Alex has also been working on the Agency's CHNA with consultant Marcus Cheatham and intern Thomas Carey; as of the end of March, the community focus groups and stakeholder interviews have been scheduled and some have already been completed. The final assessment report will be completed before the June deadline, with presentations at the various county community organizations to follow.

2. 2023 Medicinal Marijuana Operations & Oversight Grant (MMOOG)

The Agency's application for the 2023 Medicinal Marijuana Operations & Oversight Grant (MMOOG) was successful and we will be receiving the funding for this grant for all three of our counties. The campaign will still be utilizing the familiar "Lock It Up" slogan, logo, and overall messaging; however, this year we will not be using the funds to purchase lockable storage items as we have in the past. Instead, we will be using the funds to purchase more large-scale advertisement opportunities to get this message out to the public. These opportunities, although not confirmed, will hopefully include the use of mediums such as billboards, commercials on streaming television services, vinyl decals on county transportation buses, banners, yard signs, etc. We are excited to be able to begin work on this year's MMOOG grant.

3. The Michigan Center for Rural Health (MCRH) – Embedding a Community Health Worker Program within the Local Public Health Department Grant:

During the month of March, our CHW Rachael Wall was extremely busy as she welcomed 7 new clients and continued to work with her existing clients, as well. We are excited to see her case load pick back up and anticipate

similar numbers in the coming months. Furthermore, Alex, with the help of Judy Kell, our CHW consultant, have identified a possible funding source for this program so that we can continue to offer these services past the end of this fiscal year. The grant, offered through the Michigan Health Endowment Fund, is titled “Community Health Impact” and the funding provided is meant to assist health care workers such as Rachael in identifying, and supporting, a specific (health-related) at-risk population within a designated area; that said, our proposal will be aimed at the aging (60+) population within our three rural counties; more details will be provided next month as we continue to work through this process and prepare to submit the letter of intent for the grant, which is due April 20th.

4. Community Events: We have participated, or will be participating in the following events:

Date	Event
3/8	“At Least It’s Not A Cigarette” Anti-Vaping presentation @ the Branch County Library
3/9	Hillsdale County Project Connect
3/14	St. Joseph County Human Service Commission Presentation - CHNA
3/15	Branch County Community Network Presentation - CHNA
3/28	Glen Oaks Community College Career Fair
4/5	CHNA Focus Group – Branch County GSC
4/8	CHNA Focus Group – St. Joseph County GSC
4/12	St. Joseph County Community Resource Roundtable
4/13	Hillsdale County Senior Services Breakfast - Presentation

5. Social Media Data: March

Social Media Data (As of April 1st, 2023)					
	# of Followers (Facebook & Instagram)	Social Media Reach (Amount a post is viewed, commented on, shared, etc.)	Number & Topic of Facebook Live Events	Agency Mentions in Local Media (radio stations, local newspaper/digital articles, etc.)	Other Activities (# and Topic)
MARCH	4070	15,392 <i>(Down 24% from February)</i>	2 (<i>"We are Public Health"</i>)	10	None
TOTAL TO DATE (Since 10/1/2022)	4 NEW followers since last report	121,656	6	44	5

6. Community Health Worker (CHW) Client Data: March

Community Health Worker (CHW) Client Data - March 2023								
	# New	# Total to Date	*** "Interactions" = Supplied Resources or referred an individual to an outside agency, but not an active client (Interactions are counted under the "Referral Source" numbers, as well). **Interactions "# Total to Date" Began Reporting Numbers in January 2023.					
*** Interactions	7	12**						
Clients	7	25						
	Internal (Clinic) Referral & Agency Website	External Referral (Partner Organization)	AAA	MDHHS	Internal (Clinic) Referral & Agency Website (Total to Date)	External Referral, i.e.: Partner Organization (Total to Date)	AAA (Total to Date)	MDHHS (Total to Date)
Referral Source	4	3	0	0	13	6	5	1
	Branch	St. Joseph	Hillsdale	Branch (Total to Date)	St. Joseph (Total to Date)	Hillsdale (Total to Date)		
Clients by County	1	5	1	6	18	1		
	In-Person (Office)	Phone	Email	In-Person (Home Visit)	In-Person: Office (Total to Date)	Phone (Total to Date)	Email (Total to Date)	In-Person: Home Visit (Total to Date)
Communications (sum of all communications w/each client)	7	36	0	0	28	115	1	6
	Open	Closed (Completed)	Closed (Unable to Complete)	Other (Specify)	Open, (Total # of Clients to Date)	Closed/Completed (Total to Date)	Closed: Unable to Complete (Total to Date)	Other: Specify (Total to Date)
Case Status	18	0	3	0	25	4	7	0
	Behavioral Health	Health Insurance	Housing	Immunization Information	Employment Issues	Family Planning & Pregnancy	At-Home Medical & Health Needs	Adult Education
Services Provided	2	3	3	0	3	3	0	2
Service Provided (Total to Date)	4	17	14	5	7	4	5	5
	Transportation	Food Assistance	Child Developmental/ Education Issues & Screening	Childcare Services	Clothing Needs	Domestic Concerns	Other (Specify)	
Services Provided Cont.	3	6	2	2	3	3	1 (insurance fees), 2 (Non-Specific Resource)	
Service Provided (Total to Date)	4	18	3	5	5	6	7	

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 3/1/2023 Through 3/31/2023

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Abila	1,852.00	23-03-10 A.01	3/10/2023
Accident Fund	3,188.75	23-03-24 P.01	3/24/2023
ACD.NET	1,916.39	53933	3/10/2023
Aflac District Office	596.48	53931	3/3/2023
Aflac District Office	596.48	53938	3/17/2023
Aflac District Office	568.55	53957	3/31/2023
AleraEdge	1,056.00	53940	3/24/2023
Alerus Retirement Solutions	1,710.00	23-03-03 R.01	3/3/2023
Alerus Retirement Solutions	1,926.00	23-03-17 R.01	3/17/2023
Alerus Retirement Solutions	1,941.00	23-03-31 R.01	3/31/2023
Alexander Scott	1,422.95	53941	3/24/2023
Amazon Capital Services, Inc	16.99	23-03-10 A.02	3/10/2023
Amazon Capital Services, Inc	68.37	23-03-24 A.01	3/24/2023
Armstrong Nutrition Management	3,971.11	23-03-10 A.03	3/10/2023
Beacon Properties Administration	3,645.00	53955	3/31/2023
Blue Cross Blue Shield	61,293.36	23-03-24 P.02	3/24/2023
Branch County Commission	80,086.64	23-03-24 A.02	3/24/2023
Branch County Complex	5,694.28	23-03-31 A.01	3/31/2023
Card Services Center	149.45	23-03-31 P.01	3/31/2023
Center for Information Mgmnt	1,350.00	23-03-10 A.04	3/10/2023
Century Bank - Hillsdale Maintenance	2,000.00	23-03-31 A.02	3/31/2023
Century Bank - Three Rivers Maintenance	2,000.00	23-03-31 A.03	3/31/2023
Century Basic	932.96	23-03-03 R.02	3/3/2023
Century Basic	932.96	23-03-17 R.02	3/17/2023
Century Basic	911.22	23-03-31 R.02	3/31/2023
Century EFPTS	23,701.80	23-03-03 R.03	3/3/2023
Century EFPTS	92.73	23-03-17 DI.01	3/17/2023
Century EFPTS	23,792.37	23-03-17 R.03	3/17/2023
Century EFPTS	123.64	23-03-31 DI.01	3/31/2023
Century EFPTS	45.90	23-03-31 L.01	3/31/2023
Century EFPTS	23,775.87	23-03-31 R.03	3/31/2023
Century Mastercard	496.80	23-03-10 P.01	3/10/2023
Century MERS	52,995.59	23-03-10 A.05	3/10/2023
Century State/Michigan State Treasury	4,149.19	23-03-03 R.04	3/3/2023
Century State/Michigan State Treasury	4,131.04	23-03-17 R.04	3/17/2023
Century State/Michigan State Treasury	12.37	23-03-31 L.02	3/31/2023
Century State/Michigan State Treasury	4,056.85	23-03-31 R.04	3/31/2023
Charter Communications	137.97	23-03-10 P.02	3/10/2023
Cintas Corporation Loc 351	166.08	23-03-24 P.03	3/24/2023
City Of Coldwater	120.00	23-03-24 A.03	3/24/2023
City of Jonesville	120.00	23-03-10 A.06	3/10/2023
City Of Three Rivers	137.93	23-03-10 A.07	3/10/2023
City Of Three Rivers	25.00	23-03-10 A.08	3/10/2023
City Of Three Rivers	130.00	23-03-24 A.04	3/24/2023
ConnectAmerica	149.50	23-03-24 A.05	3/24/2023
Crossroads Home Care Inc.	941.44	23-03-24 A.06	3/24/2023
CSHCS	240.00	53942	3/24/2023
Current Office Solutions	56.12	23-03-10 A.09	3/10/2023
DL Gallivan Office Solutions	477.67	53956	3/31/2023
Dr. Karen M. Luparello	4,219.42	23-03-31 A.04	3/31/2023
Eurotrol U.S.B.V.	970.00	53943	3/24/2023
Frontier	383.39	23-03-10 P.03	3/10/2023

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 3/1/2023 Through 3/31/2023

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
GDI Services Inc.	4,698.62	23-03-31 A.05	3/31/2023
Glaxo-Smithkline Financial Inc.	1,838.35	23-03-24 A.07	3/24/2023
GT INDEPENDENCE	1,394.84	23-03-24 A.08	3/24/2023
Health Equity	1,313.52	23-03-03 P.01	3/3/2023
Health Equity	1,313.52	23-03-17 P.01	3/17/2023
Health Equity	1,249.98	23-03-31 PR.01	3/31/2023
Heidi Thompson	400.00	53944	3/24/2023
Helping Angels Home Care LLC	343.20	23-03-24 A.09	3/24/2023
Helping Angels Home Care LLC	39.60	23-03-24 A.10	3/24/2023
Helping Angels Home Care LLC	274.56	23-03-24 A.11	3/24/2023
Helping Angels Home Care LLC	31.68	23-03-24 A.12	3/24/2023
Helping Angels Home Care LLC	366.08	23-03-24 A.13	3/24/2023
Helping Angels Home Care LLC	42.24	23-03-24 A.14	3/24/2023
Hillsdale Board Of Public Utilities	2,492.89	23-03-10 P.04	3/10/2023
Hillsdale County Treasurer	658.58	23-03-10 A.10	3/10/2023
HomeJoy of Kalamzoo	4,483.85	23-03-24 A.15	3/24/2023
Hospital Network Healthcare Services	171.78	23-03-10 A.11	3/10/2023
Indiana MI Power Company	1,216.11	23-03-10 P.05	3/10/2023
iSolved Benefit Services	673.68	53945	3/24/2023
Jessica A Adams	2,067.50	23-03-10 A.12	3/10/2023
Jessica A Adams	2,250.00	23-03-24 A.16	3/24/2023
Kell & Associates, LLC	665.00	23-03-10 A.13	3/10/2023
Legal Services Of S.Central MI	1,850.00	23-03-24 A.17	3/24/2023
Macquarie Equipment Capital Inc.	1,266.75	23-03-24 A.18	3/24/2023
Maner Costerisan	6,200.00	23-03-24 A.19	3/24/2023
Maplecrest, LLC	646.00	23-03-31 A.06	3/31/2023
Matasha Goosby	2,075.00	23-03-10 A.14	3/10/2023
Matasha Goosby	2,250.00	23-03-24 A.20	3/24/2023
Maxpert	28.65	53934	3/10/2023
McKesson Medical-Surgical Gov. Solutions LLC	195.62	23-03-10 P.06	3/10/2023
McKesson Medical-Surgical Gov. Solutions LLC	251.63	23-03-24 P.04	3/24/2023
Medical Care Alert	669.00	23-03-24 A.21	3/24/2023
Merck Sharp & Dohme LLC	5,707.92	53946	3/24/2023
MERS 5% EMPLOYEES	4,225.63	23-03-10 A.15	3/10/2023
MI Municipal Risk Management Authority	10,337.25	23-03-10 A.16	3/10/2023
MI Security & Lock, LLC	255.00	53947	3/24/2023
Michigan State Disbursement Unit	190.11	53932	3/3/2023
Michigan State Disbursement Unit	190.11	53939	3/17/2023
Michigan State Disbursement Unit	190.11	53958	3/31/2023
Mistel de Varona	675.00	53935	3/10/2023
Mistel de Varona	675.00	53948	3/24/2023
Nationwide	1,020.00	23-03-03 R.05	3/3/2023
Nationwide	1,020.00	23-03-17 R.05	3/17/2023
Nationwide	920.00	23-03-31 R.05	3/31/2023
Paul Monahan	467.00	53936	3/10/2023
Principal Life Insurance Company	1,792.44	23-03-10 P.07	3/10/2023
Principal Life Insurance Company	1,970.67	23-03-24 P.05	3/24/2023
Proassurance Casualt Company	328.00	53949	3/24/2023
Prompt Care Express PC	71.00	53950	3/24/2023
Richard Clark	2,225.00	23-03-31 A.07	3/31/2023

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 3/1/2023 Through 3/31/2023

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Riley Pumpkin Farm	1,245.00	23-03-31 A.08	3/31/2023
RJB Heating & Cooling	262.92	53951	3/24/2023
Rosati Schultz Joppich Amtsbueshler	1,200.00	23-03-24 A.22	3/24/2023
Sanofi Pasteur Inc.	709.86	23-03-24 P.06	3/24/2023
Semco Energy	147.50	23-03-10 P.08	3/10/2023
Shred It	120.00	23-03-10 P.09	3/10/2023
St Joseph County COA	8,876.62	23-03-24 A.23	3/24/2023
St Joseph County Transit Authority	1,530.40	23-03-24 A.24	3/24/2023
St. Joseph Community Co-op	1,835.97	23-03-24 A.25	3/24/2023
Staples	27.09	23-03-10 P.10	3/10/2023
Staples	552.31	23-03-24 P.07	3/24/2023
State of Mich EGLE	17.00	53937	3/10/2023
State Of Michigan	90.00	53952	3/24/2023
State of Michigan-Dept	11.50	53953	3/24/2023
Thurston Woods Village	4,781.72	53954	3/24/2023
TMK Worldwide, LLC	142.00	23-03-10 A.17	3/10/2023
Verizon	1,040.42	23-03-10 P.11	3/10/2023
VRI INC.	243.00	23-03-24 A.26	3/24/2023
Wal-Mart Community	73.92	23-03-10 P.12	3/10/2023
Report Total	424,061.31		

Branch-Hillsdale-St Joseph Community Health Agency
Balance Sheet
As of 3/31/2023

Assets

Cash on Hand	11,403.79
Cash with County Treasurer	3,499,992.99
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	86,000.00
Cash TR Building Maintenance	86,000.00
Accounts Receivable	46,183.20
Due from Hillsdale County *(paid in April)*	117,796.00
Due from State	(209,002.79)
Due from Other Funding Sources	158,701.05
Prepaid Expenses	158,541.02
Biologic Inventory	<u>103,444.38</u>
Total Assets	<u>4,369,015.58</u>

Liabilities

Accounts Payable	143,695.27
Payroll Liabilites	85,634.43
Capital Improvements	25,000.00
Deferred Revenue	566,102.68
Biologics	<u>103,444.38</u>
Total Liabilities	<u>923,876.76</u>

Net Assets

Operation Fund Balance	406,310.48
Restricted Fund Balance	365,021.81
Designated Fund Balance	<u>2,673,806.53</u>
Total Net Assets	<u>3,445,138.82</u>

Total Liabilities and Net Assets	<u>4,369,015.58</u>
---	----------------------------

Prior Year Fund Balance Comparison at 3/31/2022:

Operation Fund Balance	474,400.76
Restricted Fund Balance	400,345.23
Designated Fund Balance	<u>2,377,990.80</u>
Total Fund Balance \$	<u>3,252,736.79</u>

BHSJ Community Health Agency
 Schedule of Cash Receipts and Disbursements
 October 31, 2022 thru
 March 31, 2023

Plus: Cash Receipts	\$	598,878.68
Less: Cash Disbursements For Payroll/AP	\$	(929,998.04)
10/31/2022 Cash Balance		\$ 3,993,850.55
<hr/>		
Plus: Cash Receipts	\$	861,921.81
Less: Cash Disbursements For Payroll/AP	\$	(688,089.85)
11/30/2022 Cash Balance		\$ 4,167,682.51
<hr/>		
Plus: Cash Receipts	\$	732,683.01
Less: Cash Disbursements For Payroll/AP	\$	(715,782.48)
12/31/2022 Cash Balance		\$ 4,184,583.04
<hr/>		
Plus: Cash Receipts	\$	721,777.83
Less: Cash Disbursements For Payroll/AP	\$	(601,733.04)
1/31/2023 Cash Balance		\$ 4,304,627.83
<hr/>		
Plus: Cash Receipts	\$	242,699.30
Less: Cash Disbursements For Payroll/AP	\$	(516,761.72)
2/28/2023 Cash Balance		\$ 4,030,565.41
<hr/>		
Plus: Cash Receipts	\$	466,507.25
Less: Cash Disbursements For Payroll/AP	\$	(686,310.45)
3/31/2023 Cash Balance		\$ 3,810,762.21

BRANCH HILLSDALE ST JOSEPH COMMUNITY HEALTH AGENCY

Expense by Program - 3/31/2023

Program	Program Title	Month	Year to Date	Original	Expended	
*	010	Agency Support	7,833.84	67,213.26	76,942.00	87.35%
*	325	CSHCS	24,158.28	144,255.89	188,729.00	76.43%
**	032	Emergency Preparedness	13,458.79	77,182.17	124,575.00	61.95%
**	326	Vision (ELPHS)	10,926.24	58,267.84	103,289.00	56.41%
*	185	Dental Outreach	1,745.99	7,647.14	14,423.00	53.02%
*	012	Area Agency on Aging	93,703.73	773,090.13	1,459,572.00	52.96%
*	115	MCH Enabling Women	2,192.97	24,510.49	47,663.00	51.42%
	021	Dental Clinic - Three Rivers	3,645.00	21,870.00	43,740.00	50.00%
	327	Hearing (ELPHS)	9,179.10	50,871.64	102,164.00	49.79%
	345	Lead Testing	2,151.60	11,866.67	23,852.00	49.75%
	109	WIC	92,531.77	520,732.41	1,072,171.00	48.56%
	008	Salary & Fringe Payoff	250.17	46,031.77	95,000.00	48.45%
	605	General EH Services	3,257.26	18,740.56	39,010.00	48.04%
	714	Onsite Sewage Disposal	30,943.95	178,035.37	370,596.00	48.04%
	721	Drinking Water Supply	30,943.95	178,035.37	370,596.00	48.04%
	338	Immunization Vaccine Handling	23,375.37	139,627.59	291,551.00	47.89%
	341	Infectious Disease	18,428.63	134,403.60	282,780.00	47.52%
	704	Food Service	33,841.14	233,848.08	527,317.00	44.34%
	138	Immunization IAP	48,203.00	371,624.48	857,133.00	43.35%
	331	STD	10,832.57	60,598.94	140,077.00	43.26%
	108	WIC Breastfeeding	8,937.04	55,187.17	127,978.00	43.12%
	107	Medicaid Outreach	525.67	6,093.21	14,202.00	42.90%
	014	VOCA	13,133.87	84,707.44	205,743.00	41.17%
	332	HIV Prevention	1,735.55	12,591.67	31,480.00	39.99%
	201	CSF Carseats	2,243.59	10,573.85	26,983.00	39.18%
	363	363 CVDIMS Covid Immz Supplemental	7,107.63	59,029.18	156,496.00	37.71%
	200	ELPHS Marketing	4,327.54	36,238.34	98,198.00	36.90%
	352	ELCCT Contact Tracing, testing doord,	30,766.63	193,397.33	606,617.00	31.88%
	329	MCH Enabling Children	2,574.21	15,208.90	48,551.00	31.32%
	029	Dental Clinic - Hillsdale	515.52	4,337.66	14,000.00	30.98%
	745	Type II Water	17,243.57	64,577.42	208,528.00	30.96%
	024	MERS Pension Underfunded Liability	4,399.41	12,621.58	44,590.00	28.30%
	255	Community Health Direction	9,948.83	30,990.54	125,000.00	24.79%
	207	MCRH Community Health Workers	8,554.74	54,573.09	291,777.00	18.70%
	724	PFAS - Westside Landfill	0.00	554.99	3,101.00	17.89%
	096	CSHCS Donations SJ	400.00	4,048.45	32,412.02	12.49%
	355	COVID-19 PH Workforce Supplemental	529.23	19,828.25	172,904.00	11.46%

405	Grant Writing	169.63	379.85	3,718.00	10.21%
097	CSHCS Donations BR HD	1,662.95	2,059.43	27,765.29	7.41%
101	Workforce Development	761.19	3,716.63	57,798.00	6.43%
378	Monkeypox Virus Response	72.23	579.34	15,095.00	3.83%
374	EOACV Expanding Older Adult Access to	(7.35)	1,167.20	45,339.00	2.57%
035	Vector Borne Disease Surveillance	(7.91)	611.39	34,018.00	1.79%
723	PFAS Response - White Pigeon	0.28	49.43	8,066.00	0.61%
371	CSHCS Vaccine Initiative	(9.49)	57.18	14,213.00	0.40%
023	Capital Expenditures	0.00	600.00	193,000.00	0.31%
718	EGLE Septage	760.86	760.86	0.00	0.00%
719	EGLE Body Art	19.02	19.02	0.00	0.00%
112	CSHCS Medicaid Outreach	0.00	0.00	112,254.00	0.00%
722	PFAS Response	<u>0.00</u>	<u>0.00</u>	<u>1,371.00</u>	<u>0.00%</u>
	Total Expense	<u>577,967.79</u>	<u>3,793,012.80</u>	<u>8,952,377.31</u>	<u>42.37%</u>

The Agency is currently 7.63% under budget.

*6/12 Months = 50.00%

**6/9 Months = 66.66%

Programs Over Budget as of 3/31/2023

RU 010: The current revenue for this program is over budget (at 87.40%), causing expenses to also show over budget. This will fall in line with budget as the year progresses and we will make adjustments at next budget amendment.
87.35%

RU 325: Budget for RU 325 must be fully expended before expenses can be charged to RU 112. When looking at these two budgets together as one the program is under by budget at 47.93%.
76.43%

RU 032: 9-Month Program - within budget 66.66%
61.95%

RU 326: 9-Month Program - within budget 66.66%
45.83%

RU 185: Over budget due to increase in staff time. We will make appropriate adjustments at the next budget amendment.
53.02%

RU 012: Over budget due to annual membership fully expended in October and contractual service providers having full year grant awards and billing more than 1/12 of grant each month. AAA will continue to monitor and work with providers to ensure no over payments happen and appropriate adjustments are made at the next budget amendment.
52.96%

RU 115: Program is over budget due to one time expenditure- this program will fall back in line with budget as year progresses.
51.42%

BRANCH-ST. JOSEPH AREA AGENCY ON AGING (IIIC)

**ADVISORY COMMITTEE
BY-LAWS**

ARTICLE I.

Name and Area of Service

The name of this entity shall be the Advisory Committee to the governing Board of the Branch-St. Joseph Area Agency on Aging (IIIC) [AAA], hereinafter referred to as the Committee. The planning and service area in which this entity shall operate shall be in the geographic boundaries of Branch and St. Joseph Counties.

ARTICLE II.

Purpose

The Committee is a representative group of individuals and providers whose goal it is to provide the AAA with a community's perspective on activities and goals related to the agency. The Committee will advise the AAA on matters relating to the development and administration of the area plan and operations conducted thereunder to foster a comprehensive and coordinated service system for the aging.

ARTICLE III.

Function of the Committee

The specific duties and responsibilities of the Committee are subject to the provisions of the Older Americans Act (OAA), the Older Michiganians Act (OMA) and the Rules and Regulations of the Michigan Bureau of Aging, Community Living, and Supports (ACLS) ~~Office of Services to the Aging (OSA)~~. The Committee and the AAA function as the primary link between the Board of Health and the recipients and providers of services in the community. The Board of Health is the AAA Policy Board, which serves to review recommendations and set policy. Therefore, the function of the Advisory Committee is to:

1. Assist AAA staff in the completion and submission of the Multi-Year and Annual Implementation Plans to the Board of Health.
2. Review and comment to the Board of Health on any proposed substantive amendments to said plans.
3. Identify issues of need or concern within the community and advocate for services, policies, and programs to meet those needs.
4. Review state and federal proposals or policies which may impact on the local community and provide recommendations for action to the Board of Health.

5. Review and comment on proposed AAA policy changes to be submitted to the Board of Health.
6. Stimulate ideas for program development and for opportunities concerning older adults and their caregivers within the region.
7. Other tasks as requested by the Board of Health.

ARTICLE IV.

Membership

A. Composition

The Committee shall be comprised of not more than 16 members. Members must be residents of, or employed within the boundaries of Branch or St. Joseph County.

Committee composition should ideally be as follows:

	<u>Branch County</u>	<u>St. Joseph County</u>
Focal Point Representative *	2	2
Human Service or Social Service Representatives <i>(i.e. MDHSS, CMH)</i>	1	1
Health Services Representative <i>(i.e. hospital, physician's office)</i>	1	1
Consumers, Volunteers, or Community Leaders <i>(i.e. elected official, advocate, caregiver of someone 60+)</i>	4	4
TOTAL	8	8

Not less than fifty (50) percent of the committee must be comprised of persons aged 60 or older. In the event that membership falls below the 50% threshold for any reason, the Board of Health shall actively and continuously recruit nominees for said vacancies until such time that the Committee once again meets this requirement.

* A focal point is defined as a facility or entity established to encourage the maximum co-location and coordination of services for older individuals. Based on this definition, the organizations that best serve as focal points are the counties two Commissions On Aging.

B. Selection

Prospective members shall submit their names for consideration not less than two (2) months before the end of the fiscal calendar year (JulyOctober 31), or when an advertised vacancy exists. Prospective members must submit their names in writing to the Board of

Health via completion of the "Advisory Committee Citizen Interest Form" or other members may nominate individuals in a like fashion.

Upon receipt of such nominations the AAA staff shall:

- 1) Contact the nominee to assure her/his interest,
- 2) Identify the nominee's county of affiliation, organizational affiliation (if any), and whether the person is age 60 or older,
- 3) AAA staff shall present this information to the Board of Health at a regularly scheduled meeting.

The Board of Health may request additional information from the applicant if they so desire before rendering a determination. Appointments or denial of appointments shall take place through a voice vote of the Board of Health. Notification of appointment or denial with reason stated will be made within 10 days by the AAA Director following the Board of Health meeting at which the decision was rendered.

C. Terms of Membership

Appointment to the Committee shall be for a minimum of two (2) calendar years commencing January 1 (or immediately following the appointment date if a vacancy appointment) and terminating December 31. Appointments may be extended or re-authorized at the discretion of the Board of Health. Barring voluntary resignation or removal for cause, at least 50% of the committee shall be re-appointed to ensure continuity of Committee functioning.

D. Standards of Attendance

If any member fails to attend three consecutive meetings without providing a reasonable excuse, the Committee Chairperson shall advise the member in writing. If, following the written notice, a member fails to attend the next consecutive meeting without providing a reasonable excuse, the position may be considered vacant and shall be filled in the same manner as initial appointments. If the member is an agency representative, written notice will also be given to the agency director and/or the agency's board chairperson.

E. Standards of Conduct

Members of the Committee shall be bound by the Code of Ethics adopted by the Board of Health on September 26, 1996. Violations of these standards may result in removal of members from the Committee or other action as deemed appropriate by the Board of Health.

F. Removal of Members

All members of the Committee serve at will of the Board of Health and may be removed from the Committee, with or without cause, by majority vote of the Board of Health.

ARTICLE V.

Officers

A. Selection

The Committee shall nominate and select a Chairperson and a Vice-Chairperson from its membership on an annual basis. Such selection shall take place at the last scheduled meeting of the calendar year. Election of officers shall require a majority vote of members present.

B. Duties

1. Chairperson

- a) To preside over all Committee meetings
- b) To review and sign any official correspondence of the Committee
- c) To work with AAA staff to set agendas for meetings

2. Vice-Chairperson

- a) To assume all duties of the chairperson in her/his absence

C. AAA Staff Role

Staffing functions including meeting agenda, minutes, supporting materials, etc. for Committee meetings are the responsibility of AAA staff, as designated by the AAA Director.

ARTICLE VI.

Meetings

~~A. Meetings shall operate within compliance of the Open Meetings Act (PA 267).~~

~~A.B.~~ The Committee shall determine their meeting schedule at their first meeting of the calendar year. ~~meet at a day and time convenient to the majority of the membership.~~

Meetings shall rotate between St. Joseph and Branch Counties and take place not less than six (6) times per year.

~~B. Such meetings shall operate within compliance of the Open Meetings Act (PA 267).~~

C. There is no quorum requirement of the Committee.

ARTICLE VII.

Amendments

A. Recommendation for an amendment to these by-laws shall be submitted to the Advisory Committee in writing prior to the regularly scheduled meeting at which they will be discussed.

~~A.~~

B. Recommendation for amendment(s) shall require a majority vote among members present at a regularly scheduled meeting (or special meeting as called by the Chairperson).

~~B.~~

C. Such recommendation for amendment(s) shall be presented to the Board of Health at a regularly scheduled meeting for final review and approval.

* * * * *

Approved by action of the Branch-Hillsdale-St. Joseph Board of Health at their January 23, 1997 meeting.

Amended by action of the Branch-Hillsdale-St. Joseph Board of Health at their January 25, 2001 meeting.

Amended by action of the Branch-Hillsdale-St. Joseph Board of Health at their April 27, 2023 meeting.

ATTACHMENT: "AAA IIIC Advisory Committee Citizen Interest Form"

Chairperson
BHSJ CHA Board of Health

Date

Chairperson
AAA IIIC Advisory Committee

Date

Laura Sutter~~Lynelle Thrasher~~, Director
Branch-St. Joseph Area Agency on Aging (IIIC)

Date

The Protecting Local Government Retirement and Benefits Act (PA 202 of 2017) & Public Act 530 of 2016 Pension Report

Enter Local Government Name Enter Six-Digit Municode	Branch-Hillsdale-St. Joseph Community Health Agency 127505	Instructions: For a list of detailed instructions on how to complete and submit this form, visit michigan.gov/LocalRetirementReporting .
Unit Type	Authority	
Fiscal Year End Month	September	
Fiscal Year (four-digit year only, e.g. 2019)	2022	
Contact Name (Chief Administrative Officer)	Theresa Fisher	
Title if not CAO	Administrative Services Director	Questions: For questions, please email LocalRetirementReporting@michigan.gov . Return this original Excel file. Do not submit a scanned image or PDF.
CAO (or designee) Email Address	fishert@bhsj.org	
Contact Telephone Number	517-279-9561, ext. 107	
Pension System Name (not division) 1	Municipal Employees Retirement System	If your pension system is separated by divisions, you would only enter one system. For example, one could have different divisions of the same system for union and non-union employees. However, these would be only one system and should be reported as such on this form.
Pension System Name (not division) 2		
Pension System Name (not division) 3		
Pension System Name (not division) 4		
Pension System Name (not division) 5		

Line	Descriptive Information	Source of Data	System 1	System 2	System 3	System 4	System 5
1	Is this unit a primary government (County, Township, City, Village)?	Calculated	NO	NO	NO	NO	NO
2	Provide the name of your retirement pension system	Calculated from above	Municipal Employees Retirement System				
3 Financial Information							
4	Enter retirement pension system's assets (system fiduciary net position ending)	Most Recent Audit Report	18,017,557				
5	Enter retirement pension system's liabilities (total pension liability ending)	Most Recent Audit Report	18,708,586				
6	Funded ratio	Calculated	96.3%				
7	Actuarially Determined Contribution (ADC)	Most Recent Audit Report	548,940				
8	Governmental Fund Revenues	Most Recent Audit Report	7,933,261				
9	All systems combined ADC/Governmental fund revenues	Calculated	6.9%				
10 Membership							
11	Indicate number of active members	Actuarial Funding Valuation used in Most Recent Audit Report	25				
12	Indicate number of inactive members	Actuarial Funding Valuation used in Most Recent Audit Report	21				
13	Indicate number of retirees and beneficiaries	Actuarial Funding Valuation used in Most Recent Audit Report	71				
14 Investment Performance							
15	Enter actual rate of return - prior 1-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider	14.13%				
16	Enter actual rate of return - prior 5-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider	9.96%				
17	Enter actual rate of return - prior 10-year period	Actuarial Funding Valuation used in Most Recent Audit Report or System Investment Provider	9.11%				
18 Actuarial Assumptions							
19	Actuarial assumed rate of investment return	Actuarial Funding Valuation used in Most Recent Audit Report	7.00%				
20	Amortization method utilized for funding the system's unfunded actuarial accrued liability, if any	Actuarial Funding Valuation used in Most Recent Audit Report	Level Percent				
21	Amortization period utilized for funding the system's unfunded actuarial accrued liability, if any	Actuarial Funding Valuation used in Most Recent Audit Report	12				
22	Is each division within the system closed to new employees?	Actuarial Funding Valuation used in Most Recent Audit Report	Yes				
23 Uniform Assumptions							
24	Enter retirement pension system's actuarial value of assets using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	16,537,267				
25	Enter retirement pension system's actuarial accrued liabilities using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	19,518,110				
26	Funded ratio using uniform assumptions	Calculated	84.7%				
27	Actuarially Determined Contribution (ADC) using uniform assumptions	Actuarial Funding Valuation used in Most Recent Audit Report	671,964				
28	All systems combined ADC/Governmental fund revenues	Calculated	8.5%				
29 Pension Trigger Summary							
30	Does this system trigger "underfunded status" as defined by PA 202 of 2017?	Primary government triggers: Less than 60% funded <u>AND</u> greater than 10% ADC/Governmental fund revenues. Non-Primary government triggers: Less than 60% funded	NO	NO	NO	NO	NO

Requirements (For your information, the following are requirements of P.A. 202 of 2017)
 Local governments must post the current year report on their website or in a public place.
 The local government must electronically submit the form to its governing body.
 Local governments must have had an actuarial experience study conducted by the plan actuary for each retirement system at least every 5 years.
 Local governments must have had a peer actuarial audit conducted by an actuary that is not the plan actuary OR replace the plan actuary at least every 8 years.

Operational Plan Report

BHSJ CHA | 1-Strategic Plan - Strategic Plan

[4/26/2023]



1-Strategic Plan Vision: *The vision of the Branch-Hillsdale-St. Joseph Community Health Agency is to be the trusted health resource for all people.*

1-Strategic Plan Mission: *The mission of the Branch-Hillsdale-St. Joseph Community Health Agency, Your Local Health Department is, helping people live healthier.*

1-Strategic Plan Values:

Inclusion *Inclusion*

Innovation *Innovation*

Integrity *Integrity*

Group: - 1-Strategic Plan | - Strategic Plan

Initiative Employee Investment

1:



Goal Ensure retention of a competent and satisfied workforce

1.1:



Objective 1.1.1: Beginning in 2023, create a wage equity plan and continue to present to BOH annually **Lead:** Burns, Rebecca

Objective % Done: **0 %**

Activities Sum: **0**

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.1.1	[L] Burns, Rebecca Gruner, Brenae	[Project] Seek out wage surveys conducted in past 12 months if available for review; request assistance from MALPH as appropriate by January 2023	Wage surveys compiled and documented [between 10/1/2022 and 6/30/2023]	% Complete
<p>Notes: MALPH will be updating their salary study in 2023. The existing data is from 2019. Municipal Consulting Services is in the process of doing a survey that will be ready in April of 2023. Work in this area to gather data is ongoing, but as new studies are only now being conducted, this activity timeline has been adjusted from January to June. Work should be completed by the end of June to have relevant data to present in October.</p>					
	1.1.1.2	[L] Burns, Rebecca Gruner, Brenae	[Project] Create opportunities for board members interact with employees to gain understanding of public health work and build rapport by January 2023	Interaction opportunities created, implemented and documented [between 10/1/2022 and 1/31/2023]	% Complete
<p>Notes: With such turnover after the election, this activity timeline should be adjusted to begin after the new Board of Health members are assigned in January of 2023. The time would be better spent on incoming members who will be with us for 2 years, not outgoing members who will be retired from our board at the end of 2022.</p> <p>Rebecca Burns set up lunch meetings to allow staff to meet the local Commissioners that represent them on the Board of Health. Hillsdale County staff met with Commissioner Leininger on February 9, 2023 (Commissioner Lanios was not able to attend). Branch County staff met with Commissioners Houtz and Matthew on February 23, 2023. St. Joseph County staff met with Commissioners Hoffmaster and Baker on March 1, 2023.</p>					
	1.1.1.3	[L] Burns, Rebecca Gruner, Brenae	[Timeline] Present wage equity plan to BOH in October of every year	Present Wage Equity Plan to Board of Health measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	56.7% of Timeline Starting 10/1/2022



Objective 1.1.2: Review and update the agency workforce development plan by January 2024 **Lead:** Burns, Rebecca

Objective % Done: **0 %**

Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.2.1	[L] Burns, Rebecca	[Project] Analyze agency-wide self-assessment of the public health core competencies to identify	[between 10/1/2022 and 12/31/2022]	100% Complete

		Gruner, Brenae	knowledge gaps and opportunities for staff development by December 2022		
	Notes: Survey was completed and the report was received on 9/30/2022. The report has been reviewed. The three top training areas identified are stress management, recruitment and retention, and public health 3.0. The two core competency skills that scored the lowest are Data Analytics and Assessment Skills, and Leadership and Systems Thinking Skills.				
	1.1.2.2	[L] Burns, Rebecca Gruner, Brenae	[Project] Identify the mandated trainings required for each department and program by December 2023.	[between 6/1/2023 and 12/31/2023]	% Complete
	1.1.2.3	[L] Burns, Rebecca Gruner, Brenae	[Project] Create an annual training schedule and tracking system to assure the mandated trainings are completed by January 2024.	[between 9/1/2023 and 12/31/2023]	% Complete
	1.1.2.4	[L] Burns, Rebecca Gruner, Brenae	[Project] Compile the information necessary for new employee orientation by January 2024.	[between 9/1/2023 and 12/31/2023]	% Complete
	1.1.2.5	[L] Burns, Rebecca Gruner, Brenae	[Project] Consider a peer-mentoring program for new employees by June 2024.	[between 2/1/2024 and 6/28/2024]	% Complete
	1.1.2.6	[L] Burns, Rebecca Gruner, Brenae	[Project] Provide staff the opportunity to review and provide input into the plan by September 2024.	[between 7/1/2024 and 9/30/2024]	% Complete

Objective 1.1.3: Evaluate our hiring strategies and opportunities for advancement by September 2023 **Lead:** Burns, Rebecca
 Objective % Done: 0 % Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.3.1	[L] Burns, Rebecca Gruner, Brenae	[Project] Review each step in the recruitment and hiring/orientation process and recommend improvements by March 2023	[between 11/1/2022 and 3/31/2023]	% Complete
Notes: Steps have been reviewed, but we are still working on recommendations.					
	1.1.3.2	[L] Burns, Rebecca Gruner, Brenae	[Project] Develop materials to promote the benefits provided by the agency to be used in the recruiting process by March 2023	[between 11/1/2022 and 3/31/2023]	100% Complete
Notes: Recruitment poster created and reviewed/approved by the Personnel Policy Committee.					
	1.1.3.3	[L] Burns, Rebecca Gruner, Brenae	[Project] Review job descriptions for accuracy and update as appropriate; assure employees know where job descriptions are located for reference by September 2023	[between 6/1/2023 and 9/29/2023]	% Complete
	1.1.3.4	[L] Burns, Rebecca Gruner, Brenae	[Project] Explore the development of career ladders for employees to seek advancement opportunities and aid in succession planning by January 2024	[between 10/1/2023 and 1/31/2024]	% Complete

Objective 1.1.4: Develop and enhance employee satisfaction beginning in October 2023 and on an ongoing basis. **Lead:** Burns, Rebecca
 Objective % Done: 0 % Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.4.1	[L] Burns, Rebecca	[Project] Create multi-department and level employee satisfaction team by January 2023	[between 11/1/2022 and 12/30/2022]	% Complete
Notes: The Agency is still in the process of organizing this committee. Multiple calls for staff members who would like to volunteer to be a part of this committee have been made, but we are still lacking a complete committee. Work should begin shortly.					
	1.1.4.2	[L] Burns, Rebecca Gruner, Brenae	[Project] Create opportunities for staff to express their level of job satisfaction by September 2023	[between 4/3/2023 and 9/29/2023]	% Complete

Initiative Communication and Advocacy 2:

Goal Assure a strong internal and external communication strategy to promote public
2.1: health advocacy and to extend the reach of public health

Objective 2.1.1: Develop and implement an internal communication plan by June 2023 **Lead:** Bergmooser, Alex

Objective % Done: 0 % Activities Sum: 0

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.1.1	[L] Englehart, Joshua Bergmooser, Alex	[Project] Maintain a multi-departmental and multi-level staff committee to develop internal communication plan by January 2023	[between 10/1/2022 and 12/31/2022]	% Complete
<p>Notes: The committee has been established and includes the following members: Joshua Englehart (chair), Health Educator; Rachael Wall (co-Chair), Community Health Worker; Candy Cox, Clinic Administrative Assistant; Shelby Ward, Clinic Supervisor; Brandie Lennox, EH Administrative Assistant; Stephanie Hightree, CSHCS Representative; Lisa Redmond, Outreach Specialist; and Diana Rogers, Administrative Support Clerk.</p> <p>Work on this activity has lagged a bit, but is ongoing. The committee began meeting in early April 2023 and will meet the first Friday of each month at 9:00 AM.</p>					
	2.1.1.2	[L] Hicks, Justin Elliott, Alan	[Project] Evaluate share drive system and provide staff access and training by June 2023	[between 3/1/2023 and 6/30/2023]	% Complete
	2.1.1.3	[L] Bergmooser, Alex Dewey, Kristina	[Timeline] Create and provide to all agency staff, department and program meeting schedules on an annual basis starting in 2023	Meeting Schedule Provided to Staff measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	15.3% of Timeline Starting 3/1/2023
<p>Notes: A calendar has been created and is located M:\Staff Information\Communications. This calendar was presented to the staff at the quarterly staff meetings held on March 7, 8, & 9.</p>					

Objective 2.1.2: Develop and foster relationships with stakeholders to support agency mission and vision starting in 2023 and on a continual basis **Lead:** Bergmooser, Alex

Objective % Done: **0 %** Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.2.1	[L] Bergmooser, Alex Dewey, Kristina	[Project] Assess who the current and potential stakeholders are for the agency and create opportunities for engagement by June 2023	[between 4/1/2023 and 6/30/2023]	% Complete
	2.1.2.2	[L] Bergmooser, Alex Dewey, Kristina	[Project] Develop a stakeholder email distribution list to share relevant agency, program, and emerging health issues information by September 2023	[between 7/1/2023 and 9/30/2023]	% Complete
	2.1.2.3	[L] Bergmooser, Alex Dewey, Kristina	[Project] Seek out relationships with college and vocational programs to encourage public health as a career and staff recruitment by September 2024	[between 10/1/2023 and 9/30/2024]	% Complete
	2.1.2.4	[L] Bergmooser, Alex Dewey, Kristina	[Project] Share stakeholder events, information on social media platforms and with staff starting in April 2023	[between 4/1/2024 and 4/30/2024]	% Complete
<p>Notes: There is an error in the target date for this activity. It should have been targeted for April 2024, after the work to assess the current and potential stakeholders has been completed. Target date adjusted from April 2023 to April 2024.</p>					

Objective 2.1.3: Develop and implement an external communication plan by January 2024 **Lead:** Bergmooser, Alex

Objective % Done: **0 %** Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.3.1	[L] Bergmooser, Alex Dewey, Kristina	[Project] Maintain a multi-departmental and multi-level staff committee to develop an external communication plan by January 2024	[between 1/1/2023 and 1/1/2024]	% Complete
<p>Notes: Work has not yet started on this activity. The committee will first focus on the Internal Communications plan called for in 2.1.1.</p>					
	2.1.3.2	[L] Bergmooser, Alex Dewey, Kristina	[Project] Explore the opportunities available to provide translation services to the public through staff, partners, and media by June 2024	[between 1/1/2024 and 6/30/2024]	% Complete

Objective 2.1.4: Expand the behavioral health collaboration by March 2023 **Lead:** Bergmooser, Alex

Objective % Done: **0 %** Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.4.1	[L]	[Project] Develop and disseminate informational materials for the 988 Hotline by January 2023	[between 10/1/2022 and 12/31/2022]	% Complete

		Alex Dewey, Kristina			
	2.1.4.2	[L] Bergmooser, Alex Dewey, Kristina	[Project] Assess the current behavioral health programs available within the district and share with staff and persons served by January 2023	[between 10/1/2022 and 12/31/2022]	% Complete
	Notes:	Assessment is ongoing, but Stay Well resources were shared with the BHSJCHA team in December, letting them know that the resources are available for clients but can also be used by staff. Staff were also provided information on how to participate in Stay Well discussion groups in November.			
	2.1.4.3	[L] Bergmooser, Alex Dewey, Kristina	[Project] Continue discussions with behavioral health organizations within the district to determine how our agency can collaborate and be of assistance starting in October 2022 and ongoing basis	[between 10/1/2022 and 10/2/2026]	% Complete
	Notes:	Conversations and collaborations are ongoing and occur monthly with behavior health organizations due to our participation in the county collaboratives. One recent example that falls outside of those meetings involves a request by residents of Waldron to establish health care in their community. The advocacy group brought together the LHD and the hospital for discussion, but LHD staff identified that they were missing Lifeways to cover behavior health. LHD staff attended a meeting to discuss and understand more deeply the needs and wants in April.			
	2.1.4.4	[L] Bergmooser, Alex Dewey, Kristina	[Project] Provide staff with mental health educational opportunities to recognize behaviors, situations and the prevention and intervention resources available by December 2022	[between 10/1/2022 and 12/31/2022]	% Complete
	Notes:	Ongoing work to identify resources, but Stay Well resources were shared with the BHSJCHA team in December, letting them know that the resources are available for clients but can also be used by staff. Staff were also provided information on how to participate in Stay Well discussion groups in November			

Initiative Programming and Policy

3:



Goal Ensure programming policies and procedures are meeting the requirements and 3.1: needs of the organization



Objective 3.1.1: Review all existing policies for relevance by January 2024

Lead:

Objective % Done: 0 %

Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.1.1	[L] Burns, Rebecca	[Project] Develop and implement timelines to ensure program policy reviews and revisions take place on a scheduled basis by January 2023	[between 10/1/2022 and 12/31/2022]	100% Complete
	Notes:	The VMGS Dashboard will keep track of the metric to ensure policies are reviewed every year. As policies are loaded into the dashboard, they will have dates assigned, and will automatically flag for review after 80% of the year is completed.			
	3.1.1.2	[L] Burns, Rebecca	[Project] Evaluate the existing structure to our agency personnel policy committee and identify areas of opportunity for improvements by September 2023	[between 4/1/2023 and 9/30/2023]	% Complete
	3.1.1.3	[L] Burns, Rebecca	[Project] Present policy revisions to board of health for review and approval on an ongoing basis as necessary	[between 12/1/2022 and 1/31/2023]	% Complete
	Notes:	The Personnel Policy Committee (PPC) met to review the Personnel Policy manual. Updates to the Personnel Policy manual will be reviewed and approved by the Board of Health On March 23, 2023. The PPC is currently working on updates to the Exposure Control Plan and the Chemical Hygiene Plan.			



Objective 3.1.2: Conduct a CHNA and use this to assess the need for additional programs and service delivery methods to meet community needs by June 2023

Lead:

Objective % Done: 0 %

Activities Sum:

Notes: On October 6, 2023, the Board of Health approved a proposal from Social Data LLC to work with staff and community partners on a community health needs assessment. The work is currently ongoing

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.2.1	[L] Bergmooser, Alex Burns, Rebecca	[Project] Establish a community health needs assessment team comprised of community partners and staff by January 2023	[between 10/1/2022 and 12/31/2022]	100% Complete
	Notes:	The assessment team was created and began work in December 2023. The team consists of Rebecca Burns, Alex Bergmooser, Theresa Fisher from BHSJCHA, an independent contractor, Marcus Cheatham, and staff from the following community partner agencies: St. Joseph County Human Service Commission, Branch County Collaborative Network, Hillsdale County Human Service Network, Great Start Collaboratives (all 3 counties), Lifeways, Pines Behavioral Health, Pivotal (previously St. Joseph CMH).			

	3.1.2.2	[L] Bergmooser, Alex Burns, Rebecca	[Project] Collect and analyze primary and secondary community data through a variety of sources and methods by June 2023	[between 1/1/2023 and 6/30/2023]	% Complete
<p>Notes: Work is ongoing on the CHNA process and is on track to be completed on time.</p> <p>Marcus Cheatham provided data review to each county collaborative in December and January, to discuss the currently available information about each county.</p> <p>Updated Community Health Rankings were distributed and discussed with all elected state legislators at the Day the the Capital Event in April</p>					
	3.1.2.3	[L] Bergmooser, Alex Burns, Rebecca	[Project] Present data to partners, stakeholders, and community members to identify and prioritize health issues that will be included in community health improvement plan by June 2023	[between 11/1/2022 and 6/30/2023]	% Complete
<p>Notes: Information will be shared when assessment is completed. We are still expecting to complete this work on schedule.</p>					
	3.1.2.4	[L] Bergmooser, Alex Burns, Rebecca	[Project] Determine the assets and resources available to address the prioritized health issues by June 2023	[between 7/1/2023 and 10/31/2023]	% Complete
<p>Notes: There is an error in the planned date for this activity. This work cannot be completed until after the needs assessment is done. Date changed from June 2023 to October 2023. The Agency received the first draft of the CHNA in late April. The group is currently working on the CHIP.</p>					
	3.1.2.5	[L] Bergmooser, Alex Burns, Rebecca	[Project] Seek out public and stakeholder input regarding necessary programs and service delivery methods and identify gaps within the district by June 2023	[between 1/1/2023 and 6/30/2023]	% Complete
<p>Notes: Work ongoing. Initial input was provided during the early planning process, to discuss the project and solicit feedback. Additionally, Focus groups with key partners are scheduled for late April and May. The Great Start Collaboratives and Pines Behavioral have scheduled focus groups.</p>					
	3.1.2.6	[L] Bergmooser, Alex Burns, Rebecca	[Project] Work with community partners to assure community needs are met that are beyond the scope of delivery by the agency by June 2023	[between 7/1/2023 and 10/31/2023]	% Complete
<p>Notes: There is an error in the planned date for this activity. This work cannot be completed until after the needs assessment is done. Date changed from June 2023 to October 2023. Some unmet needs may be beyond what the LHD can achieve. We will endeavor to try to figure out how to meet unmet needs, but should not assume we can automatically solve all.</p>					
	3.1.2.7	[L] Bergmooser, Alex Burns, Rebecca	[Project] Develop goals, objectives, and a reporting process to monitor and sustain the process and health status by September 2023	[between 7/1/2023 and 9/30/2023]	% Complete
	3.1.2.8	[L] Bergmooser, Alex Burns, Rebecca	[Timeline] Review and update the plan on an annual basis	Review and Update CHIP measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	56.7% of Timeline Starting 10/1/2022




Objective 3.1.3: Implement the VMSG dashboard to track program compliance by December 2022

Lead:

Objective % Done: 0 %

Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.3.1	[L] Burns, Rebecca	[Project] Implement agency-wide educational opportunities on the use of VMSG software and dashboard functions for program compliance by December 2022	[between 10/1/2022 and 12/31/2022]	% Complete
<p>Notes: One Third (1/3) of the staff have received introductory training on the dashboard. More people will be trained as work plans where they are assigned responsibilities are added to the system.</p>					
	3.1.3.2	[L] Burns, Rebecca	[Project] Upload the strategic planning objectives into VMSG by December 2022	[between 10/1/2022 and 12/31/2022]	100% Complete
<p>Notes: Plan is uploaded and being monitored. There is still ongoing work on assigning activities to staff.</p>					
	3.1.3.3	[L] Burns, Rebecca	[Project] Upload program performance measures at least three programs into VMSG by January 2023 and quarterly thereafter until all programs are included in the software system	[between 1/1/2023 and 1/31/2023]	% Complete




Notes: We currently only have MCH and the Strategic Plan live. We are working to load policies and local accreditation to the system.					
	3.1.3.4	[L] Burns, Rebecca	[Project] Monitor the VMSG dashboard on a quarterly basis for program compliance beginning in March 2023	[between 3/1/2023 and 3/31/2023]	% Complete
Notes: The plans that have been added are being actively monitored, but we are lagging in getting plans added.					



Objective 3.1.4: Implement the VMSG dashboard to track policy compliance by January 2024 **Lead:**

Objective % Done: **0 %** Activities Sum:

Notes: This is ahead of schedule, as it will lay the groundwork for other items to come. If policies compliance is implemented first, it makes monitoring compliance with Michigan Public Health Accreditation easier

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.4.1	[L] Burns, Rebecca	[Project] Implement agency-wide educational opportunities on the use of VMSG software and dashboard functions for policy compliance by January 2024	[between 1/1/2023 and 12/31/2023]	% Complete
	3.1.4.2	[L] Burns, Rebecca	[Project] Upload the policy performance measures of at least three programs into VMSG by January 2025 and quarterly thereafter until all policies are included in the software system	[between 1/1/2024 and 1/31/2024]	% Complete
	3.1.4.3	[L] Burns, Rebecca	[Project] Monitor the VMSG dashboard on a quarterly basis for policy compliance beginning in March 2025	[between 4/1/2024 and 4/30/2024]	% Complete

PUBLIC COMMENT

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