

BOARD OF HEALTH

Agenda for May 27, 2021 at 9:00 AM via Zoom Meetings

<https://us02web.zoom.us/j/84567297950?pwd=SmdpZThRVk5Xbi9RamVCYWFoVkF4QT09>

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
 - o April 22, 2021 BoH Meeting*
 - o May 13, 2021 Work Meeting*
2. Public Comment
3. Health Officer’s Report
4. Medical Director’s Report
5. Committee Reports
 - a. Finance Committee – May 12, 2021 Minutes
 - b. Program, Policies, and Appeals – April 22, 2021 Minutes
6. Financial Reports
 - a. Approve Payments*
 - b. Review Financials
7. Unfinished Business
 - a. Process for Approving Committee Meeting Minutes*
8. New Business
 - a. BOH Meeting Schedule*
 - b. Hazard Pay*
 - c. Vacation Accrual Maximum*
 - d. MERS Defined Benefit Plan Payment*
9. Departmental Reports
 - a. Personal Health & Disease Prevention
 - b. Environmental Health
 - c. Area Agency on Aging
10. Adjournment - Next meeting: June 24, 2021

Educational Presentation on the BHSJ Agency Overview and Annual Report Preview

April 22, 2021 – Board of Health Meeting Minutes

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

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

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

Mr. Wiley moved to approve the minutes from the previous meeting with support from Mr. Matthew. (Mr. Wiley, yes; Ms. Pangle, yes; Mr. Matthew, yes; Mr. Houtz, yes; Mr. Hoffmaster, yes; Mr. Leininger, yes).

Public comment:

- None

Rebecca Burns, Health Officer, reviewed her monthly report. Items discussed: Vaccinations Continue, COVID-19 Cases, New Medical Director Candidate, Mobile Clinic Van, COVID-19 testing, Board of Health Education, Health Education and Promotion Updates, MCDC Update, and Strategic Planning.

Dr. Vogel, Medical Director, reviewed the Medical Director's monthly report. This month's report was on Autism Spectrum Disorder – A Controversy.

Committee Reports:

- Finance Committee – Did not meet.
- Program, Policy, and Appeals Committee – Met on 4/22/2021.

Financial Reports/Expenditures

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

Unfinished Business

- There was no unfinished business to discuss.

New Business:

- Mr. Leininger moved approve the Driving Policy as presented with support from Mr. Matthew. A roll call vote was taken and the motion passed 6-0 (Mr. Wiley, yes; Ms. Pangle, yes; Mr. Matthew, yes; Mr. Houtz, yes; Mr. Hoffmaster, yes; Mr. Leininger, yes).
- Mr. Wiley moved to temporarily amend the food service fee schedule for the year of 2021 to delay the assessment of the late fees for food service licenses to August 1, 2021 based on the COVID-19 crisis, with support from Mr. Matthew. A roll call vote was taken and the motion passed 6-0 (Mr. Wiley, yes; Ms. Pangle, yes; Mr. Matthew, yes; Mr. Houtz, yes; Mr. Hoffmaster, yes; Mr. Leininger, yes).
- No action was taken on the process for approving committee meeting minutes. This item will be moved to unfinished business and taken up again when additional information is available.

Departmental Reports:

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

With no further business the meeting was adjourned at 10:35 AM.

Respectfully Submitted by:
Theresa Fisher, BS



May 13, 2020 – Board of Health Committee of the Whole Work Meeting Minutes

The Branch-Hillsdale St. Joseph Community Health Agency Board of Health Committee of the Whole work meeting was called to order at 11:30 a.m. by Chairman, Kathy Pangle, with roll call as follows: Mark Wiley, Kathy Pangle, Tom Matthew, Jon Houtz, Jared Hoffmaster, and Brent Leininger.

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

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

Public comment:

- None

Rebecca Burns, Health Officer, reviewed the updated In-Person Education Quarantine Guidance Update issued on 5/13/2021. The guidance order was read by the Secretary to the Board of Health during the meeting. Discussion took place regarding this communication but no votes were held, nor decisions made.

New Business:

- None

With no further business the meeting was adjourned at 12:42 PM.

Respectfully Submitted by:

Theresa Fisher, BS

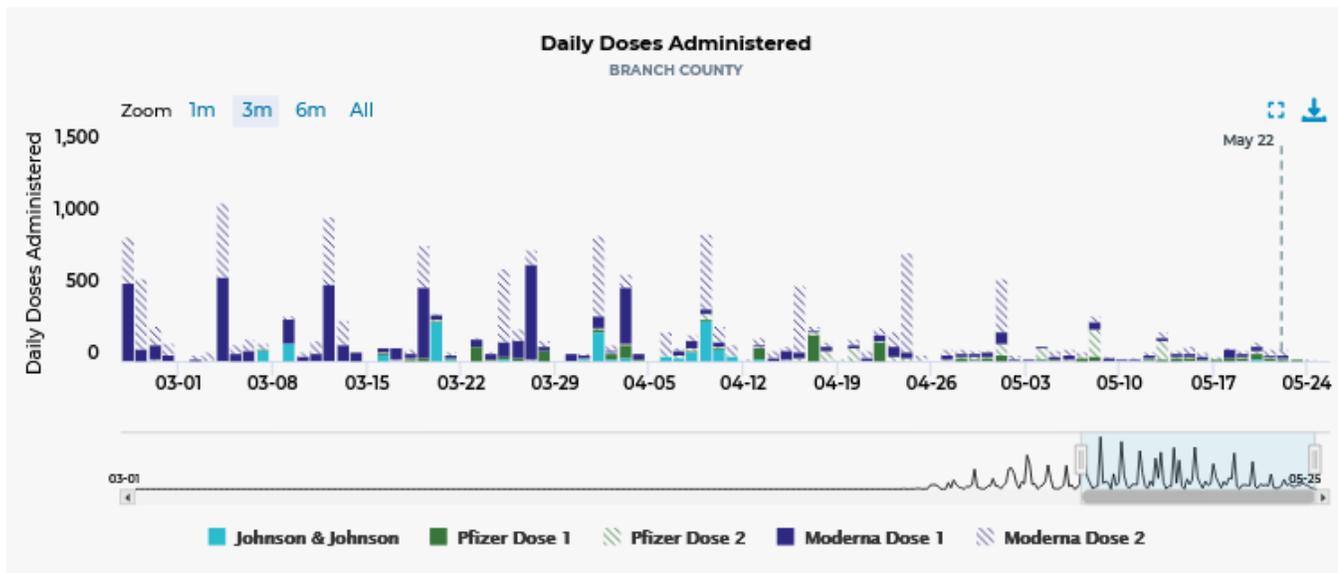


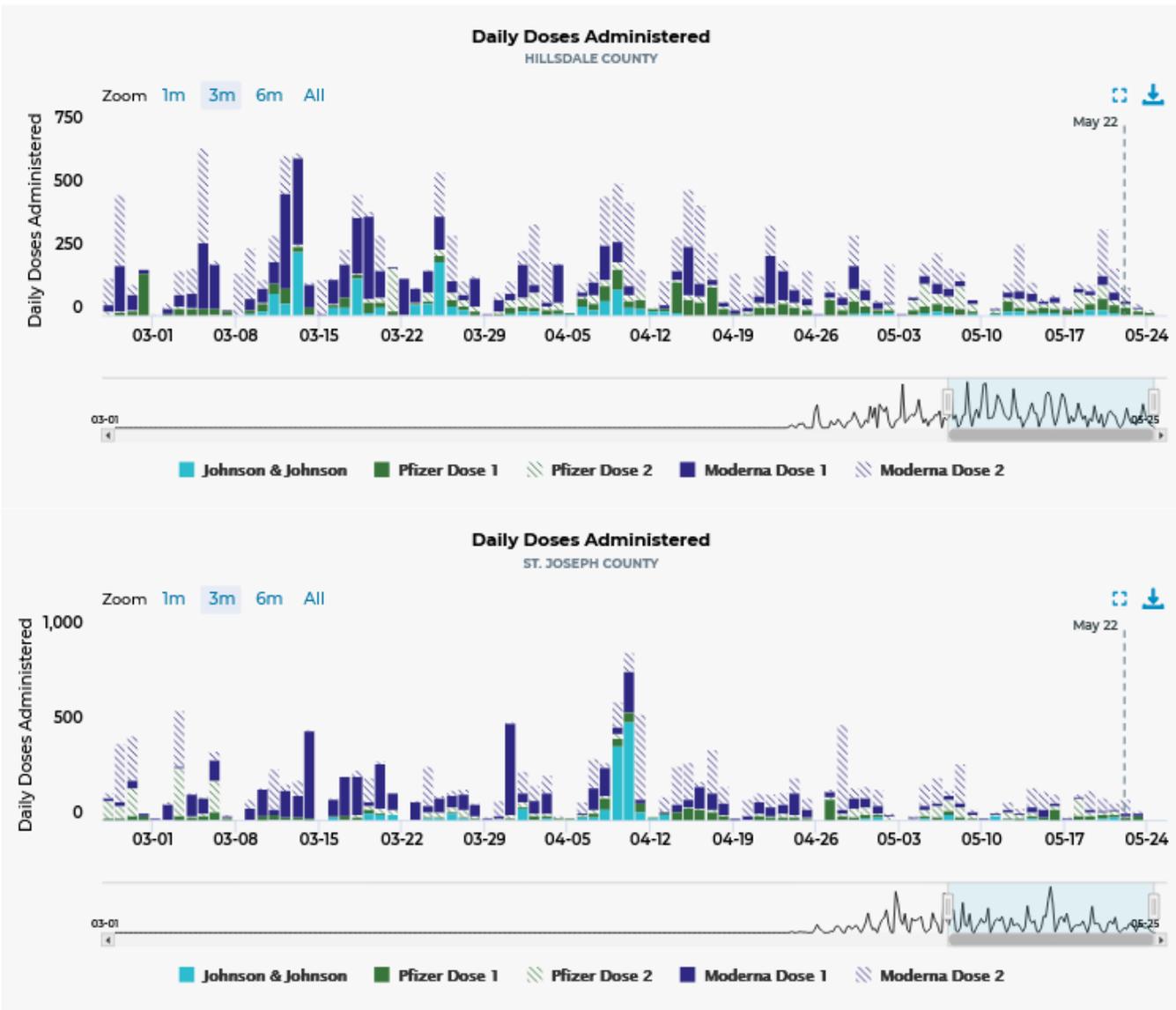
Health Officer’s Report to the Board of Health for May 27, 2021
Prepared by: Rebecca A. Burns, M.P.H., R.S.

Agency Updates

COVID-19 Vaccination Continues: The Agency continues to vaccinate individuals in the tri-county area but at a much slower pace. When Pfizer received EUA authorization for 12-15 year olds we saw a small spike, but that seems to have slowed as well. Plans are in process to bring vaccines to communities now and throughout the summer and fall. We will be in attendance at Project Connect in Hillsdale on Wednesday, June 9th. Project Connect for Hillsdale County will be from 10 am to 1 pm at the Fairgrounds that day and the Agency will be represented with clinical staff for vaccine administration and Health Education and Promotion staff for outreach. We will continue to do additional community events as they roll out this summer. Vaccine appointments can be made from our website at www.bhsj.org/scheduling and we have opportunities to get vaccinated available in each county each week. The Agency has all three vaccines available, so individuals can choose the one they are interested in receiving.

I want to share the Daily Doses Administered graphs that are available on the mistartmap.info page. They are a quick visual on what has happened with regards to demand for vaccination in recent weeks. We think of it as “falling off a cliff”.





Vaccination totals and the corresponding percent for the past 3 months are provided here:

As of March 23, 2021

County	Dose	Age 16-19	Age 20-29	Age 30-39	Age 40-49	Age 50-59	Age 65+	Overall
St. Joseph	Initiation	73 – 2.4%	423 – 5.8%	742 – 10.3%	989 – 14.4%	3617 – 29.4%	6493 – 57.7%	12337 – 25.8%
	Completion	23 – 0.8%	222 – 3.1%	448 – 6.2%	536 – 7.8%	1197 – 9.7%	4037 – 35.9%	6463 – 13.5%
Branch	Initiation	47 – 2.2%	326 – 6.5%	529 – 10.2%	775 – 15.0%	2743 – 30.4%	4731 – 58.2%	9151 – 26.4%
	Completion	25 – 1.2%	198 – 3.9%	352 – 6.8%	540 – 10.4%	1190 – 13.2%	3223 – 39.6%	5528 – 15.9%
Hillsdale	Initiation	37 – 1.4%	248 – 4.6%	448 – 9.4%	618 – 11.9%	2328 – 23.6%	4395 – 47.8%	8074 – 21.8%
	Completion	16 – 0.6%	163 – 3.0%	322 – 6.7%	487 – 9.4%	1149 – 11.7%	3142 – 34.1%	5279 – 14.3%

As of April 24, 2021

County	Dose	Age 16-19	Age 20-29	Age 30-39	Age 40-49	Age 50-64	Age 65+	Overall
St. Joseph	Initiation	404 – 13.3%	1065 – 14.7%	1478 – 20.6%	1918 – 27.9%	5323 – 43.2%	7327 – 65.1%	17517 – 36.6%
	Completion	208 – 6.8%	678 – 9.4%	1059 – 14.8%	1431 – 20.8%	4425 – 35.9%	6664 – 59.2%	14467 – 30.2%
Branch	Initiation	258 – 12.2%	773 – 15.3%	1042 – 20%	1432 – 27.7%	3904 – 43.3%	5309 – 65.3%	12719 – 36.7%
	Completion	97 – 4.6%	435 – 8.6%	670 – 12.9%	991 – 19.1%	3039 – 33.7%	4747 – 58.4%	9980 – 28.8%
Hillsdale	Initiation	287 – 11.1%	682 – 12.6%	867 – 18.2%	1188 – 22.9%	3783 – 38.4%	5398 – 58.7%	12208 – 33.0%
	Completion	76 – 2.9%	328 – 6.1%	570 – 11.9%	817 – 15.8%	2855 – 29.0%	4811 – 52.3%	9457 – 25.6%

As of May 25, 2021

County	Dose	Age 12-15	Age 16-19	Age 20-29	Age 30-39	Age 40-49	Age 50-64	Age 65+	Overall
St. Joseph	Initiation	268 – 7.8%	663 – 21.8%	1446 – 20.0%	1876 – 26.2%	2412 – 35.1%	6173 – 50.1%	7841 – 69.7%	20682 – 40.3%
	Completion	0	481 – 15.8%	1166 – 16.1%	1572 – 21.9%	2075 – 30.2%	5573 – 45.3%	7387 – 65.6%	18257 – 35.6%
Branch	Initiation	139 – 5.9%	414 – 19.6%	1061 – 21.0%	1298 – 24.9%	1724 – 33.3%	4446 – 49.4%	5640 – 69.4%	14724 – 39.7%
	Completion	0	289 – 13.7%	833 – 16.5%	1084 – 20.8%	1502 – 29.0%	4021 – 44.6%	5289 – 65.1%	13019 – 35.1%
Hillsdale	Initiation	151 – 6.6%	445 – 17.2%	932 – 17.2%	1066 – 22.3%	1454 – 28.1%	4320 – 43.9%	5857 – 63.6%	14227 – 36.2%
	Completion	0	315 – 12.2%	731 – 13.5%	918 – 19.2%	1272 – 24.6%	3937 – 40.0%	5440 – 59.1%	12613 – 32.1%

COVID-19 Cases: All three counties are continuing to see a downward trend in percent positivity. The region that Hillsdale is located in has dropped to Level D, and Hillsdale County is also at Level D for risk. Branch and St. Joseph counties are in the Kalamazoo Region which is also at Level D, but both of these counties are still at risk Level E.

As Dr. Vogel has explained in the past, the real concern is that with every new COVID case there is a chance for the virus to mutate and potentially mutate to the super-spreader, more virulent virus. This is why it is important to continue to have individuals who test positive for COVID-19 to isolate from others to prevent spread and for their close contacts to quarantine while they wait to see if they develop the disease. Even better than that is for more and more individuals to get vaccinated.

Dr. Vogel and I distributed updated guidance to our local schools on May 13th. I have included that at the end of my report.

American Rescue Plan Funds: As the counties make plans for these funds, Your Local Health Department asks that you keep our Agency in mind. We currently have grant funds that are coming to the Agency for COVID-19 work, for example, work in Case Investigation and Contact Tracing and a separate grant for COVID Immunization, but these funds have specific uses attached. As we look to the future and the public health needs in the tri-county area we would like to be funded to meet those needs. I am available to be present for any discussions at the county level on how some of these dollars can be used for public health and safety and support for our programs targeted at Aging. Thank you.

New Medical Director Candidate: The Program, Policy, and Appeals Committee has interviewed all candidates for Medical Director and narrowed the field to the top two. One of the second-round interviews is complete with one more scheduled on June 10th. The goal is to have a candidate selected for full Board of Health action at the June 24th meeting.

Mobile Clinic Van: The mobile clinic van now has a license plate and is on the road. You may have seen it at a local high school, local business, or at the home of a homebound individual. Carol Drews, our nurse who is assigned to the van, is out daily with it to continue the mission of the health department by outreaching to individuals, families, and the community to promote optimal health and prolong life. We have posted for a Clinic Clerk that will be assigned to the van and this will complete the “mobile clinic van team” of a nurse and clerk.

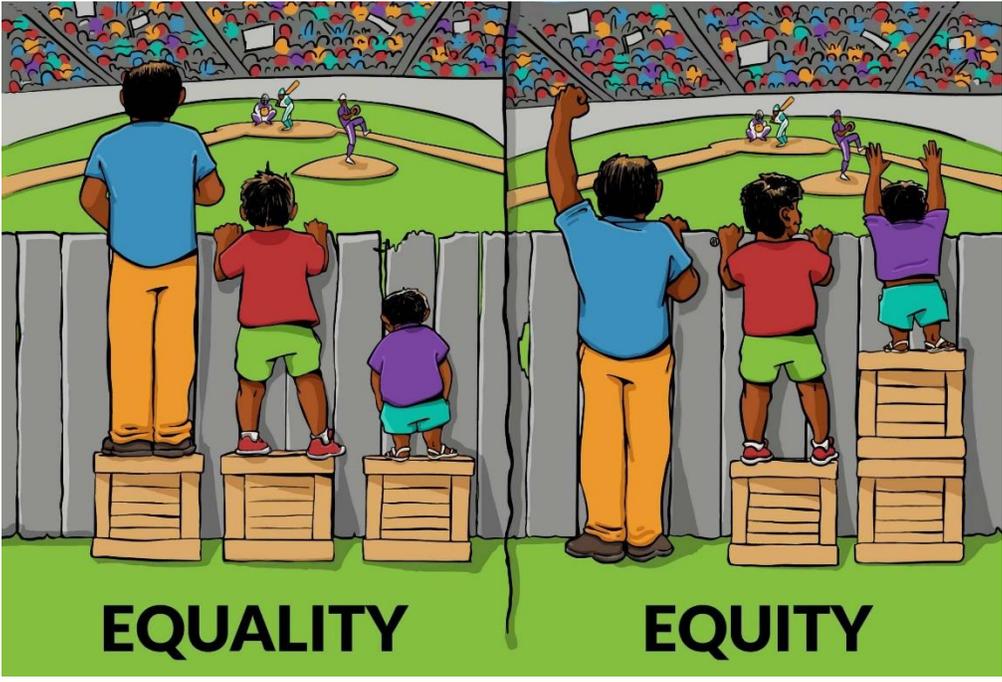
COVID-19 Testing: We continue to offer COVID-19 testing at our facility in Coldwater on Thursday’s but have expanded to providing testing in Hillsdale on Friday’s as of 5/21 and in Three Rivers as of 5/28. Honu is providing no-cost rapid testing in addition to the PCR test. Providing this opportunity in each county involves no staff time from our Agency team and supports existing testing available in the community. This arrangement is working out well and individuals are utilizing the testing sites.

Board of Health Education: Today each Director will be providing an overview of the services offered in their department.

Health Promotion & Education Updates – Alex now has both positions in his department filled. The Health Educators he has brought on are Alaa Sleyman and Kris Dewey and both bring significant talents to the Health Promotion and Education section. He is working to finalize a part-time position that will be assigned to the Promedica School Health Clinics, a contract that the health department has with Promedica for this service. Now that we have everyone on board that will support the local health department, the work of designing the workplan for Health Promotion & Education has begun.

Strategic Planning: This continues to be paused.

Because I find it helpful to be reminded to consider equity in all we do in Public Health, I’m keeping this graphic on my report.



EQUALITY

EQUITY



May 13, 2021

Dear Superintendents,

Recent media reports have focused a great deal of attention on student quarantine after close contact with a confirmed or probable case of COVID-19. Today, the Branch-Hillsdale-St. Joseph Community Health Agency is providing updated guidance on quarantine. Please find that attached.

The Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA) is providing updated guidance for students in classroom and bus settings where strict mitigation measures are in place. When this is the case the determination for close contact can be modified as outlined in the attachment. This action takes into account the data shared by our local schools on the small number of students that have become a “case” after a close contact exposure where they have been placed in quarantine. This data is consistent with studies that have been conducted in the United States and are referenced in the attachment. Late last week, BHSJCHA modified its recommendation to shorten the quarantine period from 14 to 10 days. BHSJCHA stands by its recommendation of a 10-day quarantine for those with close contact to a confirmed or probable case of COVID-19.

BHSJCHA has remained constant in our advice for local schools, providing guidance that we understand will best protect the students and staff in school buildings. It is our common practice to work with schools in collaboration and we appreciate the cooperation that families and schools have shown during this pandemic. At times our team of nurses and case investigators have used the terms guidance, recommended, and required interchangeably, but we now know as a result of recent lawsuits in Michigan regarding quarantine, that only through public health orders can our work be required.

At this time, BHSJCHA does not intend to issue public health orders regarding quarantine, but continues to strongly recommend quarantine guidance and will continue to closely monitor local data to determine if actions are necessary to protect health and safety. BHSJCHA continues to believe that quarantine of close contacts is a critical tool in preventing the spread of illness, especially to vulnerable community members.

Sincerely,

Rebecca A Burns, MPH, RS
Health Officer

H. Lauren Vogel, DO, MPH
Medical Director

In-Person Education Quarantine Guidance Update

Issued 5/13/2021

Contact tracing in educational settings remains a mandate outlined in the current Michigan Department of Health and Human Services (MDHHS) Epidemic Orders. The May 6, 2021 [Gatherings and Face Mask Order](#) issued by MDHHS states: “*Upon request, businesses, schools and other facilities must provide names and phone numbers of individuals with possible COVID-19 exposure to MDHHS and local health departments to aid in contact tracing and case investigation efforts.*”

Close contacts of confirmed or probable COVID-19 cases should be identified through contact tracing. Close contacts are defined as individuals who are within 6 feet of case for a cumulative time of 15 minutes or more¹.

As per Centers for Disease Control and Prevention (CDC) and MDHHS guidelines, close contacts are asked to quarantine. However, for **students** exposed in a classroom or bus setting where 1) all individuals (case and close contacts) are wearing masks covering their nose and mouth and 2) infection control guidelines are being followed (as outlined in the MDHHS Return to School Toolkit), the following mitigation measures can be considered:

Students (who are close contacts) identified between 3 to 6 feet:

- Notify students of exposure and ask to monitor their health for 14 days from the date of exposure. If they feel ill or develop symptoms concerning for COVID-19, they should isolate at home and undergo COVID-19 testing.
- These students do not have to quarantine and can continue to attend school.
- BHSJCHA recommends that these students be tested between days 4 and 6 if school resources allow to aid in identifying asymptomatic students.

Students (who are close contacts) identified within 3 feet:

- These students should quarantine as per Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA) quarantine protocol of 10 days.

These adapted mitigation measures DO NOT apply to exposures outside the classroom or bus setting. Close contacts identified in all other settings (i.e. sports, extracurricular activities, households, etc.,) are asked to quarantine per BHSJCHA quarantine protocol.

¹Those who have had COVID-19 within the past 3 months and those who are fully vaccinated (2 weeks after their last dose of an FDA approved COVID-19 vaccine) do not need to quarantine if they are exposed.

Additionally, these adapted mitigation measures DO NOT apply to staff identified as close contacts. The requirements of employees, including school employees, to isolate or quarantine under Public Act 339 of 2020 are not impacted by this change and remain in full effect pursuant to Michigan state law.

These adapted mitigation measures may be paused at the discretion of BHSJCHA due to heightened public health concerns such as identification of variants of concern or identification of an outbreak.

Rationale

The COVID-19 pandemic is a once-in-a-century crisis. The SARS-CoV-2 virus, which causes COVID-19, is referred to as a “novel coronavirus” because it is new and scientists, physicians, and public health experts are continually learning about it. As we learn more through studies and real-world epidemiologic evidence, we can adjust the public health mitigation strategies designed to control the pandemic.

The definition of a close contact is a standard definition that has been used for other diseases caused by coronaviruses such as SARS and MERS. The mitigation measures (i.e. quarantine and self-monitoring) associated with close contacts are also standard practices. Based on growing epidemiologic state and national studies as well as data from BHSJCHA and local schools, secondary attack rates in the classroom setting are lower than in other settings and allow for additional flexibility in establishing mitigation measures. While adapted mitigation measures carry more risk of allowing transmission than standard measures, these risks must be weighed against risks from increased quarantine periods.

The CDC [Science Brief: Transmission of SARS-CoV-2 in K-12 schools](#), updated 3/19/21, outlines the evidence of physical distancing and states: *“However, emerging international and U.S. evidence suggests layering of other prevention strategies is effective at reducing SARS-COV-2 transmission risk even with physical distances of less than 6 feet between students in classrooms.”* (1) Studies from the United States and abroad that are cited in this brief indicate low secondary attack rates. For example, an analysis from K-6 schools in Utah showed a secondary attack rates of 0.7% in schools with students distanced less than 6 feet who were wearing masks. Analyses from the Massachusetts Department of Education found no statistically significant differences in secondary attack rates in schools that used 3 feet vs 6 feet physical distancing (2). Ohio Schools COVID-19 Evaluation Research team evaluated the secondary attack rates of close contacts versus a similar control group of non-exposed students and found similar attack rates (2.9% vs 3.5%) (3). Locally, 3 vs 6 feet distancing has not been evaluated, but BHSJCHA has found evidence that student-to-student in-class transmission over the course of the school year has been limited despite in-person instruction (data not shown). Given the growing evidence of limited in-class transmission and low risk of transmission even with distances less than 6 feet in K-12 schools, it is reasonable to implement different mitigation measures for students (who are close contacts) distanced within 3 feet versus 3-6 feet in the classroom setting where masks are universally worn and rigorous infection control plans have been implemented.

References

1. **CDC.** *Science Brief: Transmission of SARS-CoV-2 in K-12 schools.* Available from: https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/transmission_k_12_schools.html : s.n., 2021.
2. **van den Berg P, Schechter-Perkins EM, Jack RS, et al.** *Effectiveness of three versus six feet of physical distancing for controlling spread of COVID-19 among primary and secondary students and staff: A retrospective, state-wide cohort study.* Available from: <http://dx.doi.org/10.1093/cid/ciab230> : Clin Infect Dis, 2021.
3. **The Ohio Schools COVID-19 Evaluation Research Team.** *Ohio Schools COVID-19 Evaluation: Final Report.* Available from: https://coronavirus.ohio.gov/static/responsible/schools/OSCE_evaluation.pdf : s.n.



Coronavirus State and Local Fiscal Recovery Funds

The American Rescue Plan will deliver \$350 billion for state, local, territorial, and Tribal governments to respond to the COVID-19 emergency and bring back jobs.

The Coronavirus State and Local Fiscal Recovery Funds provide a substantial infusion of resources to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Funding Objectives

- **Support urgent COVID-19 response efforts** to continue to decrease spread of the virus and bring the pandemic under control
- **Replace lost public sector revenue** to strengthen support for vital public services and help retain jobs
- **Support immediate economic stabilization** for households and businesses
- **Address systemic public health and economic challenges** that have contributed to the inequal impact of the pandemic

Eligible Jurisdictions & Allocations

Direct Recipients

- States and District of Columbia (\$195.3 billion)
- Counties (\$65.1 billion)
- Metropolitan cities (\$45.6 billion)
- Tribal governments (\$20.0 billion)
- Territories (\$4.5 billion)

Indirect Recipients

- Non-entitlement units (\$19.5 billion)



Support Public Health Response

Fund COVID-19 mitigation efforts, medical expenses, behavioral healthcare, and certain public health and safety staff



Address Negative Economic Impacts

Respond to economic harms to workers, families, small businesses, impacted industries, and the public sector



Replace Public Sector Revenue Loss

Use funds to provide government services to the extent of the reduction in revenue experienced due to the pandemic



Premium Pay for Essential Workers

Offer additional support to those who have and will bear the greatest health risks because of their service in critical infrastructure sectors



Water and Sewer Infrastructure

Make necessary investments to improve access to clean drinking water and invest in wastewater and stormwater infrastructure



Broadband Infrastructure

Make necessary investments to provide unserved or underserved locations with new or expanded broadband access



For More Information: Please visit www.treasury.gov/SLFRP

For Media Inquiries: Please contact the U.S. Treasury Press Office at (202) 622-2960

For General Inquiries: Please email SLFRP@treasury.gov for additional information



Example Uses of Funds

Support Public Health Response

- **Services to contain and mitigate the spread of COVID-19**, including vaccination, medical expenses, testing, contact tracing, quarantine costs, capacity enhancements, and many related activities
- **Behavioral healthcare services**, including mental health or substance misuse treatment, crisis intervention, and related services
- **Payroll and covered benefits** for public health, healthcare, human services, and public safety staff to the extent that they work on the COVID-19 response

Replace Public Sector Revenue Loss

- **Ensure continuity of vital government services** by filling budget shortfalls
- **Revenue loss is calculated** relative to the expected trend, beginning with the last full fiscal year pre-pandemic and adjusted annually for growth
- **Recipients may re-calculate revenue loss** at multiple points during the program, supporting those entities that experience revenue loss with a lag

Water & Sewer Infrastructure

- **Includes improvements to infrastructure**, such as building or upgrading facilities and transmission, distribution, and storage systems
- **Eligible uses aligned to Environmental Protection Agency project categories** for the Clean Water State Revolving Fund and Drinking Water State Revolving Fund

Equity-Focused Services

- **Additional flexibility for the hardest-hit communities and families** to address health disparities, invest in housing, address educational disparities, and promote healthy childhood environments
- **Broadly applicable** to Qualified Census Tracts, other disproportionately impacted areas, and when provided by Tribal governments

Address Negative Economic Impacts

- **Deliver assistance to workers and families**, including support for unemployed workers, aid to households, and survivor's benefits for families of COVID-19 victims
- **Support small businesses** with loans, grants, in-kind assistance, and counseling programs
- **Speed the recovery of impacted industries**, including the tourism, travel, and hospitality sectors
- **Rebuild public sector capacity** by rehiring staff, replenishing state unemployment insurance funds, and implementing economic relief programs

Premium Pay for Essential Workers

- **Provide premium pay to essential workers**, both directly and through grants to third-party employers
- **Prioritize low- and moderate-income workers**, who face the greatest mismatch between employment-related health risks and compensation
- **Key sectors include** healthcare, grocery and food services, education, childcare, sanitation, and transit
- **Must be fully additive** to a worker's wages

Broadband Infrastructure

- **Focus on households and businesses** without access to broadband and those with connections that do not provide minimally acceptable speeds
- **Fund projects that deliver reliable service** with minimum 100 Mbps download / 100 Mbps upload speeds unless impracticable
- **Complement broadband investments** made through the Capital Projects Fund

Ineligible Uses

- **Changes that reduce net tax revenue** must not be offset with American Rescue Plan funds
- **Extraordinary payments into a pension fund** are a prohibited use of this funding
- **Other restrictions apply** to eligible uses

The examples listed in this document are non-exhaustive, do not describe all terms and conditions associated with the use of this funding, and do not describe all the restrictions on use that may apply. The U.S. Department of the Treasury provides this document, the State and Local contact channels, and other resources for informational purposes. Although efforts have been made to ensure the accuracy of the information provided, the information is subject to change or correction. Any Coronavirus State and Local Fiscal Recovery Funds received will be subject to the terms and conditions of the agreement entered into by Treasury and the respective jurisdiction, which shall incorporate the provisions of the Interim Final Rule and/or Final Rule that implements this program.

Medical Director's Report to the Board of Health
H. Lauren Vogel, D.O., M.P.H.
May 2021 - Vaccine Hesitancy in the COVID-19 Pandemic

In 2019 the World Health Organization (WHO) listed vaccine hesitancy as one of the top 10 threats to global health.¹ In 2021, the COVID-19 pandemic emphasizes continuance of this threat. Vaccine hesitancy is defined as reluctance or refusal to accept vaccination in spite of its proven potential to reverse the progress of deadly infectious disease.

As an older physician I have witnessed the devastating effects of preventable disease out of control. As a child I witnessed the effects of polio in our community. I visited playmates living in iron lungs and went to school with kids partially paralyzed and in braces. In 1953 when polio vaccine was introduced my family had no hesitancy in receiving the vaccine. Today, where are the summer epidemics of polio?

As a pediatric critical care specialist I cared for children with hemophilus sepsis which included meningitis and epiglottitis. These were highly infectious diseases with significant mortality or disability. In our PICU I cared for kids in coma and on ventilators, as many as 20 in a summer. In one August I had 17 kids with meningitis and lost 5. In 1987 the HiB vaccine was introduced. Within 2 years I rarely saw a patient with hemophilus sepsis. Today, where is this disease in our communities?

In the early days on the COVID-19 pandemic and after the availability of covid19 vaccines our health department sponsored vaccination clinics where over a 1000 patients were inoculated. Today our clinics vaccinate less than 100. Why, when in our district vaccination completion is less than 40% of the county populations?²

According to current dashboards, the US has over 32.7M covid19 cases and over 582 thousand deaths and the pandemic still surges throughout parts of the world.³ In Michigan neither our infection rates nor our covid19 death rates have plateaued and still show a rising curve. Newer variants (P1, B.1.617, B.1.351) that have higher infectivity and lethality are increasing in our counties. Prevention is the most effective management tool and this is achieved through vaccination.

Some of the causes for vaccination hesitancy can be traced to misinformation spread through the social media. In one resource,⁴ more than one-half of the public believes in one or more of the vaccination myths. These include: You can get COVID-19 from the vaccination; The vaccines contain fetal cells; The vaccine causes sterility; You should not get the vaccine if you have had the natural infection; COVID-19 can alter your DNA;

The vaccine contains a microchip tracker; The vaccines don't protect against the newer variants; The side-effects from the vaccination are worse than the disease. None of these are true. A poster (Myths vs Facts) published by the Association for Professionals in Infection and Epidemiology (APIC) refutes these myths and provides logical factual information.⁵

Our duty in public health must be to monitor the health status of our community, identify and investigate evolving health hazards, develop policies and plans to mitigate these hazards and protect the health of our community. We have a responsibility to inform, educate, and empower people about health issues. We need to serve this responsibility. Education is our best tool to accomplish this.

REFERENCE

1. Marchildon J. The Top 10 Global Health Threats for 2019, According to the WHO. Global Citizen. January 2019. <https://www.globalcitizen.org/en/content/top-health-threats-2019/>. Accessed May 2021.
2. COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU). JHU CSSE. May 2021. <https://www.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>. Accessed May 2021.
3. COVID-19 Vaccine Dashboard. Michigan Gov. May 2021. https://www.michigan.gov/coronavirus/0,9753,7-406-98178_103214-547150--,00.html. Accessed May 2021.
4. COVID-19 Vaccination Hesitancy. KFF. May 2021. <https://www.kff.org/coronavirus-covid-19/dashboard/kff-covid-19-vaccine-monitor-dashboard/>. Accessed May 2021.
5. COVID-19: Get the Facts Straight and Vaccinate. APIC. May 2021. <https://apic.org/covid-factsheets/>. Accessed May 2021.



MYTHS VS FACTS

COVID-19: Get the Facts Straight and Vaccinate

As COVID-19 continues to surge across the U.S., everyone who is eligible needs to step up and get vaccinated when it is their turn. It is natural to have questions and concerns, and APIC is here to help. **Let's get the facts straight and vaccinate!**

MYTH *The COVID-19 vaccine is not safe.*

FACT

The FDA has determined that the COVID-19 vaccines are safe and effective to use. The vaccines have undergone the most intensive safety monitoring in U.S. history, and vaccine developers followed all the necessary steps during clinical trials. The messenger RNA (mRNA) technology used to develop the Pfizer and Moderna vaccines allows for faster vaccine development and has been in use for years.

MYTH *The vaccine will alter my DNA.*

FACT

The mRNA in the vaccine does not enter the cell's nucleus, where your DNA is kept. The mRNA will not change your DNA, since the two do not interact.

MYTH *The vaccine will make me sterile/infertile.*

FACT

There is no evidence to suggest that a COVID-19 infection or vaccine could result in sterility or infertility.

MYTH *The vaccine will not be effective against the new strains, so I should just wait.*

FACT

The presence of new strains makes vaccination even more important. When more people are vaccinated, there are fewer chances for deadlier virus mutations to occur.

MYTH *The vaccine will give me COVID-19.*

FACT

mRNA vaccines do not contain a live strain of the virus that causes COVID-19 and, therefore, cannot give you COVID-19.

MYTH *The side effects from the vaccine are worse than getting COVID-19.*

FACT

The vaccines prevent you from getting sick from COVID-19, a disease that has killed many people in the U.S. You may feel achy and uncomfortable after your shot, but these symptoms are temporary and signal that your body is mounting an immune response to the virus.

MYTH *I have already had COVID-19, so I do not need to get vaccinated.*

FACT

It is possible to become re-infected, which is why everyone should be vaccinated against COVID-19 regardless of whether you have previously had it.

May 12, 2020 – Board of Health Finance Committee Meeting Minutes

The meeting was called to order at 3:07 p.m. by Jon Houtz, with roll call as follows: Jon Houtz, and Jared Hoffmaster.

Also present from BHSJ: Rebecca Burns, Theresa Fisher, and Brenae Corbeil.

Public comment:

- None

New Business:

- Mr. Hoffmaster moved to recommend that the full Board approve payment of \$2 per hour hazard pay to all employees paid through the BHSJ payroll system who are actively on the payroll on June 18, 2021, calculated retroactively based on the number of hours actually worked between October 1, 2020 and June 18, 2021. The motion received support from Mr. Houtz and the motion passed.
- Mr. Hoffmaster moved to recommend that the full Board approve temporarily removing the vacation accrual maximum cap, retroactively to October 1, 2021 through September 30, 2021, with support from Mr. Houtz. The motion passed.
- Mr. Hoffmaster moved to recommend that the full Board approve the payments of up to \$750,000 to the under-funded MERS DB retirement plan by September 30, 2021, with support from Mr. Houtz. The motion passed.

With no further business the meeting was adjourned at 3:49 PM.

Respectfully Submitted by:

Theresa Fisher, BS



April 22, 2021 – Board of Health Program, Policy, and Appeals Committee Meeting Minutes

The meeting was called to order at 8:17 a.m. by Chairman, Kathy Pangle, with roll call as follows: Kathy Pangle, Tom Matthew, and Mark Wiley.

Also present from BHSJ: Rebecca Burns, Paul Andriacchi, and Theresa Fisher.

Public comment:

- None

New Business:

- Mr. Wiley moved to recommend that the full Board approve the Driving Policy as presented with support from Mr. Matthew. The motion passed 3-0.
- Mr. Wiley moved to recommend that the full Board temporarily amend the food service fee schedule for the year of 2021 to delay the assessment of the late fees for food service licenses to August 1, 2021 based on the COVID-19 crisis, with support from Mr. Matthew. The motion passed 3-0.
- No action was taken on the process for approving committee meetings. This item will be taken up after more information is available.

With no further business the meeting was adjourned at 8:39 AM.

Respectfully Submitted by:

Theresa Fisher, BS



April 1 through April 30, 2021

2nd Story Marketing, LLC.	Elder Abuse	1,250.00
A+ Nursing	Care Management	285.00
Abila	Quarterly Subscription	7,123.01
ACD.Net	Telephones 3 offices	2,747.45
AFLAC	Payroll Deduction - 3 payrolls	1,424.71
Aimmee Mullendore	Covid Clinic Reimbursements	142.02
Alerus Financial (Retirement)	Payroll Deduction - 3 payrolls	3,439.00
Amazon	Covid Clinic Supplies - 26 invoices	9,187.36
Armstrong Health Care	WIC / AAA Contractual Consultant	4,117.50
Availity	Eligibility Software - EMR	55.00
Blue Cross Blue Shield	Health Insurance	57,669.11
Branch Area Transit Authority	Elderly Transportation Service	2,537.94
Branch County Commission COA	Home & Community Based Services	4,499.33
Branch County Complex	Rent - Coldwater Office	5,694.28
Branch County Complex Quarterly	Building Repair & Maintenance	634.00
Branch County Complex Quarterly	Internet	997.50
Branch County Complex Quarterly	Maintenance (Work orders & Grounds)	1,476.00
Branch County Complex Quarterly	Utilities (Gas, Electric, Trash Pickup & Pest)	5,242.75
CAA of South Central	Home & Community Based Services	18,720.17
Century Bank - Master Card	Covid Clinics Lunches	363.07
Century Bank Basic Flex Health Plan	Payroll Deduction - 3 payrolls	2,866.56
Century Bank EFPTS	Federal & Fica Taxes - 3 payrolls	79,627.78
Century Bank State	Michigan Tax - 3 payrolls	13,262.33
Charter Communications	Sturgis Internet & Phone Line	126.97
Cintas	Lab Coats/Rugs - Cleaning	127.21
City of Coldwater	Water Lab Test	40.00
City of Jonesville	Water Lab Test	180.00
City Of Three Rivers	Water / Sewage	120.00
Clia Laboratory Program	9/8/21-9/7/23 Laboratory User Fee	180.00
Companion Life Insurance Co.	Life Insurance Premiums	989.70
Crossroads Health & Home Services	Care Management	1,788.00
Current Office Solutions	Copier & Toner Charges - 9 invoices	4,622.06
Dr. Vogel	Medical Director - Contractual	5,635.34
Frontier	Sensaphone & Fax Line Service	304.70
GDI	Building Supplies Expense - TR	87.62
GDI	Building Supplies Expense - HD	139.51
GDI	Building Cleaning Expense - TR	1,749.00
GDI	Building Cleaning Expense - HD	2,649.00

April 1 through April 30, 2021

Hillsdale Board Of Utilities	Building Expense - HD	1,730.29
Hillsdale County Senior Services Center	Covid Clinic Lunches	140.00
Hillsdale Daily News	Covid Clinic Advertising	195.00
Home Care Wellness	Care Management	922.88
HomeJoy Care-N-Assist	Care Management	3,512.79
Hospital Network Health	Medical Waste Removal	825.00
Indiana Michigan Power	Building Expense - TR	1,013.46
Joshua Englehart	Voca Reimbursement	27.95
K2 Scientific	Ultra Cold Freezer	5,498.00
Kalamazoo County Human Service	Ombudsman	500.00
Kali Nichols	Covid Clinic Supplies	161.88
Karri Doty	Contracted Services	466.32
Legal Service Of South Central Mi.	Older Adult Legal Assistance	1,310.00
Lucia Villanueva	Translation of Vaccine Scheduler Instructions	25.00
Maplecrest	Rent - Sturgis Office	590.00
Marana Group	Postage Pick Up Service	142.00
Maxim Healthcare Staffing Services Inc.	Contracted Services	24,727.72
McKesson	Medical Supplies - 8 Invoices	923.93
McKibbin Media Group	Covid Clinic Advertising	605.00
Medical Care Alert	Care Management	234.55
Michigan Center for Rural Health	RCOR Planning	2,500.00
Michigan Public Health	Workforce Contract	6,142.86
Michigan State Disbursement Unit	Payroll Deduction - 3 payrolls	570.33
Midwest Communication	AAA Advertising	334.62
Nationwide	Payroll Deduction - 3 payrolls	3,570.00
OfficeTeam	Contracted Covid	15,590.34
Pitney Bowes	Quarterly Subscription	539.10
Prompt Care	Drug Testing - 7 Employees	463.00
Republic Waste Services	Building Expense - TR Quarterly	150.00
Richard Clark	Building Cleaning Expense - Sturgis	325.00
Richard Clark	Building Cleaning Expense - CW	1,800.00
Riley Pumpkin Farm	TR Building Expense - Spring Clean Up	250.00
Rosati Schultz Joppich Amtsbueshler	Attorney	735.00
Ruth Brown	Contractual	3,257.57
Sanofi Pasture	Medical Supplies - 2 Invoices	1,093.27
SEMCO Energy	Building Expense - TR	94.21
Shaffmaster U-Stor	Storage 3 Months	150.00

April 1 through April 30, 2021

Shred It	Document Destruction	90.00
St Joseph County COA	Home & Community Based Services	39,160.46
St Joseph Trans Authority	Older Adult Transportation	1,675.34
St. Joseph County United Way	3/22-4/14/21 Covid Clinic Lunches	1,040.22
Staples	Office Supplies - 9 Invoices	2,167.89
State Of Michigan	Food Licenses Surcharge	117.00
State Of Michigan	Medical Waste Removal Certificate	225.00
State Of Michigan	Approp. Match Dental Clinic	17,640.39
Steve Todd	Covid Clinic Supplies	178.41
Stratus Video	2/21 Translator	606.03
Swick Broadcasting	Advertising - Covid Vaccination	689.00
Three Rivers Health	Rent - Dental Clinic	2,775.00
Thurston Woods	Home & Community Based Services	855.74
Verizon	Cell Phones	977.60
VRI Lifeline Of Michigan	Care Management	541.00
Wal Mart	Covid Clinic Supplies	80.77
Xmission	Email Provider	265.50
Total Paid		392,303.40

Branch-Hillsdale-St Joseph Community Health Agency
Balance Sheet
As of 4/30/2021

Assets

Cash on Hand	4,144.15
Cash with County Treasurer	4,796,849.83
Community Foundation Grant	309,955.94
Accounts Receivable	82,828.21
Due from Dental DAPP	17,640.39
Due from State	(752,157.80)
Due from Other Funding Sources	166,440.39
Prepaid Expenses	127,371.90
Biologic Inventory	<u>74,353.74</u>
Total Assets	<u><u>4,827,426.75</u></u>

Liabilities

Accounts Payable	165,628.35
Payroll Liabilites	88,474.09
Capital Improvements	25,000.00
Deferred Revenue	1,250,624.15
Deferred Revenue BR	35,657.00
Deferred Revenue HD	39,062.00
Deferred Revenue SJ	51,283.00
Biologics	<u>74,353.74</u>
Total Liabilities	<u><u>1,730,082.33</u></u>

Net Assets

Operation Fund Balance	690,419.47
Restricted Fund Balance	428,231.49
Designated Fund Balance	<u>1,978,693.46</u>
Total Net Assets	<u><u>3,097,344.42</u></u>

Total Liabilities and Net Assets	<u><u>4,827,426.75</u></u>
----------------------------------	----------------------------

Prior Year Fund Balance Comparison at 4/30/2020:

Operation Fund Balance	461,524.06
Restricted Fund Balance	426,821.10
Designated Fund Balance	<u>1,754,699.19</u>
Total Fund Balance \$	<u><u>2,643,044.35</u></u>

BHSJ Community Health Agency
Schedule of Cash Receipts and Disbursements
November 30, 2020 thru
April 30, 2021

Plus: Cash Receipts	\$ 449,573.56
Less: Cash Disbursements For Payroll/AP	\$ (853,627.98)
11/30/2020 Cash Balance	\$ 3,014,110.89
Plus: Cash Receipts	\$ 737,139.69
Less: Cash Disbursements For Payroll/AP	\$ (786,499.45)
12/31/2020 Cash Balance	\$ 2,964,751.13
Plus: Cash Receipts	\$ 1,634,935.97
Less: Cash Disbursements For Payroll/AP	\$ (609,594.00)
1/31/2021 Cash Balance	\$ 3,990,093.10
Plus: Cash Receipts	\$ 541,765.32
Less: Cash Disbursements For Payroll/AP	\$ (570,712.10)
2/28/2021 Cash Balance	\$ 3,961,146.32
Plus: Cash Receipts	\$ 1,095,594.79
Less: Cash Disbursements For Payroll/AP	\$ (500,209.66)
3/31/2021 Cash Balance	\$ 4,556,531.45
Plus: Cash Receipts	\$ 1,208,125.34
Less: Cash Disbursements For Payroll/AP	\$ (657,784.61)
4/30/2021 Cash Balance	\$ 5,106,872.18

BRANCH HILLSDALE ST JOSEPH COMMUNITY HEALTH AGENCY

Expense by Program - 4/1/2021 - 4/30/2021

Program	Program Title	Current		Total Budget -	Percent Total
		Month	Year to Date	Amendment2	Expended Amend2
# 353	CRFLCT Contact Tracing	0.00	322,774.81	322,808.00	99.98%
# 354	CRF LHD Testing	0.00	151,669.77	152,120.00	99.70%
* 008	Salary & Fringe Payoff	8,992.38	64,550.95	70,000.00	92.21%
* 362	COVID Immunizations	63,763.97	86,421.30	120,254.00	71.86%
** 032	Emergency Preparedness	11,862.31	83,824.41	117,406.00	71.39%
** 326	Vision (ELPHS)	8,124.36	55,203.81	86,603.00	63.74%
* 200	ELPHS Marketing	1,897.72	13,362.09	21,919.00	60.96%
* 012	Area Agency on Aging	79,963.95	762,063.37	1,275,371.00	59.75%
** 327	Hearing (ELPHS)	6,643.51	49,991.05	83,736.00	59.70%
021	Dental Clinic - Three Rivers	2,775.00	19,425.00	33,300.00	58.33%
745	Type II Water	7,152.67	47,996.93	83,945.00	57.17%
# 360	CRFIMM - Immunization COVID Response	0.00	34,661.72	61,989.00	55.91%
338	Immunization Vaccine Handling	28,073.57	190,959.91	344,597.00	55.41%
325	CSHCS	14,995.18	102,726.83	187,311.00	54.84%
345	Lead Testing	2,004.87	11,863.67	22,044.00	53.81%
029	Dental Clinic - Hillsdale	609.91	4,304.78	8,000.00	53.80%
605	General EH Services	2,819.23	19,021.95	35,484.00	53.60%
714	Onsite Sewage Disposal	26,782.62	180,708.44	337,097.00	53.60%
721	Drinking Water Supply	26,782.62	180,708.44	337,097.00	53.60%
321	CHC Tele-A-Health	2,157.89	22,901.52	42,782.00	53.53%
351	CELC Infection Prevention	6,201.30	47,330.89	91,721.00	51.60%
704	Food Service	35,503.63	206,770.35	416,148.00	49.68%
331	STD	10,163.83	59,659.98	122,540.00	48.68%
201	CSF Carseats	1,363.66	9,372.18	20,370.00	46.00%
109	WIC	64,308.89	425,326.77	924,737.00	45.99%
341	Infectious Disease	18,928.78	120,912.73	269,355.00	44.88%
108	WIC Breastfeeding	7,900.83	44,558.18	100,799.00	44.20%
332	HIV Prevention	1,859.03	11,096.43	27,872.00	39.81%
101	Workforce Development	6,208.24	16,526.64	44,135.00	37.44%
352	ELCCT Contact Tracing, testing coord, violation	65,937.38	320,193.06	869,197.00	36.83%
010	Agency Support	(17,285.35)	9,637.11	26,728.00	36.05%
329	MCH Enabling Children	1,491.69	14,045.61	39,034.00	35.98%
014	VOCA	6,819.60	75,595.61	226,338.00	33.39%
138	Immunization IAP	11,502.32	214,274.58	721,359.00	29.70%
115	MCH Enabling Women	1,810.33	15,738.42	55,375.00	28.42%
275	Medical Marijuana SJ	2,122.06	2,295.60	8,402.00	27.32%
363	CVDIMS Covid Immz Supplemental	22,741.01	154,935.74	674,831.00	22.95%
400	HRSA 20RCORP	4,531.91	41,286.80	197,642.00	20.88%
230	Medical Marijuana HD	2,187.48	2,505.49	14,034.00	17.85%
212	Medical Marijuana BR	2,573.61	3,186.39	23,152.00	13.76%
107	Medicaid Outreach	993.45	9,511.43	80,440.00	11.82%
723	PFAS Response - White Pigeon	1.24	1,429.28	17,721.00	8.06%
024	MERS Pension Underfunded Liability	0.00	5,818.99	122,590.00	4.74%
023	Capital Expenditures	0.00	0.00	128,000.00	0.00%
035	Vector Borne Disease Surveillance	0.00	0.00	27,000.00	0.00%
038	COVID-19	0.00	0.00	263,415.00	0.00%
112	CSHCS Medicaid Outreach	0.00	0.00	36,276.00	0.00%
361	CVIS Covid/Flu Immz	0.00	0.00	55,371.00	0.00%
722	PFAS Response	0.00	0.00	1,028.00	0.00%
	Total Total Expense	553,266.68	4,217,149.01	9,349,473.00	45.11%

The Agency is currently 13.22% under budget.

*7/12 Months = 58.33%

**7/9 Months = 77.77%

3/3 Months = 100% *CRF Ended 1/31/2021

**9-Month Program

3-Month Program

Programs Over Budget as of 4/30/2021

RU 008: Over budget due to annual Sick Time Payout. Will monitor and adjust at next budget amendment.
92.21%

RU 362: Within budget, as a 9 month grant. Grant deadline was extended on 5/17/21 to make this a 12 month grant. We still plan to utilize the funds from this grant by the original deadline.
71.86%

RU 032: 9-Month Program - under budget by 6.38%
71.39%

RU 326: 9-Month Program - under budget by 14.03%
63.74%

RU 200: Over budget due to an increase in staff time - will monitor and adjust as needed in amended budget
60.96%

RU 012: Contractual service providers have full year grant awards and are billing more than 1/12 of the 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.
59.75%

RU 327: 9-Month Program - under budget by 18.02%
59.70%

CRF - 3 Month Grant Programs Ended 1-31-31

RU 353: 3-Month Program - Within budget, Grant Deadline was Feb 15th
99.98%

RU 354: 3-Month Program - Within budget, Grant Deadline was Feb 15th
99.70%

RU 360: 3-Month Program - Within budget, Grant Deadline was Feb 15th
55.91%

Hazard Pay Proposal

Proposal: Payment of \$2.00 per hour hazard pay to all employees who are paid directly through the BHSJ payroll system, who are actively on the payroll on June 18, 2021. The \$2.00 per hour will be calculated retroactively based on the number of hours actually worked between the time period of October 1, 2020 and June 18, 2021. Hours compensated through paid time off will not qualify for the hazard pay premium. Employees who left employment prior to June 18, 2021 are not eligible to receive hazard pay. Contractual employees paid through Accounts Payable are not eligible to receive the hazard pay premium.

Cost: The anticipated cost is approximately \$152,000.

Funding: The hazard pay will be funded by the PHEP grant. This grant has \$243,000 that is currently unspent. The grant period ends on June 30, 2021 and any unspent funds will be returned. If unspent, this funding may be re-allocated back to BHSJ but there is no way to know if that will happen.

Temporary Removal of Maximum Accrual for Vacation Time Proposal

Proposal: Temporarily remove the vacation time accrual maximum through September 30, 2021. This will be done retroactively back to October 1, 2020, so vacation time lost during this period will be restored to the employee's accrual bank.

Cost: This proposal temporarily increases the restricted fund balance, as the value of all sick and vacation hours on the books are accounted for in the restricted fund balance. However, as these vacation hours are used, the restricted fund will return to normal and it will not increase the agency's overall budget because additional hours are not being paid.

Personal Health and Disease Prevention: May 27, 2021

Communicable Disease:

Case investigation for Covid-19 continues to be challenging. We are having weekly meetings with our investigators so we can stay on top of what is currently trending and increase communication among the team. This will aid in identifying outbreaks earlier or any other areas of concern. The cases that we have been investigating as of late are mainly those who have not been vaccinated at all and occasionally those who have only received the 1st dose in a two-dose series.

Immunizations/STI/HIV:

A letter was recently provided to us from MDHHS recognizing the concerns of getting children and adolescents caught up on routine immunizations. The pandemic really disrupted routine well-child visits over the last year and as a result of that Michigan has seen and continues to see a sharp decline in vaccination rates for both pediatric and adolescent populations. If a downward trend continues it has the potential to result in resurgence in vaccine-preventable diseases like measles and pertussis. Here we continue to focus on sending out recall letters along with making phone calls in attempt to reach those who are due for recommended and routine vaccinations. We have also followed up with our providers so they can help encourage and support this.

We continue our efforts in getting the mobile clinic out and about! Our team has been busy visiting those who are home-bound, schools, and businesses. In the near future we hope to find areas where we can do some pop-up clinics. This could also provide an opportunity to get some of the younger population caught up on vaccinations.

Women, Infant, and Children (WIC):

The physical presence waiver that allows local agencies to provide certification appointments remotely is still in effect until August. The annual WIC Conference is being held from June 2-3, virtually.

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

Hearing and Vision has wrapped up for the year. They will be returning the end of August for the 2021-2022 school year.

Children's Special Health Care is still working hard to help families navigate physician appointments, bills, transportation, pharmaceutical problems, and more. It continues to be challenging for parents when only one of them can go back to see the doctor with their child. This has been especially difficult for the Amish population who is accustomed to having the whole family at the appointment. Some medications are still tough for pharmacies to get during the pandemic, an example being seizure medication. Transportation drivers are in and out of quarantine. The pandemic continues to still be a daily barricade for getting the items that are needed for those on the CSHCS program.

Branch - Hillsdale - St. Joseph Community Health Agency

Personal Health and Disease Prevention

April-21

	2020-2021				FYTD 2020-2021				2019-20 FYTD			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	4	6	-	10	26	29	-	55	19	26	1	46
Campylobacter	-	-	-	-	-	2	5	7	6	2	7	15
Chicken Pox	-	-	-	-	-	-	-	-	-	1	-	1
Chlamydia	7	4	19	30	65	64	101	230	60	59	117	236
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	1	1
Colds W/O Fever	115	68	128	311	588	515	976	2,079	572	284	1,023	1,879
CRE Carbapenem Resistant Enterobac.	-	1	-	1	-	1	-	1	-	1	1	2
Cryptococcosis	-	-	-	-	-	-	-	-	-	-	-	-
Cryptosporidiosis	-	-	-	-	-	-	1	1	3	1	-	4
Ehrlichiosis, Anaplasma	-	-	-	-	-	-	-	-	-	-	-	-
Encephalitis - Primary	-	1	-	1	-	1	-	1	-	-	-	-
Flu Like Disease	125	13	94	232	728	146	476	1,350	1,390	1,092	1,633	4,115
GI Illness	209	175	233	617	1,182	671	986	2,839	2,017	1,129	1,804	4,950
Giardiasis	-	-	-	-	-	-	-	-	2	2	5	9
Gonorrhea	8	1	10	19	36	44	52	132	27	19	49	95
Guillian-Barre Syndrome	-	-	-	-	-	-	-	-	1	-	-	1
H. Influenzae Disease - Inv.	-	-	-	-	-	1	-	1	-	1	3	4
Head Lice	14	5	31	50	105	43	195	343	236	90	317	643
Hepatitis A	-	-	-	-	-	-	-	-	1	-	-	1
Hepatitis B - Acute	-	-	-	-	-	-	1	1	-	-	1	1
Hepatitis B - Chronic	-	-	1	1	1	-	1	2	-	1	-	1
Hepatitis C - Acute	2	-	1	3	3	1	2	6	2	-	4	6
Hepatitis C - Chronic	-	-	-	-	13	5	5	23	14	13	23	50
Histoplasmosis	-	-	-	-	-	-	-	-	-	-	1	1
HIV/AIDS	-	-	-	-	-	-	-	-	2	-	-	2
Impetigo	-	-	1	1	10	3	4	17	7	3	18	28
Influenza	-	-	-	-	-	-	-	-	205	644	87	936
Legionellosis	-	-	-	-	-	-	-	-	-	2	1	3
Lyme Disease	-	-	-	-	-	-	-	-	1	-	5	6
Menengitis - Aseptic	-	-	-	-	-	-	-	-	1	-	-	1
Menengitis - Bacterial	1	-	-	1	1	-	-	1	-	-	-	-
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mononucleosis	1	1	2	4	3	3	4	10	6	9	19	34
Mycobacterium - Other	-	1	-	1	-	2	1	3	-	3	3	6
Norovirus	-	-	-	-	-	1	1	2	-	-	1	1
Novel Coronavirus	576	480	688	1,744	3,962	3,786	5,053	12,801	67	128	36	231
Pertussis	-	-	-	-	-	-	-	-	-	1	2	3
Pink Eye	1	1	3	5	11	11	27	49	120	57	173	350
Q Fever	-	-	-	-	-	-	-	-	-	-	1	1
Salmonellosis	1	1	-	2	4	1	1	6	2	4	2	8
Scabies	3	-	-	3	6	-	-	6	2	2	4	8
Shiga Toxin-prod. (STEC)	-	-	-	-	-	-	-	-	2	3	2	7
Shigellosis	-	-	-	-	-	-	-	-	-	-	2	2
Shingles	-	-	-	-	-	-	-	-	2	1	1	4
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	-	-	-	-	1	1	4	3	4	11
Strep Pneumonia Inv Ds.	-	-	1	1	1	1	3	5	3	2	3	8
Strep Throat	29	15	26	70	125	89	157	371	312	288	424	1,024

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

	Apr-21					YTD 2020-21					YTD 2019-2020				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
CHILD IMMUNIZATIONS															
# Vaccines Given CHA	359	187	-	452	998	933	1,048	87	1,145	3,213	1,027	946	274	562	2,809
All VFC Doses Given	647	329	-	713	1,689	5,599	3,848	-	6,854	16,301	5,429	3,844	-	6,513	15,786
Waivers	5	-	2	5	12	25	22	8	24	79	32	39	1	43	115
ADULT IMMUNIZATIONS															
# Vaccines Given	4,102	3,676	-	6,585	14,363	15,205	12,122	14	21,186	48,527	964	418	105	417	1,904
All AVP Doses Given	3	3	-	7	13	102	63	-	115	280	240	150	-	189	579
TRAVEL VACCINATIONS															
Branch Office	-	-	-	-	-	-	-	-	-	-	9	-	-	-	9
COMMUNICABLE DISEASE															
TB Tests Done	3	3	-	-	6	42	59	-	4	105	55	64	-	23	142
New LTBI on Rx	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-
STD treatments	-	1	-	2	3	-	15	2	20	37	4	11	3	78	96
New STD Investigations	15	5	-	29	49	101	109	-	154	364	89	78	-	166	333
HIV Testing	-	-	-	-	-	-	2	2	4	8	-	6	-	25	31
ENROLLMENTS															
Medicaid & Michild	-	-	-	-	-	-	-	-	-	-	19	3	-	10	32
REFERRAL SERVICE															
MCDC Referrals	3	29	13	14	59	56	197	54	82	389	83	257	8	77	425
MIHP referrals	11	3	17	16	47	119	29	136	128	412	29	24	100	128	281
Hearing Screens															
Pre-school	96	93	-	32	221	155	337	-	401	893	86	102	-	313	501
School Age	11	-	-	51	62	828	922	-	1,782	3,532	1,088	795	-	1,999	3,882
Vision Screens															
Pre-school	121	102	-	32	255	186	362	-	446	994	102	86	-	330	518
School Age	-	-	-	325	325	2,249	1,699	-	2,946	6,894	3,151	2,139	-	4,560	9,850
Children's Special Health Care Services															
Diagnostics	1	3	-	-	4	5	9	-	-	14	10	19	-	1	30
Assessments-Renewal	16	23	-	35	74	113	150	-	168	431	111	130	-	173	414
Assessments-New	10	5	-	4	19	14	32	-	40	86	32	34	-	37	103

Branch-Hillsdale-St. Joseph Community Health Agency
Environmental Public Health Services
Report for the May 27, 2021 Board of Health Meeting
Prepared by Paul Andriacchi R.E.H.S, Director of Environmental Health

Food Service Sanitation

We had three new food service operations open during the month of April. The restaurant at Island Hills Golf Course in Centreville had a new management company take over the kitchen. In Sturgis a new Mexican cuisine restaurant (La Palma) opened and the Donut Hut opened in Hillsdale last month as well. We would encourage you to support these new businesses.



Last week I sent an email to all the board members regarding Senate Bills 353 and 354 that are proposing the waiver of all food license inspection fees for the 2021-2022 licensing period. As I reported earlier, the bills have passed the senate and are still currently sitting with the House Regulatory Committee. The financial impact of these bills is estimated at \$16,000,000 to local health department (\$190,000 for BHSJ-CHA) and over \$5,000,000 to MDARD. One of the sponsors of the bill (Senate Vanderwall) has suggested that Covid funding should be used to cover the lost revenue. Unfortunately, it is unclear if these funds *can* be used for this purpose, even if the individual agencies have that amount of Covid money available. The bill sponsors have not addressed how the licensing fees that have already been collected are to be returned. Our agency has collected approximately 90% of our licensing fees. I have included in my report a copy of a bill analysis document published by the Senate Fiscal Agency. This document breaks down the specifics of the bill and summarizes the fiscal impact of the bill. Once again, I would encourage all of you to contact your local legislators to let them know the negative financial impact this bill would have on our agency's budget.

General Programs

This year we will once again be participating in the Vector-Borne Surveillance Grant. This will be the fourth year we have worked in this program and we have been very fortunate to have 2 of the 3 vector technicians returning for their 4th year. Work in this grant involves setting mosquito traps in various locations throughout each county, identifying the mosquitos and reporting the results to MDHHS. We are specifically looking for two species of mosquitos that are know to transmit Zika virus. The grant also requires tick dragging in wooded and grassy areas throughout the counties. Our focus here is on identifying the black-legged tick which is responsible for Lyme disease. One of the technicians started on May 17 and the other two will start after Memorial Day and work into the end of August.

There were no new activities at our PFAS sites located in St. Joseph County over the past month. However, we have been working with the residents that had PFAS detection in their water and had filters installed. Those filters need to be replaced every 6 months to 1 year so we have ordered the replacement cartridges and are delivering them to the homes. There are 19 homes near the White Pigeon Paper site and 1 home near the Lear site in Mendon that will need replacement filters. The filters will continue to be used until a permanent water source can be provided. In White Pigeon, the village and state are working on a plan to extend municipal water to the impacted homes.

EH Service Statistics Report

BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

ENVIRONMENTAL HEALTH SERVICE REPORT

2020/2021

	APRIL				YTD 2020/2021				YTD 2019/2020			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
WELL/SEWAGE SYSTEM EVAL.	-	1	-	1	2	2	5	9	4	1	7	12
CHANGE OF USE EVALUATIONS - FIELD	5	7	5	17	22	31	21	74	12	26	14	52
CHANGE OF USE EVALUATIONS - OFFICE	7	6	28	41	37	22	70	129	32	9	14	55
ON-SITE SEWAGE DISPOSAL												
PERMITS NEW CONSTRUCTION	5	12	11	28	23	46	44	113	18	22	39	79
REPAIR/REPLACEMENT	10	10	20	40	47	30	91	168	29	24	47	100
VACANT LAND EVALUATION	1	2	1	4	9	12	10	31	2	7	10	19
PERMITS DENIED	-	-	1	1	-	-	3	3	-	-	1	1
TOTAL	16	24	33	73	79	88	146	315				
SEWAGE PERMITS INSPECTED	5	9	23	37	54	63	106	222	41	55	62	158
WELL PERMITS ISSUED	16	20	31	67	106	92	116	314	64	75	128	267
WELL PERMITS INSPECTED	2	7	16	25	91	87	104	282	46	64	128	238
FOOD SERVICE INSPECTION												
PERMANENT	19	23	45	87	148	131	200	497	110	138	174	422
NEW OWNER / NEW ESTABLISHMENT	1	1	2	4	2	4	2	8	6	3	5	14
FOLLOW-UP INSPECTION	1	1	1	3	4	1	4	13	6	1	7	14
TEMPORARY	-	5	8	13	1	9	24	34	2	11	17	30
MOBILE/STFU	-	-	9	9	-	1	14	15				
PLAN REVIEW APPLICATIONS	1	-	2	3	4	3	4	11				
FOOD RELATED COMPLAINTS	4	6	1	11	8	29	9	40	5	6	7	18
FOODBORNE ILLNESS INVESTIGATED	-	-	-	-	-	-	-	-	1	-	1	2
									-	-	-	-
FOOD CLASSES												
MANAGEMENT CERTIFICATION CLASS	-	-	-	-	n/a	n/a	n/a	n/a				
FOOD HANDLERS CLASS	-	-	-	-	n/a	n/a	n/a	-				
									-	-	-	-
METH LAB REFERRALS	-	-	-	-	-	-	-	-	-	-	-	-
METH LAB LETTERS SENT	-	-	-	-	-	-	-	-	-	-	-	-
									-	-	-	-
CAMPGROUND INSPECTION	-	-	-	-	-	-	-	-				
NON-COMM WATER SUPPLY INSP.	3	1	-	4	4	6	5	15	1	12	14	27
									-	-	-	-
SWIMMING POOL INSPECTION	-	2	-	2	7	3	-	10	1	4	-	5
									-	-	-	-
PROPOSED SUBDIVISION REVIEW	-	-	-	-	-	-	-	-				
SEPTIC TANK CLEANER	-	-	2	2	-	-	4	4	-	-	-	-
									-	-	-	-
DHS LICENSED FACILITY INSP.	-	1	5	6	3	19	16	38	6	29	16	51
									-	-	-	-
COMPLAINT INVESTIGATIONS	1	2	-	3	2	18	5	25				
LONG TERM MONITORING	-	-	-	-	-	-	-	-	-	-	-	-
									-	-	-	-
BODY ART FACILITY INSPECTIONS	-	-	-	-	3	3	4	8	2	3	2	8

Establishment Inspection Report

For Date Range: 4/1/2021 - 4/30/2021 and Program: Food Service

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
ANDREWS ELEM SCHOOL	Three Rivers	4/22/2021	Routine	0	0	0	0
APPLEBEE'S	Sturgis	4/21/2021	Routine	1	0	1	1
BAILEY ELEMENTARY SCHOOL	Hillsdale	4/14/2021	Routine	0	0	0	0
BAW BEESE AMERICAN LEGION	HILLSDALE	4/19/2021	Progress Note	0	0	0	0
BEST WESTERN PLUS		4/8/2021	Routine	0	0	0	1
Big Wheels BBQ	CONSTANTINE	4/23/2021	STFU/Mobile	0	0	0	0
BILL'S STEAKHOUSE	Coldwater	4/20/2021	Routine	0	0	0	1
BON APPETIT MGT CO.	HILLSDALE	4/22/2021	Routine	1	0	1	0
BON APPETIT MGT. CO.	HILLSDALE	4/15/2021	Routine	1	0	0	2
BRANCH INTER. SCHOOL DISTRICT	COLDWATER	4/30/2021	Routine	0	0	0	0
BRONSON STRIKE ZONE	BRONSON	4/20/2021	Routine	1	0	1	0
BRONSON STRIKE ZONE	BRONSON	4/23/2021	Complaint	0	0	0	0
BUFFALO WILD WINGS (STURGIS)	STURGIS	4/8/2021	Routine	0	0	0	2
BURR OAK SCHOOL	CENTREVILLE	4/27/2021	Routine	0	0	0	0
CAMDEN-FRONTIER SCHOOL	Camden	4/16/2021	Progress Note	0	0	0	0
CENTRAL ELEMENTARY SCHOOL	White Pigeon	4/13/2021	Routine	0	0	0	1
CENTREVILLE ELEMENTARY	Centreville	4/21/2021	Routine	0	0	0	0
CENTREVILLE HIGH SCHOOL	Centreville	4/21/2021	Routine	0	0	0	0
CLEMEN'S FOOD GROUP-AVI FOODSYSTEMS	COLDWATER	4/28/2021	Routine	3	3	0	0
Coffman Concessions Red Barn	Wabash	4/30/2021	Temporary	0	0	0	0
COLDWATER FREE METHODIST CHURCH	COLDWATER	4/27/2021	Routine	0	0	0	0
COLDWATER HAMPTON INN/FOOD	COLDWATER	4/8/2021	Routine	0	0	0	0
COLON ELEM SCHOOL	Colon	4/22/2021	Routine	0	0	0	0
COLON HIGH SCHOOL	COLON	4/21/2021	Routine	0	0	0	0
COLON MASONIC LODGE #73 F&A	Colon	4/22/2021	Routine	0	0	0	0

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Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
CONGRESS SCHOOL	STURGIS	4/1/2021	Routine	0	0	0	0
Constantine Cub scouts	Constantine	4/24/2021	Temporary	0	0	0	0
Constantine Harvest Fest	Constantine	4/24/2021	Temporary	0	0	0	0
CONSTANTINE HIGH SCHOOL	Constantine	4/15/2021	Routine	0	0	0	0
CONSTANTINE MIDDLE SCHOOL	Constantine	4/15/2021	Routine	0	0	0	1
Cottage Inn Pizza	Sturgis	4/29/2021	Routine	2	0	2	2
CROCKETT'S SMOKED BBQ AND DELI	Coldwater	4/30/2021	Routine	0	0	0	0
CULVER'S OF STURGIS	STURGIS	4/1/2021	Routine	0	0	0	0
DAVIS MIDDLE SCHOOL	HILLSDALE	4/26/2021	Routine	0	0	0	0
DICKEY'S BBQ	COLDWATER	4/20/2021	Complaint	0	0	0	0
EASTSIDE ELEM SCHOOL	Constantine	4/15/2021	Routine	0	0	0	0
EASTWOOD SCHOOL	Sturgis	4/21/2021	Routine	0	0	0	0
El Sembrador LLC	Sturgis	4/8/2021	Routine	1	2	0	6
El Taco Loco	Sturgis	4/14/2021	Routine	1	1	2	0
FIRST UNITED METHODIST CHURCH	HILLSDALE	4/9/2021	Routine	0	0	0	0
Fiske Concession - French Fries		4/30/2021	Temporary	0	0	0	0
FIVE STAR PIZZA	UNION CITY	4/6/2021	Routine	0	0	0	0
FIVE STAR PIZZA	Colon	4/22/2021	Routine	0	0	0	0
FOE JONESVILLE 4290	JONESVILLE	4/5/2021	Complaint	0	0	0	0
GIER ELEMENTARY SCHOOL	HILLSDALE	4/26/2021	Routine	0	0	0	0
GINOLFI'S	North Adams	4/27/2021	Complaint	0	0	0	0
Go Cafe	Centreville	4/28/2021	Progress Note	0	0	0	0
GREENFIELD SCHOOL	Hillsdale	4/14/2021	Routine	0	0	0	0
HANDMADE SANDWICHES & BEVERAGES	HILLSDALE	4/21/2021	Complaint	0	0	0	0
HILLSDALE FILLING STATION DELI	Hillsdale	4/12/2021	Complaint	0	0	0	0
HILLSDALE FREE METHODIST CHURCH	HILLSDALE	4/13/2021	Routine	0	0	0	1
HILLSDALE HOSPITAL	HILLSDALE	4/2/2021	Routine	0	0	0	0
HILLSDALE LODGE BPO ELKS #1575	HILLSDALE	4/2/2021	Routine	0	1	1	0
HIP PADDERS CATERING	STURGIS	4/29/2021	Routine	0	0	0	0
HOPPIN ELEM	THREE RIVERS	4/22/2021	Routine	0	0	0	0

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
Howardsville Christian School	MARCELLUS	4/26/2021	Routine	0	0	0	0
HUNGRY HOWIE'S	HILLSDALE	4/1/2021	Progress Note	0	0	0	0
HUNGRY HOWIE'S	HILLSDALE	4/8/2021	Complaint	0	0	0	0
Island Hills, LLC	Centreville	4/5/2021	Pre-opening/New	0	0	0	0
JENNINGS ELEMENTARY SCHOOL	QUINCY	4/20/2021	Routine	0	0	0	0
Jerolene Elementary	Sturgis	4/1/2021	Routine	0	0	0	0
JONESVILLE HIGH SCHOOL	JONESVILLE	4/19/2021	Routine	0	0	0	0
JT'S BILLIARDS BAR & GRILL LLC	COLDWATER	4/15/2021	Follow-Up	0	0	0	0
Kate's Diner I	Centreville	4/27/2021	STFU/Mobile	0	0	0	0
Kate's Elephant Ear	Centreville	4/27/2021	STFU/Mobile	0	0	0	0
Kate's Pizza	Centreville	4/27/2021	STFU/Mobile	0	0	0	0
Katie's Ice Cream	Myakka City	4/28/2021	STFU/Mobile	0	0	0	1
Katie's Pizza	Myakka City	4/28/2021	STFU/Mobile	0	0	0	1
Katie's Strawberry Shortcakes	Myakka City	4/28/2021	STFU/Mobile	0	0	0	0
KING DRAGON BUFFET	Sturgis	4/14/2021	Routine	0	1	1	6
La Palma	Sturgis	4/2/2021	Pre-opening/New	0	0	0	0
LAKE AREA CHRISTIAN SCHOOL--fixed	STURGIS	4/23/2021	Routine	0	0	0	2
LEGG MIDDLE SCHOOL	COLDWATER	4/27/2021	Routine	0	0	0	0
LINCOLN ELEMENTARY SCHOOL	COLDWATER	4/30/2021	Routine	0	0	0	0
LINCOLN LEARNING CENTER (BRANCH ISD)	COLDWATER	4/30/2021	Routine	0	0	0	0
LITCHFIELD COMMUNITY SCHOOL	LITCHFIELD	4/21/2021	Routine	0	0	0	0
MAMMA MIA'S PIZZA	Burr Oak	4/27/2021	Routine	1	0	1	2
MANCINO'S OF COLDWATER	COLDWATER	4/7/2021	Routine	0	0	0	0
MARY LOU'S	Hillsdale	4/30/2021	Temporary	0	0	0	0
MENDON GRADE SCHOOL	Mendon	4/19/2021	Routine	0	0	0	0
MENDON JR & SR HIGH SCHOOL	MENDON	4/19/2021	Routine	0	0	0	0
MIDWAY LANES LLC	COLDWATER	4/28/2021	Routine	0	0	0	0
MIKE'S PIZZA-SUB	Sturgis	4/14/2021	Routine	0	0	0	0
Momma's Snack Shack	Three Rivers	4/12/2021	Consult	0	0	0	0

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
MOSHERVILLE LADIES AID SOCIETY	SCIPIO TWP	4/21/2021	Routine	0	0	0	0
My Grandad's Ribs	Three Rivers	4/24/2021	Temporary	0	0	0	0
Nelson's Fund Raiser	MARCELLUS	4/16/2021	Temporary	0	0	0	0
NEW YORK TACO	Hillsdale	4/19/2021	Complaint	0	0	0	0
NORTH ADAMS PUBLIC SCHOOLS	North Adams	4/14/2021	Routine	0	0	0	0
NORTON ELEM	THREE RIVERS	4/22/2021	Routine	0	0	0	1
Nottawa Communtly Schools	Sturgis	4/21/2021	Routine	0	0	0	0
PARK COMMUNITY SCHOOL	THREE RIVERS	4/26/2021	Routine	0	0	0	1
PATHFINDER: FOOD	Centreville	4/28/2021	Routine	0	0	0	0
PENNY'S	HILLSDALE	4/1/2021	Routine	1	1	0	1
Ponderosa Steakhouse	Coldwater	4/19/2021	Complaint	0	0	0	0
PROWANT SPEICALTY CO.	Dupont	4/30/2021	Temporary	0	0	0	0
QUINCY DAIRY QUEEN	QUINCY	4/13/2021	Consult	0	0	0	0
QUINCY JR SR HIGH SCHOOL	QUINCY	4/20/2021	Routine	0	2	0	0
QUINCY UNITED METHODIST CHURCH	QUINCY	4/20/2021	Routine	0	0	0	0
READING HIGH SCHOOL	READING	4/21/2021	Routine	0	0	0	0
REYNOLDS ELEMENTARY SCHOOL	Reading	4/21/2021	Routine	0	0	0	0
RIVERSIDE ELEM SCHOOL	Constantine	4/15/2021	Routine	0	0	0	0
SAMUEL MANCINOS ITALIAN EATERY	White Pigeon	4/26/2021	Complaint	0	0	0	0
SHORT'S LAMPLIGHTER, LLC	COLDWATER	4/5/2021	Routine	0	1	0	1
Smith Concessions	Lebanon	4/30/2021	Temporary	0	0	0	0
SPANGLER'S STOCKYARD RESTAURANT	HILLSDALE TWP	4/17/2021	Routine	1	0	1	1
Spence Softball Complex	Sturgis	4/23/2021	Routine	0	0	0	0
ST PAUL'S LUTHERAN CHURCH	HILLSDALE	4/19/2021	Routine	0	0	0	0
St. Joseph County Commision on Aging	Three Rivers	4/13/2021	Routine	0	0	0	1
STADIUM SPORT CENTRE INC	FAYETTE TWP	4/16/2021	Progress Note	0	0	0	0
STOAGIES FAMILY ROOM CAFE	COLDWATER	4/1/2021	Complaint	0	0	0	0
STURGIS ADULT ED	Sturgis	4/29/2021	Routine	0	0	0	0

Name	Location	Date	Inspection Type	# P	# Pf	# P/Pf Fixed During Inspection	# Core
STURGIS HIGH SCHOOL	Sturgis	4/21/2021	Routine	0	0	0	0
STURGIS MIDDLE SCHOOL	STURGIS	4/1/2021	Routine	0	0	0	0
STURGIS YOUNG ADULTS	Sturgis	4/30/2021	Routine	0	0	0	0
Tacos Guerrense's	Constantine	4/2/2021	Temporary	0	0	0	0
Tacos Guerrense's	Constantine	4/15/2021	Temporary	0	0	0	0
Tacos Guerrense's	Constantine	4/29/2021	Temporary	0	0	0	0
Taqueria El Tejano	Three Rivers	4/19/2021	Temporary	0	0	0	0
Tasteful Kreations	Bronson	4/16/2021	Pre-opening/New	0	0	0	1
The BUCKET INC	UNION CITY-PT	4/6/2021	Routine	0	0	0	0
THE DONUT HUT		4/29/2021	Pre-opening/New	0	1	1	0
THE LOCAL EATERY	Hillsdale	4/6/2021	Routine	2	4	4	0
THE LOCAL EATERY	Hillsdale	4/16/2021	Follow-Up	0	0	0	0
THE SALVATION ARMY	HILLSDALE	4/1/2021	Routine	0	0	0	0
Trinity Lutheran Church School	Sturgis	4/29/2021	Routine	0	0	0	0
Viva Fajita	Mendon	4/1/2021	Routine	0	0	0	2
WALDRON AREA SCHOOL	WRIGHT TWP	4/26/2021	Routine	0	0	0	0
WALL SCHOOL	STURGIS	4/1/2021	Routine	0	0	0	0
Welton Foods Donut Trailer	Centreville	4/27/2021	STFU/Mobile	0	0	0	0
Welton Foods Pizza Trailer	Centreville	4/27/2021	STFU/Mobile	0	0	0	0
WENDY'S--STURGIS	Sturgis	4/8/2021	Follow-Up	2	0	2	0
WHITE PIGEON HIGH SCHOOL	WHITE PIGEON	4/13/2021	Routine	0	0	0	1
WILLIAMS ELEMENTARY SCHOOL	JONESVILLE	4/19/2021	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.

Inspection Type Count by County

For Date Range: 4/1/2021 - 4/30/2021 and Program: Food Service

County	Inspection Type	Count
Branch	Complaint	4
	Consult	1
	Follow-Up	1
	Pre-opening/New	1
	Routine	19
Hillsdale	Complaint	6
	Follow-Up	1
	Pre-opening/New	1
	Progress Note	4
	Routine	23
	Temporary	5
St. Joseph	Complaint	1
	Consult	1
	Follow-Up	1
	Pre-opening/New	2
	Progress Note	1
	Routine	45
	STFU/Mobile	9
	Temporary	8
	Total number of inspections	134

Inspection Type Count

For Date Range: 4/1/2021 - 4/30/2021 and Program: Food Service

Inspection Type	Count
Complaint	11
Consult	2
Follow-Up	3
Pre-opening/New	4
Progress Note	5
Routine	87
STFU/Mobile	9
Temporary	13
Total number of inspections	134



Senate Fiscal Agency
P.O. Box 30036
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BILL ANALYSIS



Telephone: (517) 373-5383
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Senate Bill 353 (Substitute S-1)
Senate Bill 354 (as introduced 4-13-21)
Sponsor: Senator Curtis Vanderwall
Committee: Regulatory Reform

Date Completed: 4-27-21

CONTENT

Senate Bill 353 (S-1) would amend the Food Law to provide various fee waivers or refunds for license or registration applications submitted during the licensing year beginning May 1, 2021, and ending at midnight on April 30, 2022.

Senate Bill 354 would amend the Public Health Code to specify that a provision that allows a local governing entity to fix and require the payment of fees for local health department services would apply except as provided in Senate Bill 353.

The bills are tie-barred.

Senate Bill 353 (S-1)

Section 3119 of the Food Law generally requires an applicant for a food service establishment license to pay to the local health department having jurisdiction fees for services required under the Public Health Code and a State license fee as specified in the Law. The local health department must collect a State license fee when an application for a food service establishment license is submitted and must remit that fee to the State within 60 days after it is collected. The bill would prohibit the Department of Agriculture and Rural Development (MDARD) or a local health department from charging or collecting a license fee for a license application submitted to the Department for a food service establishment license that was valid for all or part of the licensing year beginning May 1, 2021, and ending at midnight on April 30, 2022. To the extent that the Department or a local health department had charged and collected a license fee for a food service establishment license that was valid for the above license year, MDARD or the local health department would have to refund the license fee.

The Food Law requires MDARD to impose licensing fees for each year or a portion of the year, as specified, on retail groceries, extended retail food establishments, food processors, limited food processors, mobile food establishments, temporary food establishments, special transitory food units, mobile food establishment commissaries, food warehouses or vending company base locations, and food service establishments. The bill would prohibit MDARD or a local health department from charging or collecting a license fee or a late fee for an initial license or renewal license application submitted to the Department for a food service establishment license that was valid for all or part of the licensing year beginning May 1, 2021, and ending at midnight on April 30, 2022. To the extent that the Department or a local health department had charged and collected a license fee for a food service establishment license that was valid for the above license year, MDARD or the local health department would have to refund the license fee.

The Law requires a water bottler or water dispensing machine owner to register with MDARD each brand of bottled water with a unique declaration of the identity before the sale or offering for sale of the water. The application must include a registration fee of \$25 for each brand of water with a unique declaration of identity and \$25 for each water dispensing machine. The Department must assess a \$25 late fee for bottled water or water from a water dispensing machine that is sold or offered for sale without registration.

The bill would prohibit MDARD from charging or collecting from a water bottler or water dispensing machine owner a registration fee or late fee described above for a registration that is valid for all or part of the registration year beginning May 1, 2021, and ending at midnight on April 30, 2022. To the extent that the Department had charged and collected a registration fee for a water bottler or water dispensing machine owner during the specified registration year MDARD would have to refund the registration fee.

Senate Bill 354

The Public Health Code allows a local governing entity, or in the case of a district the district board of health, to fix and require the payment of fees for services authorized or required to be performed by the local health department. Under the bill, this would apply except as provided under Section 3119 of the Food Law.

MCL 289.3119 et al. (S.B. 353)
333.2444 (S.B. 354)

Legislative Analyst: Christian Schmidt

FISCAL IMPACT

The bills would have a significant fiscal impact on MDARD and local public health departments. According to MDARD, the revenue that it would be prohibited from collecting would result in a loss totaling approximately \$5.0 million to the Department's Food and Dairy Division, Central Licensing, Laboratory Services and other MDARD central support units, which could result in staff reductions and reductions in educational and outreach programs to the food service industry. In the Governor's recommendation for the fiscal year 2021-22 budget, these fees represent support of \$5,461,600 for the Food and Dairy Division, \$440,300 for the Central Licensing unit, \$74,000 for the Laboratory, and \$175,100 for central Department support. The fee revenue covers approximately 28% of the cost of MDARD's food safety programs.

As far as the fiscal impact of the bills on the approximately 45 local public health departments, it would vary by individual department and could take time to ascertain. In many cases, however, food service license fees support 50% to 75% of the cost of supporting food safety activities at the local level, so the bills could have a greater fiscal impact on local food safety activities than on State government.

Fiscal Analyst: Bruce Baker

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.



Updates:

1. Services to Victims of Elder Abuse Program Updates
 - Feedback from the Division of Victim Services regarding the March Contract Review has not been received yet...
 - The Area Agencies on Aging Association of Michigan's Annual Conference is virtual this year! <https://4ami.org/event/stronger-together-conference-2021/2021-06-15> Josh and I will be co-presenting a session on the "Services to Victims of Elder Abuse" grant along with Region 2 Area Agency on Aging. We are excited to share the development and implementation of this special project!



2. We continue to search for candidates to fill our open full-time positions including: Nurse Care Consultant, Program Specialist, Elder Abuse Victim Specialist, and Social Work Care Consultant.
3. We are edging closer to budget amendment time but are not able to present them to you at this time. Here are a few highlights to keep you informed:
 - The Aging & Adult Services Agency has received "American Rescue Plan Act" funding from the feds but they've not processed it, nor developed guidance for its use.
 - Planning and use of the "AASA COVID-19 Immunization Support Grant" is underway.
 - The Direct Care Worker Hazard Pay (March-September 2021) has also been issued to eligible providers for March and April hours/expenses. Based on our funding allocation and projection of expenditures, we are anticipating that we will not be able to reimburse providers fully beyond June. These funds are allocated based on intrastate funding formula and set by the legislature in the supplemental budget bill authorizing it. There has been some frustration and angst with this among agencies across the state and within our own planning & service area. You will recall this is pass-through funding and we are closely monitoring developments. There isn't enough funding to pass through for all of the eligible hours of service being provided by in-home aides... The aging network (providers and AAA's) are actively advocating and sharing impact stories with AASA and legislators about this issue. I'm hopeful there will be a way to look closely for a creative solution to this funding challenge.
4. Annual provider monitoring visits are complete. I'm quite happy to report there are no findings of non-compliance with any of our annual contract providers! What an accomplishment, amidst a pandemic! Response letters will be written to each agency and a summary of these virtual assessments will be shared with the Board.