

Exhibits for Section 1 – Legal Responsibility

Section A – Legal Authority

- **Exhibit 1A-1** – Listing of Laws Applicable to Local Public Health
- **Exhibit 1A-2** – Matrix of Services
- **Exhibit 1A-3** - Environmental Health Code

Section B – Governing Entity Relationship

- **Exhibit 1B-1** - Intergovernmental agreement creating the Branch-Hillsdale-St. Joseph Community Health

Section C - Civil Liability

- **Exhibit 1C-1** – Michigan Municipal Risk Management Authority Coverage Overview

Section D - Delegation of Food Service Sanitation Program

- No Exhibits

Section E - Exposure Plan for Blood Borne Pathogens & Chemical Hygiene Plan

- **Exhibit 1E-1** - blood borne pathogen Exposure Control Plan
- **Exhibit 1E-2** - chemical hygiene plan

Attachment B

LAWS APPLICABLE TO LOCAL PUBLIC HEALTH (LPH)

Public Health Code (Public Act 368 of 1978, as amended)

MCL § 333.1105 – Definition of "Local Public Health Department"

MCL § 333.1111 – Protection of the health, safety, and welfare

Part 22 (MCL §§ 333.2201 *et seq.*) – State Departments

Part 23 (MCL §§ 333.2301 *et seq.*) – Basic Health Services

Part 24 (MCL §§ 333.2401 *et seq.*) – Local Health Departments

Part 51 (MCL §§ 333.5101 *et seq.*) – Prevention and Control of Diseases and Disabilities
(General Provisions)

Part 52 (MCL §§ 333.5201 *et seq.*) – Hazardous Communicable Diseases

Part 53 (MCL §§ 333.5301 *et seq.*) – Expense of Care

MCL § 333.5923 – HIV Testing and Counseling Costs

MCL § 333.9131 – Family Planning Services

Part 92 (MCL §§ 333.9201 *et seq.*) – Immunization

Part 93 (MCL §§ 333.9301 *et seq.*) – Hearing and Vision Testing and Screening

MCL § 333.11101 – Reporting of Prohibited Donation or Sale of Blood Products

MCL § 333.12425 – Agricultural Labor Camps

Part 125 (MCL §§ 333.12501 *et seq.*) – Campgrounds and Public Swimming Pools

Part 127 (MCL §§ 333.12701 *et seq.*) – Water Supply and Sewer Systems

Part 138 (MCL §§ 333.13801 *et seq.*) – Medical Waste

MCL § 333.17015 – Informed Consent

Appropriations (Current as of December 2022: Public Act 166 of 2022)

Sec. 218 – Basic Services

Sec. 1222– Essential Local Public Health Services (ELPHS)

Michigan Office of Attorney General (OAG) Opinions

OAG, 1987-1988, No. 6415 – Legislative authority to determine appropriations for local health services

OAG, 1987-1988, No. 6501 – Reimbursement of local department for required and allowable services

OAG, 1989-1990, No. 6650 – LHD procedures for establishing sanitation fees for food service establishments

OAG, 1995-1995, No. 6891 – Application of Administrative Procedures Act of 1969 (APA) to LHD

OAG, 2007, No. 7205 – LHD's authority concerning immunization requirements

Food Law (Public Act 92 of 2000, as amended)

MCL § 289.1109 – Definition of "Local Health Department"

MCL § 289.3103, *et seq.* – Enforcement, Delegation to Local Health Department

Natural Resources and Environmental Protection Act (Public Act 451 of 1994, as amended)

Part 31 (MCL §§ 324.3101, *et seq.*) – Water Resources Protection

Water Resources Protection, Part 22 (R 323.2201, *et seq.*) – Groundwater Quality Rules (on-site wastewater treatment)

Part 117 (MCL §§ 324.11701, *et seq.*) – Septage Waste Services

Land Division Act (Public Act 288 of 1967, as amended)

MCL § 560.105(g) – Preliminary Plat Approvals

MCL § 560.109a – Parcels Less Than One Acre

MCL § 560.118 – Health Department Approval

Condominium Act (Public Act 59 of 1978, as amended)

MCL § 559.171a – Approval of Condominium Project Not Served by Public Sewer and Water

Safe Drinking Water Act (Public Act 399 of 1976, as amended)

MCL § 325.1016 – Agreements to Administer Act; Public Water Supplies

This document may serve as a survey of appropriate laws but may not be considered exhaustive or as a limit to responsibilities required by law.

Attachment A

MATRIX OF SERVICES OF LOCAL PUBLIC HEALTH

Services	Rule or Statutory Citation	Required = Basic + Mandated + ELPHS				Allowable 2	Notes
		1	1-A	1-B	1-C		
Immunizations	MCL 333.9203; R 325.176; Annual appropriations act (example: P.A. 166 of 2022 Sec. 218 and 1222)	X	X	X	X		
Infectious/ Communicable Disease Control; Reporting (General)	MCL 333.2433; Part 51, MCL 333.5101 <i>et seq.</i> ; Part 52, MCL 333.5201 <i>et seq.</i> ; R 325.171 <i>et seq.</i> ; Annual appropriations act (example: P.A. 166 of 2022 Sec. 218 and 1222)	X	X	X	X		See below for more specific requirements.
STD Control	MCL 333.5117; R 325.174; R 325.175; R 325.177; Annual appropriations act (example: P.A. 166 of 2022 Sec. 218 and 1222)	X	X	X	X		For more on HIV/AIDs, see below.
TB Control	MCL 333.5117; R 325.174; R 325.175; Annual appropriations act (example: P.A. 166 of 2022 Sec. 218)	X	X	X			
Emergency Management – Community Health Annex	MCL 30.410; Annual appropriations act (example: P.A. 166 of 2022 Sec. 218)	X	X	X			Basic Service under annual omnibus appropriations act; Mandated Service if required under Emergency Management Act, MCL 30.401 <i>et seq.</i>
Prenatal Care	Annual appropriations act (example: P.A. 166 of 2022 Sec. 218)	X	X				
Family Planning Services for Indigent Women	MCL 333.9131	X		X			
Health Education	MCL 333.2433	X		X			See MCL 333.2237(2) for a definition of "health education."
Nutrition Services	MCL 333.2433	X		X			
HIV/AIDS Services; Reporting, Counseling, and Partner Notification	MCL 333.5114; MCL 333.5114a; MCL 333.5131 MCL 333.5923; R 325.174	X		X			
Care of Individuals with Serious Communicable Disease or Infection	MCL 333.5117; Part 53, MCL 333.5301 <i>et seq.</i> ; R 325.177	X		X			"Financial liability for care rendered under this section shall be determined in accordance with part 53." MCL 333.51147(4).
Hearing and Vision Screening	MCL 333.9301; R 325.3271 <i>et seq.</i> ; R 325.13091 <i>et seq.</i> ; Annual appropriations act	X		X	X		
Public Swimming Pool Inspections	MCL 333.12524; R 325.2111 <i>et seq.</i>	X		X			Required if "designated." MCL 333.12524(1).
Campground Inspection	MCL 333.12510; R 325.1551 <i>et seq.</i>	X		X			Required if "designated." MCL 333.12510(1).
Public/Private On- Site Wastewater	MCL 333.12751; MCL 333.12757; R 323.2210; R 323.2211	X		X	X		"Alternative waste treatment systems" are regulated by LHD.

Services	Rule or Statutory Citation	Required = Basic + Mandated + ELPHS			Allowable	Notes
Food Protection	MCL 289.3103 <i>et seq.</i> ; Annual appropriations act	X		X	X	
Pregnancy Tests; Certification Forms	MCL 333.17015(18)	X		X		
Public/Private Water Supply	MCL 333.12701 <i>et seq.</i> ; MCL 325.1001 <i>et seq.</i> ; R 325.1601 <i>et seq.</i> ; R 325.10101 <i>et seq.</i>	X			X	
Allowable Services					X	This category includes all permissive responsibilities in statute or rule that happen to be eligible for cost reimbursement.
Other Responsibilities (Upon Delegation)	MCL 333.2235(1)				X	This category is NOT connected to express responsibilities within statute, but instead refers entirely to pure delegation by the department as allowed. In addition to general provision, the Code allows delegations for specified functions.

MATRIX DEFINITIONS

Name	Citation	Description
1. Required Service	MCL 333.2321(2); MCL 333.2408(1)	- "A basic health service designated for delivery through a local health department [LHD] . . . for the local fiscal year covered by the appropriation"; - "[A] local health service specifically required pursuant to [Part 24] or specifically required elsewhere in state law"; or - Services designated under ELPHS.
1-A. Basic Service	MCL 333.2311; MCL 333.2321(2)	A service identified under Part 23 that is funded by appropriations to MDHHS or that is made available through other arrangements approved by the Legislature. Defined by the omnibus appropriations act and could change annually.
1-B. Mandated Service	MCL 333.2408(1)	The portion of required services that are not basic services but are "specifically required pursuant to [Part 24] or specifically required elsewhere in state law."
1-C. ELPHS	Annual appropriations act (example: P.A. 166 of 2022 Sec. 1222. (1))	Funds appropriated in the MDHHS section of the Omnibus Appropriations Act that are to be prospectively allocated to LHDs to support immunizations, infectious disease control, STD control and prevention, hearing screening, vision services, food protection, public water supply, private groundwater supply, and on-site sewage management.
2. Allowable Services	MCL 333.2403(1);	"[A] health service delivered [by an LHD] which is not a required service but which [MDHHS] determines is eligible for cost reimbursement."
Omnibus Appropriations Act	Annual appropriations act	Most recent omnibus appropriations act for MDHHS.

ENVIRONMENTAL HEALTH CODE

Branch, Hillsdale St. Joseph County

District Health Department

As of January 1, 1998, the District Health Department was formally changed to:

The Branch-Hillsdale-St. Joseph Community Health Agency

ARTICLE I - TITLE, AUTHORITY, JURISDICTION,

PURPOSE AND ADMINISTRATION

101 - TITLE

These Regulations shall be identified by the title: Environmental Health Code for Branch, Hillsdale and St. Joseph Counties, Michigan.

102 - AUTHORITY

These Regulations are hereby adopted pursuant to authority conferred upon local health departments by Section 2441(1) of the Michigan Public Health Code, Act 368, 1978, as amended.

103 - JURISDICTION

- (1) The Health Officer shall have jurisdiction throughout Branch, Hillsdale and St. Joseph Counties, which includes cities, villages and townships for the administration and enforcement of these Regulations.
- (2) Nothing contained herein shall be construed to restrict or abrogate the authority of any municipality in Branch, Hillsdale or St. Joseph Counties to adopt more restrictive regulations or ordinances.

104 - PURPOSE

These Regulations are hereby adopted for the purpose of protecting public health and safety and the quality of the environment as it affects human health, and to prevent the occurrence of public health nuisances.

105 - RIGHT OF INSPECTION

- (1) To assure compliance with the provisions of these Regulations, the Health Officer may conduct necessary inspections as provided by Section 2446 of the Michigan Public Health Code.
- (2) It shall be unlawful for any person to molest, willfully oppose or otherwise obstruct the Health Officer, or any other person charged with enforcement of these Regulations during the routine

performance of his or her duties.

(3) The Health Officer may request the assistance of the respective sheriff Departments or other police agencies or peace officers with Branch, Hillsdale or St. Joseph Counties Michigan when necessary to execute his or her official duty in a manner prescribed by law.

106 –POWER TO ISSUE VIOLATION NOTICES; POWER TO ORDER CORRECTIVE ACTIONS

The Health Officer shall be empowered to issue a notice to any person who violates a provision of these Regulations. Such notice shall contain a description of the violation, and shall cite the specific section of the Regulation which applies. The Health Officer may also order correction of a violation, and may specify the nature of corrective action required and a reasonable time limit for such corrective action to be completed. In the case of violations which may present an imminent danger to public health and safety, immediate corrective action may be required.

106.1 – Interference with notice.

No person shall remove, mutilate or conceal any notice or placard posted by the Health Officer, except by permission of the Health Officer.

107 - ABATEMENT OF NUISANCES, HEALTH AND SAFETY HAZARDS

Nothing stated in these Regulations may be construed to limit the power of the Health Officer to order the immediate and complete abatement of a public health nuisance, health hazard or menace to the public, as well as any place, object or condition which the Health Officer reasonably believes would otherwise endanger the public health or safety.

108 – PENALTY

108.1 - Penalty, Criminal

As provided for in Sec. 2441.(2) of The Michigan Public Health Code, Act 368, P.A. 1978, as amended, a person who violates these Regulations is guilty of a misdemeanor, punishable by imprisonment for not more than 90 days, or a fine of not more than \$200.00, or both.

108.2 – Penalty, Civil

The Health Officer may issue a citation within ninety (90) days of the discovery of an alleged violation of the provisions of this code. The citation shall be written and shall state with particularity the nature of the violation, including reference to the Section, Rule, a monetary civil penalty of not more than \$1000.00 for each violation or day that the violation continues. The citation shall also include the alleged violator's

right to appeal the citation pursuant to Article 120 of this Code.

108.3 – Penalty, Late Fee Schedule

The Board of Health may set a fee schedule that imposes an additional penalty fee, based on extra costs, on persons who fail to meet certain provisions of this code. This shall include, but not be limited to, permits where construction is started prior to application, or the person, owner, occupant or installer fails to follow the requirements of this code. The amount of the fee shall be listed in the Health Department fee schedule.

109 - INJUNCTIVE PROCEEDINGS

As provided for in Sec. 2465(1) notwithstanding the pursuit of any other remedy, the health officer, without posting bond, may maintain injunctive action to restrain, prevent or correct a violation of these Regulations.

110 - DELEGATION OF HEALTH DEPARTMENT AUTHORITY

When deemed prudent and necessary, the administrator may, pursuant to Section 2435(c) of the Michigan Public Health Code, enter into an agreement, contract, or arrangement with a governmental entity or other person appropriate to assist the Health Department in carrying out its duties and functions unless otherwise prohibited by law.

111 - SEVERABILITY

If any section, subsection, clause or phrase of these Regulations is for any reason declared unconstitutional or invalid, it is hereby provided that the remaining portions of these regulations shall not be affected.

112 - OTHER LAWS AND REGULATIONS

These Regulations are supplemental to the Michigan Public Health Code, as amended, Act 368, P.A. 1978 and to other statutes duly enacted by the State of Michigan relating to public health and safety. These Regulations shall be liberally construed for the protection of the health, safety and welfare of the people of Branch, Hillsdale and St. Joseph Counties, Michigan and shall control or prevail over a less stringent or inconsistent provision enacted by a local governmental entity for the protection of public health.

113 - AMENDMENTS

The Board of Health may amend, supplement or change these Regulations or portions thereof in compliance with the provisions of Sections 2441 and 2442 of Michigan Public Health Code, Act 368, P.A. 1978, as amended.

114 - REPEAL OF PREVIOUS REGULATIONS

(1) Previous regulations entitled "Sanitary Code, Branch - Hillsdale -St. Joseph District Health Department" as

adopted by the Branch - Hillsdale - St. Joseph District Health Department Board of Health on May 27, 1975 are hereby repealed.

(2) No existing violation of any repealed regulation or portion thereof shall be made legal by virtue of adoption of these Regulations. Any unlawful action or violation occurring prior to the date of the enactment of these Regulations may and shall be continued to be prosecuted and dealt with according to the provisions of the law, code or regulation which was in effect at the time the violation or unlawful action was observed and/or documented to exist. The issuance of any permit or license that was previously mandatory shall continue under this code if a similar requirement for a permit or license is provided for herein.

115 - APPROVAL AND EFFECTIVE DATE

(1) These Regulations were reviewed and approved by the policy and appeals committee of the Branch -Hillsdale - St. Joseph District Health Department on November 15, 1990 and adopted by action of the Branch - Hillsdale - St. Joseph District Board of Health on December 20, 1990.

(2) These Regulations shall be in effect as of April 1, 1991.

116 - FEES

(1) A written receipt shall be issued by the Branch - Hillsdale - St. Joseph District Health Department for all fees collected for the enforcement and services rendered under these Regulations.

(2) All fees collected shall be deposited in the Branch - Hillsdale - St. Joseph District Health Department fund.

(3) A schedule of fees for licenses and other services authorized by these Regulations shall be adopted, and revised periodically, by the Branch - Hillsdale - St. Joseph District Board of Health.

(4) Fees paid for services or permits authorized by these Regulations shall be non-refundable unless requests for refunds are received within one year of receipt and prior to the commencement of actions by the department pursuant to the requested services or permits.

(5) All fee schedules existing prior to the adoption of these Regulations shall remain in effect until revised by the Branch Hillsdale - St. Joseph - District Board of Health.

117 - POWER TO ESTABLISH POLICY AND GUIDELINES

(1) The Health Officer is hereby granted the authority to establish policies and guidelines, not in conflict with the purpose and intent of these Regulations, for the purpose of carrying out the responsibilities herein delegated to the Health Officer by law.

(2) All such policies and guidelines shall be in writing and shall be kept in a policy file available for public inspection upon request. These policies and guidelines are subject to review and approval of the Branch - Hillsdale - St. Joseph District Board of Health.

118 - VARIATIONS

Variations in tests, standards, or general requirements may be permitted by the Health Officer upon application when sufficient evidence of special factors warranting such variance in his opinion do exist. Any variance allowed by the Health Officer under the provisions of this regulation shall be in writing, including the conditions upon which all judgement and actions are based and any time limit of such variances. In no case shall a variance be construed to permit the commission of any act as may jeopardize the public health, safety or welfare of people in Branch, Hillsdale or St Joseph Counties, Michigan.

119 - APPEALS BOARD

Appeals from the rulings of the Health Officer are provided for reasonable and equitable interpretations of the provisions of these regulations. The Branch -Hillsdale - St. Joseph District Board of Health, Board of Appeals shall hear any appeal presented in accordance with rules of procedure established by the Board. The Board shall furnish the appellant with a written report of its findings and decision.

120 - HEARING OF APPEALS

Appeals shall be submitted in writing, addressed to the chairman of the Branch - Hillsdale - St. Joseph District Board of Health in care of the Health Officer. Hearing of an appeal shall be granted at the next scheduled or regular meeting the District Board of Health or at the discretion of the chairman thereof at a special meeting called for the purpose: provided, that no hearing shall be scheduled within less than ten (10) days of receipt of written request. The Board may grant individual variances from the requirements of these regulations when said Board has adequately determined that all of the following conditions exists:

- (1) that no substantial health or nuisance is likely to occur therefrom.
- (2) that strict compliance with the code requirements would result in unnecessary or unreasonable hardship.
- (3) that no state statute or other applicable laws would be violated by such variance.
- (4) that the proposed variance would provide essentially equivalent protection in the public interest.

ARTICLE II - GENERAL DEFINITIONS

201 - INTERPRETATION

When not inconsistent with the context, words used in the present tense include the future, words in the singular number include the plural number, and words in the plural number include the singular. The word "shall" is always mandatory, and not merely directive. Words, terms or expressions not defined herein shall be interpreted in the manner of their commonly accepted meanings, in accordance with standard English usage.

202 - ADMINISTRATOR

Shall mean the administrative director of the Branch - Hillsdale - St. Joseph District Health Department who is the Health Officer for the District.

203 - APPEAL

Shall mean a formal written request for administrative review of any decision, action, or failure to act, on the part of the Director, pursuant to the provisions of these Regulations, directed to the Board of Appeals.

204 - APPROVED

Shall mean acceptable for the intended use as judged by the Health officer, in accordance with public health laws, regulations, rules, guidelines and/or other available technical data.

205 - BOARD OF APPEALS

Shall mean the Policy and Appeals Committee of the Branch - Hillsdale - St. Joseph District Health Department.

206 - BOARD OF HEALTH

Shall mean the District Board of Health of the Branch - Hillsdale - St. Joseph District Health Department.

207 - DWELLING

Shall mean any house, building, or structure, tent, shelter, trailer, vehicle, watercraft or portion thereof which is occupied in whole or in part as home residence, living or sleeping place of one or more human beings whether permanently or transiently.

208 - HABITABLE BUILDING

Shall mean any structure or dwelling where persons reside, are employed, or congregate.

209 - HEALTH DEPARTMENT

Shall mean the Branch - Hillsdale - St. Joseph District Health Department.

210 - HEALTH OFFICER

Shall mean the Administrative Director of The Branch - Hillsdale - St. Joseph District Health Department, and/or his or her authorized representatives. For the purpose of these regulations authorized representatives of the Administrative Director shall include the Director of Environmental Health and the Environmental Sanitarians employed by the Branch - Hillsdale - St. Joseph District Health Department.

211 - IMMINENT DANGER

Shall mean a condition or practice which could reasonably be expected to cause death, disease, or serious physical harm immediately or before the imminence of the danger can be eliminated through enforcement procedures established in these regulations.

212 - NUISANCE

(1) Shall refer to any condition or activity on private or public property which, in the judgment of the Health Officer, may have or threaten to have a detrimental effect on the health of the public.

(2) The definition of a nuisance may include, but shall not be limited to the following:

- (a) Where sewage effluent is permitted to drain upon, or to the surface of the ground, into any ditch, storm sewer, lake, stream, pond, or other body of surface water.
- (b) Accumulations of refuse, animal manure, dead animals, mosquito breeding areas, or vermin infestations.
- (c) When the odor, appearance, or presence of an item or substance has an obnoxious or detrimental effect on or to the senses, and/or the health of persons, or obstructs the use or sale of adjacent property; and all other conditions or activities recognized as nuisances by the statutory and common law of the State of Michigan.

213 - OWNER AND PERSON-IN-CHARGE

Shall mean both the owner of title record, and those persons occupying or in possession of any property or premises, or their designated representative.

214 - PERSON

Shall mean any individual, firm, partnership, party, corporation, company, society, association, local governmental entity, or other legal entity responsible for the ownership operation of a premise, or an employee, officer, or agent thereof.

215 - PREMISE

Shall mean any tract of land containing a habitable building.

216 - SAFETY HAZARD

Shall mean any object, place, event or condition which can reasonably be expected to result in serious physical injury or death to persons exposed to the object, place. event or condition.

**ARTICLE III - TECHNICAL DEFINITIONS
ON-SITE SEWAGE DISPOSAL**

301 - ABSORPTION BED

Shall mean a type of sub-surface soil absorption system which consists of a square or rectangular excavation not exceeding 3 feet in depth, and which contains a distribution network of several perforated pipes or tubes laid upon a bed of aggregate material of uniform thickness.

302 – ALTERNATING SUB-SURFACE SOIL ABSORPTION SYSTEM

Shall mean a soil absorption system consisting of two or more separate sub-surface disposal systems to allow alternate use of the individual fields over extended periods of time in order to allow extended periodic resting of each sub-surface disposal system for the purpose of extending the life of each individual sub-surface disposal system.

303 – AUTOMATIC SIPHON

Shall mean a mechanical device which will automatically cause a liquid entering a receptacle to be retained until a predetermined high water level has been attained after which it is automatically released from the receptacle until a second predetermined level has been reached, at which time the flow from such receptacle ceased until the high water level has again been attained.

304 - AGGREGATE

Shall mean a particulate material utilized for structural support and support and sewage effluent dispersal within a soil absorption system, consisting of washed stone, gravel, or similar materials possessing particle sizes meeting the standards for Michigan Department of Transportation's "Specification 6-A stone" or other suitable clean aggregate from 1/2 to 1-1/2 inch size.

305 - DRAINFIELD (TRENCH SYSTEM)

Shall mean a type of sub-surface soil absorption system consisting of a series of interconnected excavated trenches, each of which contains a single perforated pipe or tube laid upon a bed of aggregate material of uniform thickness.

306 - DREDGED SOILS

Shall mean soils (other than sand) artificially removed from a lake, river, stream, marsh, delta, canal, swamp, or pond onto another location for the purpose of creating developable land. May alternately be referred to as dredged spoils.

307 - EFFLUENT

As used in these regulations shall have the same meaning as "sewage", unless the context in which it is used implies otherwise.

308 - FILL SAND OR FILTER MATERIAL

Shall consist of medium to coarse, clean sand, unless otherwise specified in the regulations, or as part of a permit condition and approved by the Health Officer.

309 - FLUSH TOILET

Shall mean a type of water closet or plumbing receptacle containing a portion of water which receives human excreta and so designed as by means of a flush of water to discharge the contents of the receptacle to an outlet connection.

310 - GROUND WATER

Shall mean the water in the ground that is in the zone of saturation.

311 - SEASONAL HIGH WATER TABLE OR GROUND WATER ELEVATION

Shall mean the elevation of the upper surface of the zone of saturation as may occur during the normally wet periods of the year.

312 - INFILTRATIVE SURFACE

Shall mean that portion of the interface between a soil absorption system and surrounding soils which is intended to conduct sewage effluent away the absorption system into the surrounding soil matrix.

313 - PERCOLATION RATE

Shall mean a measurement of the ability of a specific soil to receive, absorb, and transport water, as determined by performance of a percolation test conducted in accordance with standard test procedures specified by the health officer.

314 - PERMEABILITY

Shall mean a description of the capability of a soil to transmit water and/or air.

315 - PUBLIC SEWER

Shall mean a system of pipes and conduits for the collection and transportation of sewage for which the ownership and responsibility for maintenance and operation resides with a governmental entity.

316 - SEEPAGE PIT (DRY WELL)

Shall mean a type of sub-surface absorption system which typically consists of an underground cavity lined with cement block, or precast concrete; the purpose of which is to receive sewage effluent from a septic tank, and to disperse it into the surrounding soil.

317 - SEPTIC TANK

Shall mean a buried vessel which functions to receive sewage, and to partially treat sewage by combined physical separation and anaerobic decomposition, prior to its release to a sub-surface soil absorption system.

318 - SEWAGE

Shall mean a combination of the domestic liquid or semi-solid wastes conducted away from a dwelling or habitable building and includes human excreta (black water), and garbage disposal wastes, dishwashers, bath water, laundry wastes, basement draining, and other commercial and industrial wastes (gray waters), excluding roof, water softener discharge, footing and storm drainage, clear cooling water waste or condensate. Commercial laundry waste and wastes from industrial and commercial processes are not considered sewage and generally require a separate permit from the Michigan Department of Natural Resources.

319 - SEWER

Shall mean a watertight conduit for carrying off sewage.

320 - SEWAGE DISPOSAL FACILITY

320.1 – General Definition

Shall mean any device structure, or facility which functions, either singly, or in combination with other components, to transport, store treat, or dispose of sewage.

320.2 – Alternative Sewage Disposal Facility

Shall mean a facility which employs design features, processes, or operational methods significantly different from those which apply to a conventional sewage disposal facility.

320.3 – Conventional Sewage Disposal Facility

Shall mean a facility which includes a building sewer, one or more septic tanks, a sub surface soil absorption system, and all associated connections, fittings, and appurtenances.

320.4 – Experimental Sewage Disposal Facility

Shall mean a facility which possesses unique and untested characteristics pertaining to its design, location, or principles of operation; limited use of which is authorized under the provisions of a controlled test program.

321 - SEWAGE SYSTEM FAILURE

Shall mean any one of the following conditions exist:

- (a) The system cannot accept sewage effluent at the rate of application.
- (b) Sewage effluent seeps from, or ponds on or around, the system or otherwise discharges on the ground surface, or into a roadside ditch or other drainage way.
- (c) The system contaminates an aquifer capable of being used for drinking water supply or contaminates surface waters of the state.

322 - SUB-SURFACE SOIL ABSORPTION SYSTEM

Shall mean any system that utilizes the soil for subsequent absorption of septic tank effluent or treated sewage; such as an absorption bed, drainfield or a seepage pit.

323 –SITE EVALUATION OF VACANT LAND

Shall mean a survey conducted by the Health Officer of an undeveloped parcel of land, for the purpose of determining the suitability of such land as a site for the installation of a sewage disposal facility meeting the requirements of these regulations.

**ARTICLE IV GENERAL PROVISIONS
ON SITE SEWAGE DISPOSAL**

401 - PROHIBITED SEWAGE DISPOSAL PRACTICES

It shall be unlawful for any person to discharge or deposit sewage, or to permit sewage to be deposited, upon the ground surface; into a lake, river, stream or ditch; or in any location other than a public sewer, or a sewage disposal facility acceptable to the Health Officer.

402 - SEWAGE DISPOSAL FACILITIES REQUIRED

402.1 – Approved Sewage Disposal System on All Premises

It shall be unlawful for any person to occupy, or permit to be occupied, any premise which is not equipped with adequate facilities for the disposal, in a sanitary manner, of sewage. Such facilities shall be constructed in accordance with the provisions of these regulations. Any dwelling or premise not meeting the requirements of this section may be placarded by the Health Officer as unfit for human habitation. Such dwellings and premises may be used only upon installation of an approved sewage disposal system meeting the requirements of this regulation and upon written approval to occupy by the Health Officer. Every sewage disposal facility installed subsequent to the effective date of these regulations shall conform to the design, location, and construction requirements contained herein.

402.2 – Continued Use of Existing Sewage Disposal Facilities

Sewage disposal systems in use prior to the effective date of these Regulations may continue in use only if such usage does not create a nuisance or hazard to the public health and safety.

403 – SEWAGE DISPOSAL FACILITY OPERATION AND MAINTENANCE

Every sewage disposal facility shall be operated and maintained in such a way as to prevent a nuisance or hazard to public health and safety.

404 - REMOVAL AND DISPOSAL OF MATERIALS FROM SEWAGE DISPOSAL FACILITIES

All waste materials removed from sewage disposal facilities, including sewage, sludge, grease or septage, shall be handled and disposed of in a manner acceptable to the Health Officer. Persons who engage in the removal and disposal of such materials shall be licensed in accordance with applicable statutory requirements of the State of Michigan.

405 - REQUIREMENT FOR CONNECTION TO PUBLIC SEWER

405.1 - New Development

Newly constructed premises shall be required to utilize public sewers for wastewater disposal when such public sewers are available and of adequate capacity and when connection to public sewer is consistent with provisions of local codes and ordinances.

405.2 – Existing Development

Existing premises may be required to connect to public sewers by order of the local city, village or township, upon such public sewers becoming available. Existing premises may also be required to connect to available public sewer by the Health Officer when continued use of on-site sewage disposal facilities would constitute a hazard to public health and safety, or would result in the creation of nuisance.

406 - ABANDONMENT OF SEWAGE DISPOSAL FACILITIES

Septic tanks, dosing chambers, seepage pits or similar below grade facilities shall be emptied and completely filled with earth, sand or other inert materials when the use of such facilities is to be permanently discontinued, if the Health Officer shall so order.

ARTICLE V

POWERS AND DUTIES OF THE HEALTH OFFICER

500 - GENERAL PROVISIONS

The Health Officer shall be responsible for regulating the design, installation, operation, and maintenance of all sewage disposal facilities serving single and two-family premises within Branch, Hillsdale and St. Joseph Counties, Michigan. The Health Officer shall also be empowered to exercise regulatory controls over sewage disposal facilities serving other types of premises, when so authorized by other public agencies or officials possessing statutory jurisdiction over sewage disposal facilities serving such premises.

500.1 – Duty to Review Specific Sewage Facility Plans

The Health Officer shall review and evaluate plans for all proposed sewage disposal facilities intended to serve single and two-family residential premises, and other types of sewage disposal facilities for which plan review authority is authorized by other public agencies or officials.

500.2 – Power to Issue Permits for Proposed Sewage Disposal Facilities; Power to Withhold Permits

The Health Officer shall be empowered to issue permits authorizing the installation of all sewage disposal facilities subject to his jurisdiction. If the Health Officer determines that the installation of a sewage disposal facility may endanger public health and safety or create a nuisance, he shall be authorized to withhold issuance for such facility.

500.3 – Duty to Investigate Complaints

The Health Officer shall investigate complaints from persons alleging health or safety hazards, nuisances, or environmental degradation resulting from improper sewage disposal practices or from malfunctioning sewage disposal facilities. Records of such investigations shall be documented in writing and shall be retained by the Department for a reasonable period of time.

ARTICLE VI

SEWAGE DISPOSAL FACILITY PERMITS

600 - PERMIT REQUIREMENTS

600.1 – General Requirements

Before any person shall construct, repair, enlarge, or relocate any sewage disposal facility serving any premise within Branch, Hillsdale or St. Joseph Counties Michigan, he shall first obtain a permit authorizing such action from the Health Officer.

600.2 – Permit Exceptions

The requirement for a sewage disposal facility permit from the Health Officer shall not apply when any of the following circumstances prevail:

- a. All sewage will be discharged directly into a public sewer via a system of enclosed piping or conduits from the point of origin.
- b. The served premise falls within a category which subjects it to the legal jurisdiction of an agency of state or federal government, and such agency has not delegated authority for issuance of permits to the Department.

600.3 – Priority Over Building Permit

No officer or employee of any city, village, township or county shall issue a construction permit for any new building or structure within Branch, Hillsdale, or St. Joseph Counties Michigan, which must be served by a sewage disposal facility pursuant to these Regulations, unless a permit for such sewage disposal facility has first been obtained by the owner from the Health Officer. In the case of an existing building or structure, a city, village, or township official shall notify the Health Officer prior to issuance of a construction permit to ensure that any proposed construction will not adversely affect an existing sewage disposal facility.

600.4 – Application for Permits

600.5 - Eligibility

Applications for sewage disposal facility permits shall be submitted by owners of properties upon which sewage disposal facilities are to be constructed, repaired, enlarged, or relocated, or by other persons acting as authorized agents on behalf of property owners.

600.6 – Application Procedures

Applications for sewage disposal facility permits shall be submitted on forms provided for such purpose by the Health Officer. Application shall contain such reasonable information as required by the Health Officer. At his discretion the Health Officer may require substantiating data, including but not limited to engineering drawing, maps, soil analysis, test borings, percolation, ground water and flood elevations, adjacent land use, location of adjacent well water supplies and detailed plans for the proposed sewage disposal system. The actual or proposed use of the property shall be indicated in all instances.

600.7 – Applicant Responsibilities

It shall be the responsibility of the permit applicant to furnish the Health Officer with all facts, details, designs, and information required in these Regulations. Any expenses associated with the provision of such facts, details, designs, and information shall be the responsibility of the applicant. The Health Officer may, but shall not be obligated to, provide limited technical advice and assistance to applicants upon request relative to sewage disposal facility design, location, and construction. The ultimate responsibility for the adequacy of all plans, designs, and completed disposal facilities shall reside with the applicant.

600.8 – Permit Issuance

The Health Officer, following his review of an application for a sewage disposal facility permit, may issue a permit to the applicant authorizing performance of the requested construction, repair, enlargement, or relocation. The permit shall describe the nature and extent of work authorized, and may contain specific requirements or limitations which the Health Officer deems necessary. A sewage disposal facility permit shall remain valid for a period of one year from date of issuance, unless an extension is requested of, and approved by, the Health Officer. A sewage disposal facility permit shall not be transferable as to permit holder or property location.

600.9 – Permit Denial

600.9.1 – Criteria for Permit Denial

The Health Officer may decline to issue a sewage disposal facility permit for any of the following reasons or causes:

- a. Incomplete, inaccurate, or false information supplied by the applicant.
- b. Failure of the proposed sewage disposal facility design to conform to the requirements of Article VII of these Regulations.
- c. Failure of the proposed installation site for the sewage disposal facility to conform to the requirements of Article VII of these regulations.
- d. Failure of the applicant to submit the required application fee.
- e. The existence of any facts which give the Health Officer reasonable grounds to believe that issuance of the requested permit would create a nuisance, or a hazard to the public health and safety.

600.9.2 – Voidance of Permits

The Health Officer may declare a previously issued permit for a sewage disposal facility to be null and void, for any of the following reasons or causes:

- a. False or inaccurate information supplied by the permit holder.
- b. A change in the plans of the permit holder affecting circumstances relative to the sewage disposal facility design, location, or use.
- c. Acquisition of new information indicating that the previously approved installation site for the sewage disposal facility does not satisfy the requirements of these regulations.

601 - INSPECTIONS

601.1 - General

The Health Officer shall be empowered to conduct such inspections as he may deem necessary in connection with the review of applications for sewage disposal facility permits, and the construction, repair, enlargement, or relocation of such facilities.

601.2 – Final Inspections

All work authorized by a permit issued by the Health Officer shall be subject to a final inspection before such work shall be approved. No sewage disposal facility or component thereof shall be given a final cover, or otherwise rendered inaccessible, until a final inspection has taken place, and the Health Officer has given his approval. Upon completion of a final inspection, the Health Officer shall notify the permit holder of his findings, and shall signify his approval or disapproval. The requirements for a final inspection may be waived by the Health Officer, if the adequacy of the completed work can be adequately verified by other means.

601.3 – Final Approvals Required

No person shall utilize a sewage disposal facility which has been constructed, repaired, enlarged or relocated under authority of a permit issued by the Health Officer, unless the Health Officer signified his approval of such facility. Utilization of any sewage disposal facility which has not received such approval from the Health Officer, shall be a violation of these regulations.

601.4 – Occupancy Permits

No Officer or employee of any city, village, township or county shall issue an occupancy permit for any premise within Branch, Hillsdale or St. Joseph Counties, Michigan, which must be served by a sewage disposal facility pursuant to these Regulations unless the Health Officer has signified his approval of such facility.

ARTICLE VII
SEWAGE DISPOSAL FACILITIES
Location, Design, Materials, and Construction

700 - LOCATION; CRITERIA FOR SITE APPROVAL

700.1 – General Requirements

A site proposed for the construction, repair, enlargement, or relocation of a sewage disposal facility shall be approved by the Health Officer only if the site possesses characteristics which will permit the safe and adequate operation of the facility, will not create a nuisance, and with no adverse effects to human health and safety.

700.2 – Identification of Criteria for Site Approval

The following characteristics as a minimum shall be evaluated by the Health Officer in making a determination as to the acceptability of a proposed sewage disposal facility site:

- a. Total usable land area
- b. Horizontal isolation
- c. Slopes
- d. Flooding Potential
- e. Groundwater elevation
- f. Soil permeability and drainage
- g. Reserve area for replacement of sub-surface disposal systems

700.3 – Site Acceptance Criteria

An acceptable site for a sewage disposal facility shall possess soils which are of sufficient quantity and permeability to absorb all sewage effluent to be discharged upon such site, and to insure its confinement beneath the ground surfaces at all times. The following minimum criteria shall also be determined to exist by the Health Officer as the basis for any site approval:

- a. On-site soils shall have a permeability rate of not more than 45 minutes per inch.
- b. At least 2 feet of natural permeable soil above the seasonal high water table.
- c. A disposal system shall not be installed at an elevation below the flood plain of 100 years, nor otherwise located in an area subjected to seasonal flooding or ponding of surface water.

- d. A disposal system shall not be located where any factor would prohibit use of said system.
- e. A disposal system shall not be installed where the minimum required isolation distances specified in this regulation cannot be maintained.
- f. Sufficient suitable area shall be available and reserved to provide for a minimum of one replacement system without utilization or disruption of the initial installation.
- g. Slope conditions shall not exceed 20 degrees from a horizontal plane. Grading or filling of a site to achieve acceptable slope conditions may be permitted by the Health Officer.
- h. Where the parcel of land is found to be in violation of Act 288, P>A> 1987 as amended, entitled, “Subdivision Control Act 1967”.

700.4 – Permit Denial

The Health Officer shall have the right to deny any application which does not satisfy the minimum acceptance criteria as outlined above, or where conditions exist or may be created which may endanger the public health.

700.5 – Isolation Distance Requirements

An acceptable site for a sewage disposal facility shall provide for horizontal isolation of the facility, and all components thereof, from other structures, objects, boundaries, or natural features in accordance with the minimum distances specified in Table VII - A.

TABLE VII - A MINIMUM ISOLATION REQUIREMENTS FOR SEWAGE DISPOSAL FACILITIES

FROM	TO	SEPTIC TANK	ABSORPTION AREA
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Private well (single family)		50 ft	50 ft
well water suction line (unprotected)		50 ft	50 ft
Public/Semi-Public well well water suction line (unprotected)	As Mandated by Michigan Law Act 399, P.A. 1976 " " " " " " " " " "		
Potable Water Pressure Line		10 ft	10 ft
Surface Water Body, Stream:			
Construction (after 7/1/75)		50 ft	50 ft
Construction (Prior to 7/1/75)		25 ft	50 ft
Building Foundation		10 ft	10 ft
Drop - Off (25% or greater)		10 ft	10 ft
Footing Drains		10 ft	25 ft
Sub-surface Drains		10 ft	25 ft
Drainage ditches		10 ft	10 ft
Property Lines		5 ft	5 ft
Swimming Pools		10 ft	10 ft

700.6 – Groundwater Elevation Requirements

700.6.1 - Groundwater Elevation Determinations

The elevation of the seasonal high groundwater table may be established by any or all of the following methods:

- a. Physical measurements during Spring Wet season of year.
- b. Physical examination of soils (by a person trained in soil science)
- c. Other verifiable evidence and information acceptable to the Health Officer.

700.6.2 – Minimum Acceptable Permeability

Soils to be utilized for the subsurface absorption of sewage effluent shall possess a stabilized percolation rate equal to, or less than 45 minutes per inch. Soils of acceptable permeability shall extend to a depth of at least 4 ft. beneath the lowest elevation of the proposed soil absorption device or facility. A variance may be issued for soils exceeding a percolation rate of 45 minutes where the facility to be served is limited to a single family dwelling located on a greater than 10 Acre parcel. Reasons, terms and limitations of the variance shall be stipulated by the Health Officer and the written variance agreement shall be filed as part of the permit and with the deed to the property at the Register of Deeds Office in the respective county where the system is to be located.

700.6.3 - Determination of Soil Permeability

Determinations of soil permeability shall be on physical observation of soil texture, structure, and coloration by persons trained in soil science. In the event of inconclusive, inconsistent, or disputed finding concerning soil permeability as determined by the previously cited method, the Health Officer shall be empowered to exercise his judgment concerning the permeability of the soils in question.

700.6.4 – Site Modifications

Site modifications, such as cutting, grading, or filling may be permitted in some cases for the purpose of overcoming soil permeability limitations of natural soils. Limits on the nature and extent of allowable modifications may be prescribed in guidelines prepared by the Health Officer and approved by the Board of Health.

700.7.5 – Building Sewers and Septic Tank Effluent Sewers

Sewers from the building to the septic tank, gravity sewers from the septic tank to the sub-absorption system and sewers connecting seepage pits connected in series in separate holes shall be of a material possessing physical properties equivalent or superior to schedule 40 polyvinyl chloride pipe. Building sewers shall have a minimum diameter of 4 inches and shall extend in a straight line, if practical, between the premise served and a sewage disposal facility. Short-radius 90 degree bends shall not be permitted in a building sewer.

701 - SEPTIC TANKS

701.1 - General Provisions

701.2 - Influent Requirements

All sewage generated by any premise shall be discharged into a septic tank prior to being discharged to any soil absorption device or facility. Wastewater from roofs, parking areas, or footing drains shall not be discharged into any septic tank.

702.3 - Multiple Tanks

At least two septic tanks, connected in series, or a two compartment septic tank may be required for a new sewage disposal facility when a garbage grinder or other plumbing fixture that is likely to cause a large volume surge discharge is proposed to be connected to the system.

702.4 - Existing Septic Tanks

When repairs are made to an existing sewage disposal facility serving a single family residence, existing septic tanks which are part of the system, and which do not meet the standards contained in these Regulations, may remain in service without modification. This provision shall apply only if the Health Officer determines that such existing tanks are in sound condition, of adequate size, adequately isolated from well water supplies, equipped with an approved outlet device, otherwise pose no dangers to human health and safety, nuisances, or degradation of the natural environment. Existing metal tanks shall not be approved.

702.5 - Location

- a. No septic tank shall be installed in any location which renders it inaccessible for cleaning and maintenance. A septic tank shall be isolated in accordance with requirements of TABLE VII - A of these Regulations.
- b. No septic tank shall be installed under any building, driveway, road or parking area; provided that the Health Officer may permit a septic tank to be installed in any location which may subject it to excessive mechanical stresses, if it is reinforced in a manner acceptable to the Health Officer.
- c. Whenever practical, septic tanks shall be installed on the same side of the served premise where

the interior plumbing exits the building.

- d. The top of a septic tank shall not be buried deeper than 20 inches beneath the finished ground surface, unless a riser is provided above the access opening at the outlet end of the septic tank. The top of the riser, when installed, shall not be buried deeper than 1 foot from the finished ground surface. The riser shall be equipped with a latch or cover of reinforced concrete, or other material of equivalent properties.

702.6 - Materials

A septic tank shall be constructed of sound and durable materials not subject to excessive corrosion or decay, and structurally capable of supporting the stresses to which it will be subjected. Such materials shall not permit water flow from surrounding soils into the septic tank.

702.7 – Capacities

702.7.1 - Single Family Residential Premises Capacities

Minimum total septic tank capacities for single and two-family residential premises shall be based upon the number of bedrooms present, in accordance with Table VII - B.

TABLE VII - B Minimum Septic Tank Capacities Single Family Residences

Number of Bedrooms	Minimum Required Capacity	
	Without Garbage Grinder and/or water conditioner	With Garbage Grinder and/or water conditioner
1 – 4	1000 Gallons	1500 Gallons
Over 4	add 250 gallons/bedroom	

702.7.2 - Commercial, Industrial, Multiple Residential Premises <10,000 gpd

Minimum total septic tank capacities for other than single family residential premises with an estimated discharge of less than 10,000 gallons of sewage per day shall comply with the Michigan Department of Public Health Bureau of Environmental and Occupational Health guidelines for such systems entitled " MICHIGAN CRITERIA FOR SUBSURFACE SEWAGE DISPOSAL, JUNE, 1989."

702.8 - Internal Dimensions & Relationships

The distance from the bottom of a septic tank outlet to the floor of a septic tank shall not be less than 2.5 feet.

The width of a septic tank shall not be less than 2.0 feet. A septic tank shall provide an air space having a volume of at least 10 % of the liquid capacity of the tank. A minimum clearance of at least 9 inches shall be provided between the maximum liquid level of the tank and the tank top or cover.

702.9 – Inlets

702.9.1 - Minimum Diameter

The inlet connection to a septic tank shall not be less than 4 inches inside diameter.

702.9.2 - Elevations

The bottom of an inlet connection to a septic tank shall be at least 3 inches above the maximum liquid level of the tank.

702.9.3 - Venting

Inlet tees or baffles, if provided, shall be designed and installed so as to permit the venting of gases from the septic tank to the building sewer.

702.9.4 - Location

Inlet connections shall be located at the end of the septic tank opposite the outlet connection.

702.9.5 – Outlets

702.9.6 - Minimum Diameter

The outlet opening in a septic tank shall not be less than 4 inches in diameter.

702.9.7 - Tees or Approved Outlet Device

A tee or other device, approved by the Health Officer, shall be required to be installed on the outlet of a septic tank. Such a tee or approved device shall extend to a depth of at least 40 % of the distance from the maximum liquid level to the bottom of the tank. A tee or approved device shall be vented at its point of highest elevation

within the tank. A tee or approved device shall have a continuous interior minimum dimension of no less than 4 inches. A tee or approved outlet device shall be securely mounted to the tank outlet in such a manner as to prevent leakage or dislodgement.

702.9.8 - Access for inspection and Cleaning

A septic tank shall be provided with one or more secured access openings on its top surface to provide for periodic inspection, cleaning, or repair. If an inlet device is provided an access opening shall be located over each the inlet and outlet end of the septic tank, immediately above the inlet and outlet device respectively. Access openings shall have a minimum dimension of sufficient size to allow pumping of the septic tank by a Michigan Licensed Septic Tank Cleaner and to allow removal, repair or replacement of inlet or outlet devices. Hatches or covers used to secure access openings shall be equipped with permanent handles, and shall be constructed of reinforced concrete, or other material of equivalent properties.

702.10 – Effluent Pump Chambers: Gravity Distribution of Effluent

Effluent pump chambers shall be water tight and of corrosion resistant material. The chamber shall be equipped with an exposed manhole cover at ground surface for easy access to the pump. The pump chamber shall be large enough to allow locating the pump a minimum of 8 inches of the floor of the chamber and have a minimum of 50 gal. liquid capacity. The pump discharge line shall be equipped with a readily accessible disconnect device for ease of removal of the pump for servicing or replacement.

703 – SUB-SURFACE ABSORPTION SYSTEMS

703.1 - General Requirements

Sewage from any septic tank, or similar device which releases partially treated sewage effluent, shall be discharged into a soil absorption system or device designed to distribute and confine such effluent beneath the surface of the ground.

703.2 - Location Requirements

703.2.1 - General Requirements

A soil absorption system or device shall be installed in such a location as to maximize its potential for long-term satisfactory operation.

703.2.2 - Isolation Requirements

A soil absorption system or device shall be isolated from other structures objects, boundaries, or natural features in accordance with the distances specified in Table VII of these Regulations.

703.2.3 - Relationship to Buildings, Roads, Driveway, or Parking Areas

A soil absorption system or device shall not be installed beneath any building, road, driveway, or parking area, or in any other location which may subject it to damage from vehicular traffic.

703.2.4 - Relationship to Floodplain; Surface Drainage Pathways

A Soil absorption system or device shall not be installed in any location subject to periodic flooding, or frequent surface run-off due to precipitation.

703.2.5 - Depth to Groundwater

The bottom of the excavation for any soil absorption system or device shall be isolated a minimum vertical distance of 4.0 feet above the seasonal high water table elevation.

703.2.6 - Depth of Impermeable Soils or Underlying Materials

The lowest point of any soil absorption system or device shall be isolated a minimum vertical distance of 4.0 feet above an impermeable soil layer, or other material of an impermeable nature.

703.2.7 - Reserve Area

A soil absorption system or device shall be located in such a manner as to provide sufficient area for installation of a future system or device of equivalent capacity.

703.3 - MATERIAL REQUIREMENTS

703.3.1 - Distribution Piping or Tubing

Distribution piping or tubing materials utilized in soil absorption systems shall conform to the criteria in the then current edition "Michigan Standards for Certification and Utilization of Perforated Plastic Tubing for Drainfields", as adopted by the Michigan Department of Public Health. Other materials may be utilized subject to approval of the Health Officer.

703.3.2 - Drainstone and Aggregate

Materials utilized for drainstone or aggregate in soil absorption systems shall possess physical properties and characteristics equivalent to washed 6-A aggregate.

703.3.3 -Fittings

Fittings and connections shall be of a material, design, and size compatible with the piping or tubing to which they are attached

703.3.4 -Drainstone and Aggregate Cover

Materials utilized to protect against infiltration of the earth or soil into completed soil absorption systems may be required by the Health Officer and, if provided shall be no thicker than necessary, and shall be biodegradable. Acceptable materials shall include untreated building paper and straw or other material approved by the Health Officer.

703.4 - CONSTRUCTION REQUIREMENTS, GENERAL

703.4.1 -Protection of Infiltrative Surfaces

No soil absorption system may be installed in soils having significant amounts of silt or clay, when such soils are in a wet or saturated condition. Precautions shall be taken to minimize the smearing or sealing of infiltrative surfaces caused by excavation, machinery, movement, or walking.

703.4.2 -Fill Materials

No soil absorption system shall be installed in any fill material which has not achieved a stabilized condition, either by natural settling, or mechanical compaction.

703.4.3 -Effluent Distribution

Every soil absorption system shall be designed in such a way as to maximize the even distribution of sewage effluent throughout all absorption surfaces of the system. If even distribution of effluent is impractical or impossible to achieve via gravity flow then provisions for mechanical dosing of effluent via pumps or siphons may be required.

703.4.4 - Design Selection Criteria

Soil absorption systems which provide for uniform distribution of sewage effluent at shallow depths shall be installed whenever practical. Preferred systems shall include trench style drainfields, and absorption bed (area excavation) installations. Seepage pits (dry wells) shall be permitted only if installation of drainfields or absorption beds are not feasible, due to space limitations, or due to excessive depths of impermeable soils overlying soils of acceptable permeability.

704.5 -INFILTRATIVE AREA REQUIREMENTS

704.5.1 - General Provisions

A soil absorption system shall provide sufficient total infiltrative area to provide for the confinement of all sewage beneath the ground surface at all times. Infiltrative area requirements shall be calculated based upon the quantity of sewage flow from the premise served, and the absorptive characteristics of the underlying soils. The same total infiltrative area requirements shall apply regardless of the type or category of soil absorption system to be utilized.

704.5.2 -Single and Two-Family Residential Premises

Soil absorption systems serving single and two-family residential premises shall possess minimum total infiltrative areas in accordance with the provisions in Table VII – C.

704.5.3 - Commercial, Industrial, Multi-Family Residential Premises

Commercial, industrial, multi-family residential systems serving premises other than single family premises shall be sized and constructed in compliance with the Michigan Department of Public Health Bureau of Environmental and Occupational Health guidelines for such systems entitled “MICHIGAN CRITERIA FOR SUBSURFACE SEWAGE DISPOSAL, JUNE, 1989.”

705 - ABSORPTION SYSTEMS AND DEVICES: DRAINFIELDS

705.1 - Calculation of Total Infiltrative Area

The total infiltrative area of a drainfield shall be equal to the sum of the infiltrative areas of the individual drainage trenches comprising the drainfield. The infiltrative area of a drainage trench shall be equal to the total trench bottom area, plus the side wall area beneath the top of the aggregate per 1.0 feet of trench.

Example: A single 2 ft. wide, 100 ft. long trench, using 4” diameter drainage pipe, and with 6” of stone under the

drainage pipes would possess an infiltrative area of: 200 Sq. ft. of trench bottom plus 200 sq. ft. of trench sidewall area for a total of 400 sq. ft. of infiltrative area.

TABLE VII – C
Minimum Required Total Infiltration Areas
Single and Two-Family Residential Premises

Percolation Rate (Min. / in.)	Soil Texture (Approximate)	Required Infiltrative Area*	
		1-2bedrooms*	3-4 bedrooms*
< 30 Min./In.	Coarse Sand to Sandy Loam	400 Sq. Ft. *	600 Sq. Ft. *
	31 – 45 Min./In.	Silty Loam to Clay Loam	600 Sq. Ft. *
>45 Min./In.	Silt to Clay	Unacceptable** **Acceptable for special design system if system to serve only single family dwelling located on greater than 10 acres parcel. Variance Agreement required.	

* Add 200 square feet per bedroom beyond 4 bedrooms

* Add 100 square feet for water conditioner

* Add 100 square feet for garbage grinder

705.2 - Dimensional Standards

A drainfield shall be constructed in accordance with the dimensional standards specified in Table VII – D.

TABLE VII - D
Drainfield Dimensional Standards

Item	Minimum	Maximum
Number of Trenches	2	----
Length of Trenches	----	100 ft.
Width of Trenches	1 ft.	3 ft.
Final Cover	1 ft.	3 ft.
Uniform Aggregate Depth		
a. Under distribution pipe	6”	18”
b. Above distribution pipe	2”	2”
Slope of Trenches and Distribution Pipes	level preferred	4” in 100 Feet
Sidewalls	4 ft.	----

705.3 - Dosing Requirements

Drainfields designed to accommodate sewage quantities equal to or exceeding 2000 gallons per day shall be dosed by means of pumps or siphons to insure uniform distribution of sewage. Dosing quantities and frequencies shall be reviewed and approved by the Health Officer.

706 – SOIL ABSORPTION SYSTEMS AND DEVICES; ABSORPTION BEDS

706.1 – Calculation of Total Infiltrative Area

The total infiltrative area of an absorption bed shall be equal to its entire bottom area.

706.2 – Dimensional Standards

An absorption bed shall be constructed in accordance with the dimensional standards specified in Table VII –F.

TABLE VII – F
Absorption Bed Dimensional Standards

Item	Minimum	Maximum
No. of Distribution Pipes	2	----
Length of Distribution Pipes	---	100 ft.
Separation Between Distribution Pipes and Bed Sidewall	1.5 ft.	3 ft.
Distance From Final Grade To Top of Aggregate	6 in.	3 ft.
Uniform Depth of Aggregate:		
a. Beneath Distribution Pipes	6 in.	----
b. Above Distribution Pipes	2 in.	2 in.
Slope of Distribution Pipes	Level Preferred	4 in. / 100 ft.

706.3 – Dosing Requirements

Absorption beds designed to accommodate sewage quantities equal to or exceeding 2000 gallons per day shall be dosed by means of pumps or siphons to ensure uniform distribution of sewage. Dosing quantities and frequencies shall be reviewed and approved by the Director.

707 – SOIL ABSORPTION SYSTEMS AND DEVICES: SEEPAGE PITS (DRY WELLS)

707.1 – Lining Materials

Materials utilized for lining seepage pit excavation shall be durable, and shall possess sufficient structural strength to prevent collapse or cave-in of the excavation. Lining materials shall allow free passage of sewage effluent to the surrounding infiltrative surfaces, while excluding the entry of stone or soil into the lined cavity. Acceptable materials include cement blocks, bricks, pre-cast concrete, or other materials approved by the Health Officer.

707.2 – Hatches and Covers

Hatches and covers shall be provided on the top surfaces of a seepage pit, to facilitate inspection and cleaning. Such hatches or covers shall be of a material possessing strength and durability equivalent to that of reinforced concrete.

707.3 – Infiltrative Area Requirements

Seepage pits shall provide for a total infiltrative area, either singly, or in combination, in accordance with the infiltrative area requirements specified in Tables VII – C and VII – D. Soils possessing an average percolation rate slower than ten minutes per inch shall not be acceptable for seepage pit installation.

707.4 – Calculation of Infiltrative Area

The total infiltrative area for a seepage pit, or combination of pits, shall be calculated in accordance with the following formula:

$$A = (P_s + P_b) \times N$$

Where:

A = Total infiltrative area.

P_s = Total sidewall area of pit in contact with permeable soils, from lowest inlet level to bottom of excavation.

P_b = Total bottom area of excavation.

N = Number of seepage pits of equal size.

707.5 – Dimensional Standards

A seepage pit shall be constructed in accordance with the dimensional standards specified in Table VII – G.

TABLE VII – G

Item	Minimum	Maximum
Distance From bottom of Excavation to Finish Grade	----	6 ft.
Depth of Final Cover Over Top Of Pit	1 ft.	3 ft.
Aggregate Thickness:		
a. Bottom of Pit	----	----
b. Between Liner and Pit Sidewalls	1 ft.	3 ft.
Distance Between Seepage Pits*	4 ft.	----

* If placed in separate holes. Seepage pits may be placed in common excavation in series with a maximum of three seepage pits to a common excavation.

708 – MISCELLANEOUS SOIL ABSORPTION SYSTEMS

Soil absorption systems other than drainfields, absorption beds, or seepage pits may be installed, when, in the judgment of the Health Officer, their use is justified, and will adequately protect public health and safety and the natural environment. The use of miscellaneous soil absorption systems shall be subject to the same conditions and limitations which apply to other categories of soil absorption systems.

709 – ALTERNATING SUB-SURFACE SOIL ABSORPTION SYSTEM

A device to allow separate discharge of septic tank effluent to two or more sub-surface soil absorption systems may be required when in the opinion of the Health Officer such a device is necessary to extend the life of the system. Such devices shall allow complete separation of the flow between individual sub-surface disposal systems.

710 – ALTERNATIVE SEWAGE DISPOSAL FACILITIES

710.1 – Authorization of Guidelines

The Health Officer shall be empowered to prepare guidelines concerning the application, location design, construction, usage, and maintenance of specific categories of alternative sewage disposal facilities, devices, or process. Such guidelines shall be reviewed and approved by the Board of Health

710.2 – General Provisions

Alternative sewage disposal facilities, devices, or processes may be approved by the Health Officer. An alternative sewage disposal facility or process shall not be approved unless the Health Officer has determined that the use of such a facility, device, or process will not create a nuisance, result in a hazard to public health or safety, or endanger the natural environment. The usage of alternative sewage disposal facilities, devices, or processes shall be subject to restrictions or limitations imposed by statutes, ordinances, or rules other than those contained in these Regulations, and to policies and guidelines adopted pursuant to authority of Section 700 of these Regulations.

710.3 – Experimental Sewage Disposal Facilities

In the absence of applicable guidelines and technical information concerning a new category of alternative sewage disposal facility, device, or process, the Health Officer may authorize the utilization of such an alternative facility, device, or process on a limited experimental basis if it is determined that no hazard to public health and safety, nuisance, or degradation of the natural environment will result. The Health Officer may impose special conditions and requirements pertaining to the approval and use of such a facility, including the submission of detailed engineering plans, periodic operational reports, periodic inspections, and provisions for alternate methods of sewage disposal in the event of failure of the experimental facility.

ARTICLE VIII – VARIANCES

801 - AUTHORIZATION TO GRANT VARIANCES

The Health Officer shall be empowered to grant variances to the requirements of these Regulations in situations when the strict application of such requirements would create a unique hardship or unfair burden upon those affected. Variances may be authorized only when it can be reasonably demonstrated that no hazard to public safety, no nuisance, and no degradation of the natural environment will result.

802 – DOCUMENTATION OF VARIANCES

All variances granted by the Health Officer shall be documented in writing. Records concerning a variance shall contain a description of the variance, and a statement of the reasons why the variance was authorized. If the variance concerns requirements for a proposed sewage disposal facility, details concerning said variance shall be noted on the permit issued for the facility.

803 – REVIEW OF VARIANCES

All documented variances shall be periodically reviewed and evaluated by the Health Officer to insure that they are not contrary to the purpose of the Regulations.

ARTICLE IX – SITE EVALUATIONS OF VACANT LAND

901 – PURPOSE

Vacant land evaluations may be conducted by the Health Officer on behalf of requesting persons for the purpose of determining the suitability of undeveloped properties as silts for installation of sewage disposal facilities. Such evaluations shall be conducted utilizing the standards and requirements specified in these Regulations. The findings of such evaluations are intended for informational purposes only.

902 - APPLICATIONS FOR SITE EVALUATIONS OF VACANT LAND

Applications for vacant land evaluations shall be submitted on forms provided for such purposes by the Health Officer and shall be accompanied by the appropriate fee, as established by the Board of Health. If the applicant for an evaluation is not the owner of the property to be evaluated, the applicant shall be responsible for obtaining necessary permissions from the owner to authorize entry upon, and evaluation of said property.

903 - RESPONSIBILITY FOR NECESSARY EVALUATION SERVICES

If the Health Officer determines that special evaluation procedures are necessary in order to conduct a vacant land evaluation, the responsibility for arranging for such procedures and the responsibility for paying for associated services may include excavations, soil borings, permeability tests, soil classifications or other similar tests.

904 - EVALUATION REPORTS

Reporting of findings of vacant land evaluations shall be provided in writing to the applicant. The findings of such reports shall relate only to specific sites evaluated and to specific development proposal as outlined by the applicant at the time of submitting the applicant request. Opinions expressed in evaluation reports shall be subject to revision in the event of any change in conditions, including subsequent revisions to applicable statutes, rules or regulations.

ARTICLE X
WELL WATER SUPPLIES

1001 - WELL CONSTRUCTION REQUIREMENTS

Requirements with respect to water well construction and water pump installations for new water wells with the counties of Branch, Hillsdale and St. Joseph shall be those requirements as set forth in Part I - R. 325.1601 (Rule 101) through and including R.325.1676 (Rule 176) of the "GROUNDWATER QUALITY CONTROL RULES" as promulgated November 23, 1966, by the Director of Public Health of The Michigan Department of Public Health pursuant to promulgation authority under Part 127, Act 368, P.A. 1978 as amended.

1002 – ISOLATION REQUIREMENTS FOR TYPE II AND TYPE III WATER SUPPLIES

For all water supplies serving the public, Type II and Type III, such as motels, food service establishments, gasoline stations, etc., the isolation requirements shall be as required by Act 399, P.A. of 1976 as amended.

1003 - CONSTRUCTION PERMIT

It shall be unlawful for any person to construct a new Private or Type II or Type III public well water supply or install a pump for such supplies unless he has obtained a permit to construct or install issued by the Health Officer.

1003.1 - Permit Exceptions

The requirement for a well or pump permit shall not apply under the following circumstances.

- a. Permits are not required for replacement pumps, well point, or well screens, providing the pump capacity is not increased, or the well depth or location changed.
- b. The served premise falls within a category which subjects it to the legal jurisdiction of an agency of state or federal government, and such agency has not delegated authority for issuance of permits to the Department.

1003.2 - Application for Permits

Application for a permit shall be filed with the Health Officer, on forms provided by the Health Officer, prior to the issuance of a construction permit for a private well or Type II or Type III public well.

1003.3 - Permit Issuance

The Health Officer, following his review of an application for a Private or Type II or Type II Public well construction or pump installation, may issue a permit to the applicant authorizing performance of the requested construction or installation. The permit shall describe the nature and extent of work authorized, and may contain specific requirements or limitations which the Health Officer deems necessary.

1003.4 - Permit Expiration

A well construction or pump installation permit shall remain valid for a period of 1 year from date of issuance, unless an extension is requested from, and approved by, the Health Officer. A well construction or pump installation permit shall not be transferable as to permit holder or property location.

1003.5 - Voidance of Permits

The Health Officer may declare a previously issued permit for a well construction or pump installation for a private or Type II or Type III public supply to be null and void, for any of the following reasons or cause:

- a. False or inaccurate information supplied by the permit holder.
- b. A change in the plans of the permit holder affecting circumstances relative to the well water supply design, location or use.
- c. Acquisition of new information indicating that the previously approved installation site for the well water supply does not satisfy the requirements of these Regulations.

1003.6 - Permit Denial

The Health Officer shall be authorized to deny a water well installation permit where the parcel of land is found to be in violation of Act 288, P.A. 1967 as amended, entitled, "Subdivision Control Act 1967", or where there is sufficient reason to believe that the site does not meet the minimum requirements for a water well installation permit.

1004 - INPECTION AND APPROVAL

The Health Officer shall make such inspection as he deems necessary at the construction site of any new, replacement or addition to any well water supply system or pump installation. Failure to construct according to the applicable well construction or pump installation requirements of Section 1001 or 1001.1 of these regulations shall be deemed a violation of these regulations.

ARTICLE XI
NUISANCES

1101 - SOLID WASTE STORAGE AND TRANSPORTATION

1101.1 -Technical Definitions

1101.1.1 - Garbage

“Garbage” shall mean rejected food wastes including waste accumulation of animal, fruit or vegetable matter used or intended for food or that attend preparation, use cooking, dealing in or storing of meat, fish fowl, fruit or vegetable.

1101.1.2 - Rubbish

“Rubbish” shall mean non putrescible solid wastes, consisting of both combustible and noncombustible wastes, such as paper, cardboard, tin cans, yard clippings, wood, glass, bedding, crockery, or litter of any kind that will be a detriment to the public health and safety.

1101.1.3 - Litter

“Litter” shall mean “garbage” and “rubbish”, as herein defined, and all other waste material which, if thrown or deposited in an unapproved or unauthorized areas as herein prohibited, tends to create a danger to public health, safety or welfare.

1101.2 - Accumulation of Garbage

No owner of any premise or occupant of any private or two family dwelling shall permit to accumulate upon such premise any garbage except in covered containers of rodent proof, fly proof and water tight construction.

1101.3 -Accumulation of Rubbish

No owner of any premise or occupant of any private or two family dwelling shall permit to accumulate on such premise any rubbish except durable containers with close fitting covers except that bulky rubbish such limbs, weeds, large cardboard boxes, etc., may be bundled and so stored as not to provide a nuisance or a breeding place, or potential breeding place, for rodents, insects, or other vermin.

1101.4 -Disposal of Garbage and Rubbish

Garbage and rubbish shall be disposed of in a manner which creates neither a nuisance nor menace to health in accordance with the provisions of Act 641, P.A. 1978 as Amended and Rules.

1101.5 - Transportation of Garbage and Rubbish

Vehicles used in the transportation of garbage and rubbish shall be so constructed or maintained so that no portion of the contents therefrom shall be accidentally discharged from the vehicle.

1101.6 -Littering

It shall be unlawful for any person to place, deposit, throw, scatter or leave in any street, alley or public place or on any public or private property, occupied or vacant, any litter, dead animal or other noxious material.

1102 - PREMISES UNFIT FOR HABITATION

Any habitable building which the Health Officer has found to be unfit for human habitation because of any of the following defects may be declared by the Health Officer to be a nuisance and may be condemned by the Health Officer:

- a. Those which shall have been damaged by fire, wind or other cause so as to have become dangerous to life, safety, or the general health and welfare of the occupants or the public.
- b. Those which because of their conditions have become or are so dilapidated decayed unsafe unsanitary or are likely to cause sickness or disease as to work injury to the health, safety or general welfare of those living therein.
- c. Those which lack natural illumination, natural ventilation or sanitation facilities to an extent to endanger the health or safety of the occupants.
- d.

1102.1 - Minimum Requirements for Habitable Dwelling

The minimum requirements for habitable dwelling shall be those requirements contained in Article 3, Section PM 301.1 through PM 301.7; Article 3, Section PM-302.1 through PM-303.8; PM-400.1 through PM-403.10; Article 5, PM-500.1 through PM-506.1; Article 6, PM-601.1 through PM-603.2; Article 7, PM-700.1 through 704.5.1; Article 8, PM-800.1 through PM-802.4: Article 9, PM-900.1 through 902.1 of the property maintenance code of the Building Officials Conference of America, Inc., 4051 W. Flossmor Rd. Country Hills, Illinois, 60478-5795 entitled "The BOCA National Property Maintenance Code/1990, Third Edition".

1102.2 - Notices and Orders

Upon determination by the Health Officer that a habitable building is unfit for human habitation, the Health Officer shall post in a conspicuous place or places a notice or notices to read substantially as follows: “This building has been inspected and found to be unfit for human habitation.”

1102.3 - Securing of Condemned Buildings

The owner of any building which is condemned as unfit for human habitation and vacated shall make such building safe and secure in a manner the Health Officer deems necessary to insure that the building shall not be dangerous to human life and shall not constitute either a fire hazard or a public nuisance.

1102.4 - Vacating of Condemned Buildings

Any habitable building which has been condemned and placarded by the Health Officer shall be vacated within a reasonable time, as required by the Health Officer. No owner or agent shall let to any person for human for human habitation and no person shall occupy any building which has been condemned by the Health Officer, after the date on which the Health Officer has required the affected building to be vacated.

1103 - DISPOSAL OF INFECTIONS OR TOXIC MATERIALS

It shall be unlawful to place or allow to remain in any place accessible to children or unauthorized persons any infectious or used bandages, and syringes or medical injection devices, and razor blades, or any drugs, vaccines, medicines, chemicals or other toxic materials. Any such materials deposited or allow to remain in a place or condition accessible to unauthorized persons shall be hereby declared to be a nuisance, and the owner or responsible person in control of the premise where said nuisance exists shall have the duty to remove or secure the materials in a manner to abate and prevent such nuisance. Disposal shall be accomplished in a manner acceptable to the Health Officer.

1104 - ANIMALS AND VERMIN

It shall be unlawful for any person to create or maintain a vermin or rat infested condition on premises owned by him. When the Health Officer shall find an infestation or rodents, insects or evidence of such infestation, on or within such property, the Health Officer may order the owner or other responsible person to take whatever measures are deemed to be reasonably necessary to abate the condition.

1104.1 - Disposal of Dead Animals

It shall be unlawful for any person to allow a dead animal to remain for over twenty-four (24) hours after death on premises or occupied by him. Such animals shall be buried to a depth of four (4) feet or as otherwise specified by the Health Officer. The bottom of the required excavation shall be a minimum of four (4) feet above the high ground water elevation.

AGREEMENT FOR THE OPERATION OF THE BRANCH, HILLSDALE, AND ST. JOSEPH COMMUNITY HEALTH AGENCY FOR BRANCH, HILLSDALE, AND ST. JOSEPH COUNTIES

THIS AGREEMENT made and entered into this 13th day of December A.D., 2012, by and between the Boards of Commissioners of Branch, Hillsdale, and St. Joseph Counties (hereinafter collectively referred to as "Counties").

WITNESSETH:

WHEREAS, Act 368 of Public Acts of 1978, as amended, of the State of Michigan provides that any combination of counties may elect to establish a District Health Department by a majority vote of each County Board of Commissioners;

WHEREAS, the Counties of Branch, Hillsdale, and St. Joseph have operated the Branch-Hillsdale-St. Joseph Community Health Agency since January 1, 1972.

WHEREAS, the Counties believe that it is prudent to formalize the rights and obligations of each county and their relationship to the Branch-Hillsdale-St. Joseph Community Health Agency;

WHEREAS, the counties desire to modify the organizational framework for the Community Health Agency;

WHEREAS, Article 7, Section 28 of the Michigan Constitution of 1963 and Act 7 of the Public Acts of 1967, as amended, MCL 124.501 et seq., permit counties to, by agreement, perform functions that could be performed by individual counties;

WHEREAS, the Counties desire to enter into an agreement to continue a public entity known as the Branch-Hillsdale-St. Joseph Community Health Agency, and to specify the powers and duties under which it will operate pursuant to the above cited authority; and

WHEREAS, Section 2448 of the Public Health Code, as amended (MCL 333.2448), expressly provides for intergovernmental contracts to reorganize local health departments.

THEREFORE, for and in consideration of the mutual covenants hereinafter contained, IT IS HEREBY AGREED as follows:

SECTION I.

ESTABLISHMENT

Pursuant to the Public Health Code, 1978 PA 368, MCL 333.1101 et seq., as amended, and pursuant to the Michigan Constitution of 1963, Article 7, Section 28, and 1967 PA 7, as amended, MCL 124.501, et seq., the duly elected Commissioners of Branch, Hillsdale, and St. Joseph Counties, State of Michigan hereby state the desire to continue the public entity known as the Branch-Hillsdale-St. Joseph Community Health Agency (hereinafter referred to as the "Community Health Agency").

SECTION II.

DEFINITIONS

The following terms for this Agreement shall have the meanings attached to them:

"Board" means the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health (hereinafter sometimes referred to as "Board of Health").

"Health Officer" means the health officer of the Branch-Hillsdale- St. Joseph Community Health Agency.

"Department" means the Department of Community Health of the State of Michigan.

"Director" means the director of the Department of Community Health of the State of Michigan.

SECTION III.

PURPOSE OF THE DEPARTMENT

The purpose of the Branch-Hillsdale-St. Joseph Community Health Agency is to provide a range of public health services for persons located within the three (3) counties as required by and permitted under 1978 PA 368, as amended. The Board shall carry out the applicable provisions of the Public Health Code and shall, subject to the rules designated by the Michigan Department of Community Health, provide services permitted under the Public Health Code.

SECTION IV.

AREA SERVED

The Board shall provide the services set forth herein to persons who are located within Branch, Hillsdale, and St. Joseph Counties.

SECTION V.

ESTABLISHMENT OF THE BOARD

The Counties hereby establish a Board of Health. The Board shall set policy and procedures governing the operation of the Community Health Agency and shall have ultimate authority regarding the exercise of the Community Health Agency powers. The Board shall be composed of six (6) members: two (2) members from Branch County, two (2) members from Hillsdale County, and two (2) members from St. Joseph County. Board members shall be appointed by the applicable Board of Commissioners and must be currently serving as County Commissioners. The Board shall elect a chairperson and vice-chairperson. The chairperson and vice-chairperson shall not be from the same county. It may create additional officers and such committees as it deems appropriate. The Board shall set its meeting dates and adopt rules of procedures and determine the number of members who will constitute a quorum of the Board; provided, however, the Board may recommend that the respective board of county commissioners dissolve the Community Health Agency only by a majority vote of the entire Board. As used in this Agreement, the terminology "entire board" shall mean the six (6) members of the Board or lesser number if a vacancy exists in the number of representatives to which each county is entitled. All meetings of the Board shall comply with Michigan's Open Meetings Act, being 1976 Public Act 267, as amended. Actions taken by the Board prior to the effective date of this Agreement are hereby ratified.

SECTION VI.

TERM OF BOARD MEMBERSHIP,
VACANCIES, REMOVAL FROM OFFICE

The term of office of Board members shall commence January 1st and run through December 31st or until their successors are qualified and appointed to office. Board members shall be appointed by the respective Boards of Commissioners for two (2) year terms running from January 1st through December 31st commensurate with Board of Commissioners terms, or until their successors are qualified and appointed. Membership shall cease upon any member ceasing to be a County Commissioner.

Vacancies shall be filled for unexpired terms in the same manner as original appointments. A Board member may be removed from the Board by the appointing Board of Commissioners.

SECTION VII.

BOARD DUTIES

The Board shall:

- a) Annually examine and evaluate the public health needs of the Counties and the public and non-public services necessary to meet those needs.

- b) Review and approve an annual program statement and budget. The format and documentation of the annual program statement and budget shall be specified by the Department.
- c) Submit the annual program statement and budget to the Department by such date as is specified by the Department.
- d) Submit to each Board of Commissioners an annual request for County funds to support the Community Health Agency. Such request shall be in the form and at the time determined by the Boards of Commissioners.
- e) Take action to secure private, federal, state, and other public funds to help support its programs.
- f) Approve and authorize all contracts, which may be effectuated by delegation to the Health Officer.
- g) Review and evaluate the quality, effectiveness, and efficiency of services being provided by its programs.
- h) Appoint a health officer and a medical director, who shall each meet the standards of training and experience established by the Department.
- i) Establish general policy guidelines within which the health officer shall execute the Community Health Agency programs.
- j) Audit all claims against the Community Health Agency and apportion approved claims as provided under the approved formula established under Section 2417 of the Public Health Code, as amended (MCL 333.2417).
- k) The Community Health Agency shall maintain liability insurance in such amounts as the Board shall determine.

SECTION VIII.

POWERS OF THE BOARD

The Board shall have all the rights, powers, duties and obligations of a District Health Department created under MCL 333.2415, as are set forth in the Public Health Code, Public Act 368 of 1978, as amended. IN addition, the Board shall have the following powers and duties, to the extent these powers and duties are not in consistent with the powers of a District Health Department.

1. To enter into contracts, including contracts for the purchase of public health services with private persons and/or entities or public agencies.
2. To acquire ownership, custody, operation, maintenance, lease or sale of real or personal property, subject to any limitation on the payment of funding therefore now or subsequently imposed by the Public Health Code, 1978 PA 368, as amended.
3. To dispose of, divide, and distribute property.
4. To accept gifts, grants, assistance, funds or bequests.

5. To make claims for federal or state aid payable to the participants in the programs of the Board.
6. To incur debts, liabilities or obligations which do not constitute the debts, liabilities or obligations of any of the parties to this agreements, subject to any limitations thereon which are now or hereafter imposed by the Public Health Code, 1978 PA 368, as amended.
7. To, in its own name, employ employees and agents, which employees or agents shall be considered employees or agents of the board. The Board shall have the powers, duties and responsibility for establishing policies, guidelines and procedures for employees and shall have the power, duty and responsibility to establish wages and fringe benefits such as, but not limited to, sick leave, vacation, health insurance, pension and life insurance; to provide for workers' compensation and for any and all other terms and conditions of employment of an employee of the Board. However, any employee initially transferred to the Branch-Hillsdale-St. Joseph Community Health Agency by any of the contracting Counties or from the predecessor Branch-Hillsdale-St. Joseph Community Health Agency shall continue to have all benefits, obligations and status with respect to pay, seniority credits, and sick leave, vacation, insurance and pension credits that the individual held as a County or Community Health Agency employee. The above-stated conditions and limitations upon the transfer of County or Community Health Agency employees shall not serve to limit the right of the Board to hire County or Community Health Agency employees voluntarily seeking a job change upon such terms and conditions as the Board and the individual may agree.
8. To fix and collect charges, rates, rents or fees where appropriate and to promulgate rules and regulations related thereto. They shall include the power to set fees for the Community Health Agency services as authorized by Section 2444 of the Code. All fees shall be paid into the general fund of the Community Health Agency.
9. The powers of the Community Health Agency shall be liberally construed consistent with the Constitution and statutes of this state.

SECTION IX.

HEALTH OFFICER

The health officer shall function as the chief executive and administrative officer of the Branch-Hillsdale-St. Joseph Community Health Agency and shall execute and administer the Branch-Hillsdale-St. Joseph Community Health Agency in accordance with the approved program statement and budget, the general policy guidelines established by the Board, the applicable procedures and regulations, and the provisions of state statute. The terms and conditions of the health officer's employment, including tenure of service, shall be as mutually agreed to by the Board and health officer and shall be specified in writing.

SECTION X.

FINANCES

The Board shall have the budgetary and financial control over the Community Health Agency. The Board shall base its request for county financial contributions on the proposed budgetary needs of the Community Health Agency. These financial contributions may come from the general fund of each county or from any fees collected by the Community Health Agency in that county or a combination thereof. Payment of the financial contribution of each county shall be made under such terms as shall be specified by the Board and approved by the respective boards of commissioners. The financial contribution shall be approved by each county based on the financial needs of the Community Health Agency. The contribution scheduled shall be allocated pro-rata among the counties based on the percent of population of each county as compared to the population of the tri-counties as shown in the last decennial federal census. The last decennial federal census shall be adjusted by subtracting the State prison population from Branch County's population. In the event that the services of the Community Health Agency are requested or required to be provided at the State prison, Branch County shall be responsible for any and all associated costs up to a capped amount. The capped amount shall be calculated by multiplying the current year's pro-rata rate and the prison population as recorded on January 1st of the current year. The financial contribution shall be computed annually and shall be approved as required by Section 2417 of the Public Health code (MCL 333.2417). Nothing in this Agreement shall bind a county to accept the annual allocation request by the Board.

If a county fails to allocate its full amount requested, the Board may not pass its budgetary shortfall to the other counties. However, the board in its discretion may elect one of more of the following options, taking into account the amount of the non-payment, its duration, the financial condition of the Community Health Agency and such other factors as it deems relevant:

1. Reduce services in the non-paying county consistent with the non-payment;
2. Raise fee rates for services in the amount the Board deems necessary.
3. Recommend the dissolution of the Community Health Agency.
4. Any combination of the above as determined by the Board.

State and local contributions and all other funds received shall be handled and banked directly by one of the treasurers of one of the member counties as selected by the Board, which has the duty to insure that the funds are banked and accounted for consistent with requirements of law for local governmental units.

The Board shall be credited all investment income (minus reasonable handling fees) derived from the assets of the Community Health Agency. All interest income shall also be credited into the general fund of the Community Health Agency.

SECTION XI.

AUDIT

The Community Health Agency shall conduct an annual agency audit in accordance with the law and as directed by the Board. A copy of the audit shall be given to each Board member upon its completion. If requested by a county, a representative of the auditing firm and the Community Health Agency shall appear before the Board of Commissioners of each county and answer questions regarding the audit or any other aspect of Community Health Agency activities. The counties shall have access to all Community Health Agency records except those records subject to a legally recognized privilege.

SECTION XII.

INFORMATION

The Board shall provide to Branch-Hillsdale-St. Joseph Counties, separately and/or jointly, as requested, any and all information related to the operations of the Board on a timely basis.

SECTION XIII.

NOTICES

Any notices required by this Agreement shall be deemed made when mailed certified mail, return receipt requested, to each county clerk, to each chairperson of the Board of Commissioners of each participating county, and the Health Officer of the Community Health Agency.

SECTION XIV.

COUNTY ORDINANCES

Nothing in this agreement shall restrict the right of a county to enact a local ordinance affecting its public health needs and setting fees in any such ordinance. However, any such ordinance shall not impose an obligation or duty on the Community Health Agency or its personnel unless (a) the ordinance has been approved by the Board; provided, however, that the Board's approval shall be limited to assessing the financial and personnel impact of the ordinance on the Community Health Agency, the legality and enforceability of the proposed ordinance and potential liability to the Community Health Agency. (The general public policy considerations of whether the proposed ordinance is needed is solely the responsibility of the county which is considering enacting the proposed ordinance), (b) an agreement has been reached with the county which enacted the ordinance regarding the disposition of any fees required by the ordinance; and (c) an agreement has been reached with the county which enacted the ordinance regarding the reimbursement to the Community Health Agency of any costs of enforcement.

SECTION XV.

ORDINANCE UNIFORMITY

Each county understands the legal and practical importance of ordinance uniformity throughout the District. Each county agrees to make every effort to keep its public health ordinances uniform with those of other counties within the tri-counties. However, this Agreement acknowledges that local conditions and political desires within a particular county may result in some unique ordinance provisions.

SECTION XVI.

DURATION OF THIS AGREEMENT
AND RIGHTS UPON TERMINATION

- a) This Agreement shall continue indefinitely unless a county withdraws as provided by this Agreement.
- b) This Agreement may be terminated by the following method:
The county(ies) may give written notice of its(their) desire to withdraw as a member of the Community Health Agency to the Board of Health and to the other counties which are a party to this Agreement. The effective date of the withdrawal by the withdrawing county(ies) shall be effective sixty (60) days from the date of receipt from the withdrawing county(ies). The property division provisions of paragraph XVI.c.1 shall continue to apply to all counties, including the withdrawing county, until the property division has been completed; otherwise, this Agreement shall be terminated as to the withdrawing county on the effective date of the withdrawal.
- c) Property Division.
 1. If the county(ies) withdraws pursuant to Paragraph (b) above, then the following procedure shall be used. The withdrawing county(ies) shall not be obligated to pay (or will be reimbursed if it already had paid) a pro-rata portion of its(their) financial contribution attributable to the remainder of the calendar year after the effective date of the dissolution. In addition, the withdrawing county(ies) shall receive all real and personal property located within the boundaries of the withdrawing county(ies). The withdrawing county(ies) will assume any existing debt applicable to the assets which it receives. The distribution of assets shall take place as soon as possible after the effective date of the dissolution.

2. Nothing contained herein shall preclude the three (3) counties from otherwise jointly agreeing in writing to any distribution of the real and personal property among themselves as they deem proper.

- d) If the withdrawing County will assume the responsibility for any health jurisdiction or function previously performed by the Community Health Agency, or if it will assume the responsibility to pay the wages of or employ any former employee of the Community Health Agency, MCL 333.2448 shall apply, and the Withdrawing County will provide an appropriate assurance or evidence to the Community Health Agency documenting its compliance. MCL 333.2448 provides:

A city, county, district, or part thereof may enter into a intergovernmental contract necessary or appropriate to a reorganization or an assumption or relinquishing of a health jurisdiction or function authorized by this part. The contract shall provide that an employee transferred shall not lose any benefits or right as a result of the transfer.

SECTION XVII.

STATUS OF THE BOARD

The Board established pursuant to this agreement shall be a separate legal public entity with the power to sue and be sued.

SECTION XVIII.

AMENDMENT PROCEDURES

This agreement may be amended only by the mutual agreement of the participating counties pursuant to resolution authorized by each of the County Boards of Commissioners and entered into in writing, and approved as may be required by the Urban Cooperation Act (MCL 124.501, et seq.) and the Public Health Code (MCL 333.1101, et seq.)

SECTION XIX.

CONFLICT OF PROVISIONS

If there is any conflict between this agreement and the Public Health Code (MCL 333.1101, et seq.), as existing or as subsequently amended, the Public Health Code shall prevail, and those provisions of this agreement inconsistent therewith shall be deemed null, void and of no effect.

SECTION XX.

CONTINUITY

All assets and liabilities as well as the contractual rights and obligations currently in the name of the existing Branch-Hillsdale-St. Joseph Community Health Agency shall continue. Each county authorizes its Chair and Clerk to execute such documents as are necessary to effectuate this provision. The created Community Health Agency hereby agrees to assume all such transfers.

SECTION XXI.

EFFECTUATION OF AGREEMENT

This agreement shall not take effect until this agreement is approved by the Governor of the State of Michigan and the Director of the State Department of Community Health as provided for by law. Upon receipt of the approval of the Governor and after filing with the County Clerk of each county and the Secretary of State, this agreement shall take effect on January 1, 2013.

The name of the entity and its administrative office's business address are Branch-Hillsdale-St. Joseph Community Health Agency, 570 Marshall Road, Coldwater, Michigan 49036. Any subsequent change thereof by the Board shall be reported in writing to the forming Counties, the State Department of Community Health and the Governor of Michigan.

The persons signing this agreement hereby verify by their signatures that they are authorized to execute this agreement pursuant to appropriate County Board of Commissioners resolution.

IN THE PRESENCE OF:

Donald Vodka
Bob Hartz

Alan E. Ring
ALAN RINGELIBERG
Jay Abbott
JAY C. STOTT

James F. Spinner
Phyllis Long

BRANCH COUNTY
Mike Smith
BY: CHAIRPERSON, BOARD OF COMMISSIONERS
Susan Kwasnik 11/27/12
ATTEST: COUNTY CLERK

HILLSDALE COUNTY
Andy W. Dden
BY: CHAIRPERSON, BOARD OF COMMISSIONERS
Marney M. East
ATTEST: COUNTY CLERK

ST. JOSEPH COUNTY
[Signature]
BY: CHAIRPERSON, BOARD OF COMMISSIONERS
Paul J. Bender
ATTEST: COUNTY CLERK

Resolution

To approve the intergovernmental agreement under the urban cooperation act for the Branch-Hillsdale-St. Joseph Community Health Agency for Branch, Hillsdale and St. Joseph Counties

WHEREAS, pursuant to the Michigan Public Health Code, the Counties of Branch, Hillsdale and St. Joseph established the Branch-Hillsdale-St. Joseph Community Health Agency; and

WHEREAS, the Counties of Branch, Hillsdale, and St. Joseph wish to continue the existing tri-county public health department structure through the continuation of a separate legal entity as permitted under the Michigan Constitution of 1963, Article VII, Section 28; and the Urban Corporation Act, PA 7 of 1967, as amended, being MCLA 124.501, et seq.; and

WHEREAS, the respective Counties have reviewed and agreed to the terms of the "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency."

THEREFORE BE IT RESOLVED, that the attached "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency" is approve.

BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign the finalized "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency."

BE IT FURTHER RESOLVED, that a certified copy of this Resolution and the attached "intergovernmental Agreement" for the Branch-Hillsdale-St. Joseph Community Health Agency" shall be filed with the County Clerk's office and the Michigan Secretary of State's office.

BE IT FURTHER RESOLVED, that a copy of this Resolution, and the attached "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community," shall be sent to the Michigan Governor's office pursuant to the Urban Cooperation Act, PA 7 of 1967.



Dale Swift, Chairman


_____ 11/21/12

Teresa Kubasiak, County Clerk

ST. JOSEPH COUNTY
RESOLUTION NO. 20-2012

**AMENDING THE INTERGOVERNMENTAL AGREEMENT FOR THE
BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**

WHEREAS, pursuant to the Michigan Public Health Code, the Counties of Branch, Hillsdale and St. Joseph established the Branch-Hillsdale-St. Joseph District Health Department January 1, 1972; and

WHEREAS, in December 1997 the Counties entered into a written agreement establishing the Branch-Hillsdale-St. Joseph Community Health Agency; and

WHEREAS, the Counties of Branch, Hillsdale, and St. Joseph wish to continue the existing tri-county public health agency structure created in 1997 as permitted under the Michigan Constitution of 1963, Article VII, Section 28; and the Urban Corporation Act, PA 7 of 1967, as amended, being MCLA 124.501, et seq.; and

WHEREAS, the respective Counties have chosen to amend the terms of the December 1997 “Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency.”

THEREFORE BE IT RESOLVED, that the attached amended “Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency” is approve.

BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign the finalized amended “Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency.”

BE IT FURTHER RESOLVED, that a certified copy of this Resolution and the attached amended “Intergovernmental Agreement” for the Branch-Hillsdale-St. Joseph Community Health Agency” shall be filed with the County Clerk’s office and the Michigan Secretary of State’s office.

BE IT FURTHER RESOLVED, that a copy of this Resolution, and the attached amended “Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community,” shall be sent to the Michigan Governor’s office pursuant to the Urban Cooperation Act, PA 7 of 1967.

STATE OF MICHIGAN)
) SS
COUNTY OF ST. JOSEPH)

I, PATTIE S. BENDER, Clerk of the St. Joseph County Board of Commissioners and Clerk of the County of St. Joseph, do hereby certify that the above Resolution was duly adopted by the said Board on December 5, 2012.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the seal of the Circuit Court at Centreville, Michigan, this 12th day of December 2012.


Pattie S. Bender, Clerk

November 13, 2012

Resolution to approve the intergovernmental agreement under the urban cooperation act for the Branch-Hillsdale-St. Joseph Community Health Agency for Branch, Hillsdale and St. Joseph Counties

WHEREAS, pursuant to the Michigan Public Health Code, the Counties of Branch, Hillsdale and St. Joseph established the Branch-Hillsdale-St. Joseph Community Health Agency; and

WHEREAS, the Counties of Branch, Hillsdale, and St. Joseph wish to continue the existing tri-county public health department structure through the continuation of a separate legal entity as permitted under the Michigan Constitution of 1963, Article VII, Section 28; and the Urban Corporation Act, PA 7 of 1967, as amended, being MCLA 124.501, *et seq.*; and

WHEREAS, the respective Counties have reviewed and agreed to the terms of the "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency."

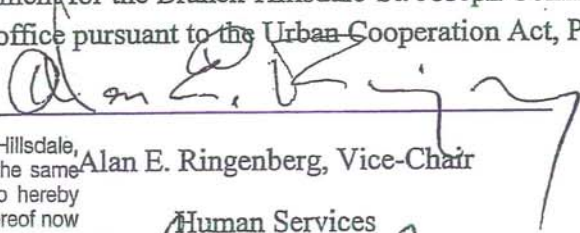
THEREFORE BE IT RESOLVED, that the attached "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency" is approve.

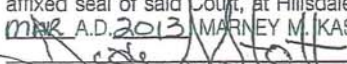
BE IT FURTHER RESOLVED, that the Board Chairperson is authorized to sign the finalized "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community Health Agency."

BE IT FURTHER RESOLVED, that a certified copy of this Resolution and the attached "intergovernmental Agreement" for the Branch-Hillsdale-St. Joseph Community Health Agency" shall be filed with the County Clerk's office and the Michigan Secretary of State's office.

BE IT FURTHER RESOLVED, that a copy of this Resolution, and the attached "Intergovernmental Agreement for the Branch-Hillsdale-St. Joseph Community," shall be sent to the Michigan Governor's office pursuant to the Urban Cooperation Act, PA 7 of 1967.

CLERK'S CERTIFICATE
STATE OF MICHIGAN
COUNTY OF HILLSDALE } SS


Alan E. Ringenberg, Vice-Chair
Human Services

I, MARNEY M. KAST, Clerk of the County of Hillsdale, and Clerk of the Circuit Court for said County the same being a Court of Record and having a seal, do hereby certify that this is a copy of the original record thereof now remaining in my office, and have found said copy to be, and that the same is, a true and correct transcript therefrom, and of the whole of such original record. In Testimony Whereof, I have hereunto set my hand and affixed seal of said Court, at Hillsdale, this 15th day of ~~Nov~~ Nov A.D. 2013. MARNEY M. KAST, COUNTY CLERK
 DEPUTY CLERK


Andy Welden, Chair

Board of Commissioners

APPROVED BY THE BOARD OF COMMISSIONERS ON NOVEMBER 13, 2012.



STATE OF MICHIGAN
DEPARTMENT OF COMMUNITY HEALTH
LANSING

RICK SNYDER
GOVERNOR

JAMES K. HAVEMAN
DIRECTOR

April 2, 2013

Mr. Brad Benzing
Hillsdale County Commissioner and Board of Health, Chairman
570 N. Marshall Road
Coldwater, MI 49036

Re: Intergovernmental Agreement
Branch - Hillsdale - St. Joseph Community Health Agency

Dear Chairman Benzing:

The Michigan Department of Community Health has completed its review of your Intergovernmental Agreement for the Branch - Hillsdale - St. Joseph Community Health Agency and has found that it complies with guidance provided under the Michigan Public Health Code and the Urban Cooperation Act.

The department finds this agreement to be a most encouraging development. We are pleased to see your continued commitment to the concepts of core capacities and minimum program requirements. In addition, your Board of Health's commitment to annual examination of public health needs, and evaluation of program effectiveness and efficiency, should assist you in developing and providing quality services for all the residents of your jurisdiction.

The department approves the Intergovernmental Agreement. The Boards of Commissioners of all three counties are to be commended for formalizing the Branch - Hillsdale - St. Joseph Community Health Agency's organization in this document.

Cordially,

James K. Haveman
Director

Thanks - glad to support your efforts!

Cc: Mike Gadola, Legal Counsel, Office of the Governor
Steve Todd, Health Officer, Branch - Hillsdale - St. Joseph Health Agency
Assistant Attorney General Iris Lopez
Assistant Attorney General Bill Morris



STATE OF MICHIGAN
EXECUTIVE OFFICE
LANSING

RICK SNYDER
GOVERNOR

BRIAN CALLEY
LT. GOVERNOR

April 29, 2013

Mr. Brad Benzing
Hillsdale County Commissioner and
Board of Health, Chairman
570 N. Marshall Road
Coldwater, MI 49036

Re: Urban Cooperation Act Agreement for the Operation of the Branch, Hillsdale and
St. Joseph Community Health Agency

Dear Mr. Benzing:

I am responding to the request for approval of the proposed Urban Cooperation Act Agreement between Branch, Hillsdale and St. Joseph Counties. The agreement was dated on December 13, 2012, between the parties, and the Director of the Department of Community Health approved it April 2, 2013. Based on the review from the Attorney General's Office, I am notifying you that I approve the proposed Urban Cooperation Act Agreement pursuant to the Urban Cooperation Act, 1967 (Ex Sess) PA 7, MCL 124.501 *et seq.*, and the Public Health Code, 1978 PA 368, MCL 333.1101 *et seq.*

Sincerely,

Rick Snyder
Governor

c: James K. Haveman, Director, DCH
Attorney General's Office, State Operations Division

Dep: -1 Attorney General

APR 30 2013

State of Michigan
Attorney General's Office
Operations Division
RECEIVED

MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY COVERAGE OVERVIEW

Member:	Branch-Hillsdale-St. Joseph CHA	Member No: M0001101
Date of Original Membership:	September 24, 1985	
Overview Effective Dates:	October 01, 2022 To October 01, 2023	
Member Representative:	Theresa Fisher	Telephone #: (517) 933-3051
Regional Risk Manager:	Lighthouse Group, an Alera Group Agency, LLC	Telephone #: (616) 698-7373

A. Introduction

The Michigan Municipal Risk Management Authority (hereinafter "MMRMA") is created by authority granted by the laws of the State of Michigan to provide risk financing and risk management services to eligible Michigan local governments. MMRMA is a separate legal and administrative entity as permitted by Michigan laws. **Branch-Hillsdale-St. Joseph CHA** (hereinafter "Member") is eligible to be a Member of MMRMA. **Branch-Hillsdale-St. Joseph CHA** agrees to be a Member of MMRMA and to avail itself of the benefits of membership.

Branch-Hillsdale-St. Joseph CHA is aware of and agrees that it will be bound by all of the provisions of the Joint Powers Agreement, Coverage Documents, MMRMA rules, regulations, and administrative procedures.

This Coverage Overview summarizes certain obligations of MMRMA and the Member. Except for specific coverage limits, attached addenda, and the Member's Self Insured Retention (SIR) and deductibles contained in this Coverage Overview, the provisions of the Joint Powers Agreement, Coverage Documents, reinsurance agreements, MMRMA rules, regulations, and administrative procedures shall prevail in any dispute. The Member agrees that any dispute between the Member and MMRMA will be resolved in the manner stated in the Joint Powers Agreement and MMRMA rules.

B. Member Obligation - Deductibles and Self Insured Retentions

Branch-Hillsdale-St. Joseph CHA is responsible to pay all costs, including damages, indemnification, and allocated loss adjustment expenses for each occurrence that is within the Member's Self Insured Retention (hereinafter the "SIR"). **Branch-Hillsdale-St. Joseph CHA's** SIR and deductibles are as follows:

Table I
Member Deductibles and Self Insured Retentions

COVERAGE	DEDUCTIBLE	SELF INSURED RETENTION
Liability	N/A	State Pool Member
Vehicle Physical Damage	\$250 Per Vehicle	State Pool Member
Fire/EMS Replacement Cost	N/A	N/A
Property and Crime	\$1,000 Per Occurrence	N/A
Sewage System Overflow	N/A	N/A

The member must satisfy all deductibles before any payments are made from the Member's SIR or by MMRMA.

The **Branch-Hillsdale-St. Joseph CHA** is afforded all coverages provided by MMRMA, except as listed below:

1. Sewage System Overflow
2. Specialized Emergency Response Expense Recovery Coverage
- 3.
- 4.

All costs including damages and allocated loss adjustment expenses are on an occurrence basis and must be paid first from the Member's SIR. The Member's SIR and deductibles must be satisfied fully before MMRMA will be responsible for any payments. The most MMRMA will pay is the difference between the Member's SIR and the Limits of Coverage stated in the Coverage Overview.

Branch-Hillsdale-St. Joseph CHA agrees to maintain the Required Minimum Balance as defined in the Member Financial Responsibilities section of the MMRMA Governance Manual. The Member agrees to abide by all MMRMA rules, regulations, and administrative procedures pertaining to the Member's SIR.

C. MMRMA Obligations - Payments and Limits of Coverage

After the Member's SIR and deductibles have been satisfied, MMRMA will be responsible for paying all remaining costs, including damages, indemnification, and allocated loss adjustment expenses to the Limits of Coverage stated in Table II. The Limits of Coverage include the Member's SIR payments.

The most MMRMA will pay, under any circumstances, which includes payments from the Member's SIR, per occurrence, is shown in the Limits of Coverage column in Table II. The Limits of Coverage includes allocated loss adjustment expenses.

Table II
Limits of Coverage

Liability and Motor Vehicle Physical Damage	Limits of Coverage Per Occurrence		Annual Aggregate	
	Member	All Members	Member	All Members
1 Liability	10,000,000	N/A	N/A	N/A
2 Judicial Tenure	N/A	N/A	N/A	N/A
3 Sewage System Overflows	0	N/A	0	N/A
4 Volunteer Medical Payments	25,000	N/A	N/A	N/A
5 First Aid	2,000	N/A	N/A	N/A
6 Vehicle Physical Damage	1,500,000	N/A	N/A	N/A
7 Uninsured/Underinsured Motorist Coverage (per person)	100,000	N/A	N/A	N/A
Uninsured/Underinsured Motorist Coverage (per occurrence)	250,000	N/A	N/A	N/A
8 Michigan No-Fault	Per Statute	N/A	N/A	N/A
9 Terrorism	5,000,000	N/A	N/A	5,000,000

Property and Crime	Limits of Coverage Per Occurrence		Annual Aggregate	
	Member	All Members	Member	All Members
1 Buildings and Personal Property	7,385,205	350,000,000	N/A	N/A
2 Personal Property in Transit	2,000,000	N/A	N/A	N/A
3 Unreported Property	5,000,000	N/A	N/A	N/A
4 Member's Newly Acquired or Constructed Property	10,000,000	N/A	N/A	N/A
5 Fine Arts	2,000,000	N/A	N/A	N/A
6 Debris Removal (25% of Insured direct loss plus)	25,000	N/A	N/A	N/A
7 Money and Securities	1,000,000	N/A	N/A	N/A
8 Accounts Receivable	2,000,000	N/A	N/A	N/A
9 Fire Protection Vehicles, Emergency Vehicles, and Mobile Equipment (Per Unit)	5,000,000	10,000,000	N/A	N/A
10 Fire and Emergency Vehicle Rental (12 week limit)	2,000 per week	N/A	N/A	N/A
11 Structures Other Than a Building	15,000,000	N/A	N/A	N/A
12 Dam/Dam Structures/Lake Level Controls	0	N/A	N/A	N/A
13 Transformers	0	N/A	N/A	N/A
14 Storm or Sanitary Sewer Back-Up	1,000,000	N/A	N/A	N/A
15 Marine Property	1,000,000	N/A	N/A	N/A
16 Other Covered Property	10,000	N/A	N/A	N/A
17 Income and Extra Expense	5,000,000	N/A	N/A	N/A
18 Blanket Employee Fidelity	1,000,000	N/A	N/A	N/A
19 Faithful Performance	Per Statute	N/A	N/A	N/A
20 Earthquake	5,000,000	N/A	5,000,000	100,000,000
21 Flood	5,000,000	N/A	5,000,000	100,000,000
22 Terrorism	50,000,000	50,000,000	N/A	N/A

Table III

Network and Information Security Liability, Media Injury Liability, Network Security Loss, Breach Mitigation Expense, PCI Assessments, Social Engineering Loss, Reward Coverage, Telecommunications Fraud Reimbursement.				
	Limits of Coverage Per Occurrence/Claim	Deductible Per Occurrence/Claim		Retroactive Date
	\$2,000,000			
Coverage A Network and Information Security Liability: Regulatory Fines:	Each Claim Included in limit above Each Claim Included in limit above	\$25,000	Each Claim	7/1/2013
Coverage B Media Injury Liability	Each Claim Included in limit above	\$25,000	Each Claim	7/1/2013
Coverage C Network Security Loss Network Security Business Interruption Loss:	Each Unauthorized Access Included in limit above Each Business Interruption Loss Included in limit above	\$25,000	Each Unauthorized Access Retention Period of 72 hours of Business Interruption Loss	Occurrence
Coverage D Breach Mitigation Expense:	Each Unintentional Data Compromise Included in limit above	\$25,000	Each Unintentional Data Compromise	Occurrence
Coverage E PCI Assessments:	Each Payment Card Breach \$1,000,000 Occ./\$1,000,000 Agg. Included in limit above	\$25,000	Each Payment Card Breach	Occurrence
Coverage F Social Engineering Loss:	Each Social Engineering Incident \$100,000 Occ./\$100,000 Agg. Included in limit above	\$25,000	Each Social Engineering Incident	Occurrence
Coverage G Reward Coverage	Maximum of 50% of the Covered Claim or Loss; up to \$25,000 Included in Limit above		Not Applicable	Occurrence
Coverage H Telecommunications Fraud Reimbursement	\$25,000 Included in limit above		Not Applicable	Occurrence

Annual Aggregate Limit of Liability

Member Aggregate	All Members Aggregate
\$2,000,000	\$17,500,000

The total liability of MMRMA shall not exceed \$2,000,000 per Member Aggregate Limit of Liability for coverages A, B, C, D, E, F, G, and H, in any Coverage Period.

The total Liability of MMRMA and MCCRMA shall not exceed \$17,500,000 for All Members Combined Aggregate Limit of Liability for coverages A, B, C, D, E, F, G, and H, in any Coverage Period.

It is the intent of MMRMA that the coverage afforded under the Subjects of Coverage be mutually exclusive. If however, it is determined that more than one Subject of Coverage applies to one coverage event ensuing from a common nexus of fact, circumstance, situation, event, transaction, or cause, then the largest of the applicable Deductibles for the Subjects of Coverage will apply.

Table IV
Specialized Emergency Response Expense Recovery Coverage
Limits of Coverage

Specialized Emergency Response Expense Recovery	Limits of Coverage per Occurrence		Annual Aggregate	
	Member	All Members	Member	All Members
	N/A	N/A	N/A	N/A

Table V
Specialized Emergency Response Expense Recovery Coverage
Deductibles

Specialized Emergency Response Expense Recovery	Deductible per Occurrence
	Member
	N/A

D. Contribution for MMRMA Participation

Branch-Hillsdale-St. Joseph CHA

Period: October 01, 2022 To October 01, 2023

Coverages per Member Coverage Overview: \$41,349

TOTAL ANNUAL CONTRIBUTIONS: \$41,349

E. List of Addenda

- 1. Manuscript Addendum w/o signature

MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

Notice: MMRMA's Data Breach and Privacy Liability Coverage Document wording, effective 7/1/22, is currently under review and is subject to change. A copy of the final approved updated Data Breach and Privacy Liability Coverage Document will be available prior to 7/1/2022 for your review.

MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

Branch-Hillsdale-St. Joseph CHA
POLICY NUMBER M0001101
SUMMARY OF MOTOR VEHICLE TYPES
EFFECTIVE 10/1/2022 - 10/1/2023

<u>Type of Vehicle</u>	<u>Liability Coverage Renewal Exposure</u>		<u>ACV</u>	<u>Physical Damage Coverage Renewal Exposure Data</u>			<u>Total</u>
	<u>Units</u>	<u>Contribution</u>		<u>Replacement</u>	<u>Agreed</u>	<u>Contribution</u>	
All Other Vehicles	1	1,232	97,500	0	0	265	1,497
Buses	0	0	0	0	0	0	0
Commercial - Historical	0	0	0	0	0	0	0
EMS/Ambulance	0	0	0	0	0	0	0
Fire Vehicles - Large	0	0	0	0	0	0	0
Fire Vehicles - Other	0	0	0	0	0	0	0
Garbage Trucks	0	0	0	0	0	0	0
Motorcycles	0	0	0	0	0	0	0
Motorcycles - Historical	0	0	0	0	0	0	0
Police - All Other	0	0	0	0	0	0	0
Police PPT	0	0	0	0	0	0	0
Private Passenger	0	0	0	0	0	0	0
Private Passenger - Historical	0	0	0	0	0	0	0
Service Trucks	0	0	0	0	0	0	0
Vans	0	0	0	0	0	0	0
Totals	1	1,232	97,500	0	0	265	1,497

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MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

**Branch-Hillsdale-St. Joseph CHA
POLICY NUMBER M0001101
SUMMARY
EFFECTIVE 10/1/2022 - 10/1/2023**

<u>Coverage</u>	<u>Expiring Annual Exposure</u>	<u>Annual Exposure</u>	<u>Limits of Liability</u>	<u>SIR/ Deductible</u>	<u>Expiring Contribution</u>	<u>Contribution</u>
Automobile Liability	1 Total Vehicles	1 Total Vehicles	10,000,000	50,000	1,174	1,232
Automobile Physical Damage	\$150,000 ACV	\$97,500 ACV		15,000	326	265
Fire/EMS Replacement Cost	\$0 Replacement Cost	\$0 Replacement Cost		N/A	0	0
General Liability	14,982 Outpatients	17,201 Outpatients	10,000,000	50,000	13,437	15,504
Law Enforcement Liability	N/A	N/A	N/A	N/A	0	0
Public Officials' Liability	14,982 Outpatients	17,201 Outpatients	10,000,000	50,000	6,574	7,739
Property	\$6,028,609	\$6,385,205		1,000	8,716	9,109
Data Breach and Privacy Liability			2,000,000	25,000 See Table IV	0	0
Specialized Emergency Response Expense Recovery Coverage	N/A	N/A	N/A	N/A	0	0
Sewers	N/A	N/A	N/A	N/A	0	0
Subtotal					30,227	33,849
MCCA Assessment	1 Total Vehicles	1 Total Vehicles			0	86
MCCA Assessment Discount					0	-86
Total					30,227	33,849
Stop Loss Charge	\$0 Stop Loss entry point	\$0 Stop Loss entry point			0	0
Total Contribution without Retention Fund Allocation					30,227	33,849
Retention Fund Allocation					7,500	7,500
Total Contribution including Retention Fund Allocation					37,727	41,349

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MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

Member: Branch-Hillsdale-St. Joseph CHA
POLICY NUMBER M0001101
POLICY PROPERTY LIST REPORT
EFFECTIVE DATES 10/1/2022 To 10/1/2023

Location Address		Location Description		
1.	20 Care Drive, Hillsdale, MI 49242	Hillsdale Health Office		
	Building Description	Building Value	Contents Value	Total Value
	Hillsdale Health Office	\$3,088,391	\$294,664	\$3,383,055
	Location Totals	\$3,088,391	\$294,664	\$3,383,055

Location Address		Location Description		
2.	1110 Hill St, Three Rivers, MI 49093	Three Rivers Health Office		
	Building Description	Building Value	Contents Value	Total Value
	Three Rivers Health Office	\$1,979,533	\$313,952	\$2,293,485
	Location Totals	\$1,979,533	\$313,952	\$2,293,485

Location Address		Location Description		
3.	570 Marshall, Coldwater, MI 49036	570 Marshall		
	Building Description	Building Value	Contents Value	Total Value
	570 Marshall	\$0	\$509,172	\$509,172
	Location Totals	\$0	\$509,172	\$509,172

Location Address		Location Description		
4.	1555 E. Chicago Rd, Sturgis, MI 49091--	1555 E. Chicago Rd		
	Building Description	Building Value	Contents Value	Total Value
	1555 E. Chicago Rd	\$0	\$199,493	\$199,493
	Location Totals	\$0	\$199,493	\$199,493

Grand Totals		
Building Value	Contents Value	Total Value
\$5,067,924	\$1,317,281	\$6,385,205

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MICHIGAN MUNICIPAL RISK MANAGEMENT AUTHORITY

**POLICY NUMBER Q000013705
POLICY AUTO SCHEDULE REPORT
EFFECTIVE DATES 10/1/2022 To 10/1/2023**

Scheduled Vehicles

Year	Make	Model	VIN	License Plate	Type	Department
2019	Ford	E350	1FDWE3F63KDC63003	119x928	All Other Vehicles	Health/CMH/MCF

Summary

Vehicle Group	Vehicles
All Other Vehicles	1 Vehicles
Buses	0 Vehicles
Commercial - Historical	0 Vehicles
EMS/Ambulance	0 Vehicles
Fire Vehicles Large	0 Vehicles
Fire Vehicles - Other	0 Vehicles
Garbage Trucks	0 Vehicles
Motorcycles	0 Vehicles
Motorcycles - Historical	0 Vehicles
Police - All Other	0 Vehicles
Police PPT	0 Vehicles
Private Passenger	0 Vehicles
Private Passenger - Historical	0 Vehicles
Service Trucks	0 Vehicles
Vans	0 Vehicles

Grand Totals

Vehicles
1 Vehicles

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SIGNATURE PAGE

This plan has been reviewed and revised as necessary and copies of the plan have been distributed as follows:

- Directors: Personal Health and Disease Prevention, Environmental Health, Administrative Services, Health Promotion and Education,
- Clinic Supervisor - Personal Health and Disease Prevention (Hillsdale)
- Clinic Supervisor - Personal Health and Disease Prevention (Coldwater)
- Clinic Supervisor - Personal Health and Disease Prevention (Three Rivers & Sturgis)

Signature, Personal Health and Disease Prevention Director

Date

Signature, Medical Director

Date

Annual Review Signatures: Changes will be noted specifically in memos to appropriate staff

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PURPOSE

The Branch-Hillsdale-St. Joseph Community Health Agency is committed to providing a safe and healthy work environment for our entire staff. In pursuit of this endeavor, the following Exposure Control Plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with MIOSHA Part 554 Bloodborne Infectious Diseases.

The ECP is a key document to assist our agency in implementing and ensuring compliance with the standard, thereby protecting our employees. The ECP includes:

- Determination of employee exposure;
- Implementation of various methods of exposure control, including:
 - Universal Precautions;
 - Engineering and work practice controls;
 - Standard operating procedures;
 - Personal Protective Equipment; and,
 - Housekeeping;
- Hepatitis B vaccination;
- Post-exposure evaluation and follow-up;
- Communication of hazards to employees and training;
- Recordkeeping; and,
- Procedures for evaluating circumstances surrounding an exposure incident.

The methods of implementation of these elements of the standard are discussed in the subsequent pages of this ECP.

ACRONYM DEFINITION LIST

Below is a list of acronyms used in the Exposure Control Plan.

<u>Acronym</u>	<u>Definition</u>
ECP	Exposure Control Plan
OSHA	Occupational Health and Safety Administration
MIOSHA	Michigan Occupational Health & Safety Administration
NIOSH	National Institute of Occupational Safety & Health
OPIM	Other Potentially Infectious Material
PPE	Personal Protective Equipment
LBS	Locally Based Services
CSHCS	Children Special Health Care Services
AAA	Area Agency on Aging
CDC	Centers for Disease Control
CHA	Community Health Agency
EPA	Environmental Health Agency
HIV	Human Immunodeficiency Virus
HBV	Hepatitis B Virus

PROGRAM ADMINISTRATION

- The Personal Health and Disease Prevention Director, Medical Director, and the Administrative Services Director are responsible for the implementation of the Exposure Control Plan (ECP).
- The Personal Health and Disease Prevention Director is responsible for developing, reviewing, maintaining, and updating the ECP at least annually, and whenever necessary to include new or modified tasks and procedures.

Contact location/phone number:

Coldwater Office, 570 Marshall Rd., Coldwater, MI 49036 (517) 279-9561 ext. 143

- Those employees who are determined, by their job description, to have possible occupational exposure to blood or other potentially infectious material (OPIM) must comply with the procedures and work practices outlined in this ECP. They are labeled as Category A employees.
- The Clinic Supervisors will maintain and provide all necessary personal protective equipment (PPE), engineering controls (e.g. sharps containers), labels and red bags as required by the standard. The Clinic Supervisors will also ensure that adequate supplies of the aforementioned equipment are available in the appropriate sizes for all Category A employees.

Contact location/phone number: Coldwater Office
570 Marshall
Coldwater, MI 49036
(517) 279-9561 ext. 105

Hillsdale Office
20 Care Drive
Hillsdale, MI 49242
(517) 437-7395 ext. 307

Three Rivers Office/Sturgis
1110 Hill Street
Three Rivers, MI 49093
(269) 273-2161 ext. 241

- In the event that an exposure occurs the exposed employee is responsible for reporting immediately the incident to the appropriate contact person – immediate supervisor (see section entitled, “Post-Exposure Evaluation and Follow-Up”). **All available contacts will be listed in the ECP and will be posted in each clinic reception area.** The contact person is responsible for ensuring that all medical actions required are performed and that appropriate incident reporting forms (Appendix B) are completed. All necessary documentation should be forwarded by that contact person to the Administrative Services

Director for filing.

- **Personal Health and Disease Prevention Director and Clinic Supervisors** will be responsible for training, providing documentation of training to the Administrative Services Director, (HR) Human Resources, and making the written ECP available to employees, MIOSHA, and NIOSH representatives.
- All employees will have an opportunity to review this plan at any time during their work schedule. A copy of the plan will be made available free of charge and within 5 days of the request. Employees should contact their direct supervisor or Personal Health and Disease Prevention Director for a copy of the plan.

Contact location/phone number: Administrative Services Director
Branch County Office
570 Marshall Rd
Coldwater, MI 49036
517-279-9561 ext. 107

- The Division Director or the Clinic Supervisor is responsible for notifying the Personal Health and Disease Prevention Director or the Administrative Services Director of new employees that need to receive the bloodborne pathogen training *before* they begin employment. This will also be posted in the new employee orientation packet.
- Category A employees will receive an explanation of this ECP by their Supervisor/Director during their initial training session, which will occur at the time of initial assignment. The ECP will also be reviewed in an annual refresher training, which will be mandatory for all Category A employees. A reference copy of the plan will be available at each reception/mail room area in all of the four office locations.

Contact location/phone number:

Coldwater Office: 570 Marshall Road, Coldwater, MI 49036 (517) 279-9561
Hillsdale Office: 20 Care Drive, Hilldale, MI 49242 (517) 437-7395
Three Rivers Office: 1110 Hill Street, Three Rivers, MI 49093 (269) 273-2161
Sturgis Office: 1555 E. Chicago Road, Suite C, Sturgis, MI 49091 (269) 273-2161

EXPOSURE DETERMINATION

- A. The following list was created by *determining which employees may incur occupational exposure to blood or other potentially infectious materials*. The exposure determination is made without regard to the use of personal protective equipment (i.e. employees are considered to be exposed even if they wear personal protective equipment.) This exposure determination is required to list all job classifications in which all employees may be expected to incur such occupational exposure, regardless of frequency. At this facility the following job classifications are in this category (**Category A employees**):

JOB TITLE**DEPARTMENT**

CSHCS/H&V Supervisor	Personal Health & Disease Prevention
Clinic Supervisor	Personal Health & Disease Prevention
Clinic Administrative Assistants	Personal Health & Disease Prevention
Clinic Registered Nurse	Personal Health & Disease Prevention
Clinic Clerk Technician	Personal Health & Disease Prevention
Clinic Clerk Interpreter	Personal Health & Disease Prevention
Immunization Clerk Technician	Personal Health & Disease Prevention
Emergency Preparedness Coordinator	Personal Health & Disease Prevention
COVID-19 Coordinator	Personal Health & Disease Prevention
Care Management Nurse	Area Agency on Aging

See *Appendix A* for a list of tasks and procedures, or groups of closely related tasks and procedures, in which occupational exposure may occur for the individuals with possible occupational exposure (Category A employees).

- B. As part of the exposure determination section of our ECP, the following is a list of all job classifications at the agency in which employees *do not have* significant risk of occupational exposure (Category B employees):

JOB TITLE**DEPARTMENT**

Health Officer	Administrative Services
Administrative Services Director	Administrative Services
Accountant	Administrative Services
Fiscal Support Specialist	Administrative Services
Administrative Support Clerk	Administrative Services
IT Network Manager	Administrative Services
Environmental Health Director	Environmental Health Services
Sanitarian	Environmental Health Services
Senior Sanitarian	Environmental Health Services
EH Supervisor	Environmental Health Services
EH Administrative Assistant	Environmental Health Services
EH Assistant Clerk	Environmental Health Services
AAA Director	Area Agency on Aging
AAA Program Specialist	Area Agency on Aging
AAA Social WK Care Consultant	Area Agency on Aging
AAA Outreach Specialist	Area Agency on Aging
VOCA Elder Abuse Victim Specialist	Area Agency on Aging
Personal Health & Disease Prevention Director	Personal Health & Disease Prevention
Breastfeeding Peer Counselor	Personal Health and Disease Prevention
CSHCS LBS-Representative	Personal Health and Disease Prevention
Vision and Hearing Technician	Personal Health and Disease Prevention
Health Analyst Supervisor	Health Education & Promotion
Health Educator	Health Education & Promotion

METHODS OF EXPOSURE CONTROL

A. Compliance Methods

Standard Precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. (OPIM) All blood or OPIM will be considered infectious regardless of the perceived status of the source individual or container.

Engineering and work practice controls will be utilized to eliminate or minimize exposure to employees of this facility. Where occupational exposure remains after institution of these controls, personal protective equipment shall also be used. At this facility the following engineering controls will be utilized:

- Sharps containers on-site and in the field as needed.
- Biohazard waste bags
- Safety-Glide and Vanishing Point Syringes
- Genie Retractable Lancets

B. Quality Assurance is monitored by:

- **Sharps Injury Log** derived from incident reports for patient safety, education and corrective procedures - Appendix B.
- **Employee Input Document** to be available at any time by employees for reporting unsafe conditions or monitoring effectiveness of new engineering controls or changes. Implemented through memo to staff, issues discussed and documented in Clinic Supervisor meetings or Administrative meetings. Documentation maintained in Clinic staff meeting minutes.
- **Personal Health and Disease Prevention Staff** will be expected to review the placement and use of engineering controls annually in addition to traditional updates. Documented in Clinic Staff meeting minutes.

C. Handwashing

Handwashing facilities are also available to the employees who incur exposure to blood or other potentially infectious materials. OSHA requires that these facilities be readily accessible after incurring exposure. At each office, handwashing facilities are located in the clinic, public and employee restrooms, and break rooms. If handwashing facilities are not feasible, the Community Health Agency will provide either an antiseptic cleanser in conjunction with a clean cloth/paper towel or antiseptic towelettes. If these alternatives are used then the hands are to be washed with soap and running water as soon as feasible.

Refer to CDC Standard Precautions – Section A: Handwashing

Refer to CHA Handwashing Information Sheet – Infection Control Manual
Exposure Control Plan (ECP)

D. Eyewash Emergency Stations (MIOSHA Rule 4401 [3] and Rule 3220 [9][d])

Where the eyes or body of any person may be exposed to injurious or corrosive materials, suitable facilities for quick drenching or flushing must be provided in the work area for immediate emergency use.

Corrosive materials are normally considered to be caustic compounds if they have a pH of 9.0 or greater, or acidic compounds if they have a pH of 4.0 or less in solution. The pH of a chemical usually can be obtained from the Safety Data Sheet. Eyewash availability must meet the specifications of the American National Standard for Emergency Eyewash and Shower Equipment (ANSI Z 358.1-1990).

Self-contained eyewash equipment or portable units must be capable of delivering to the eyes not less than 0.4 gallons (1.5 liters) per minute for 15 minutes (minimum total volume of six gallons or 22.7 liters). The eyewash stations must be placed within 25 feet of hazardous operation. It must be clearly marked, well lit, and easily reached.

Training will be provided by Clinic Supervisors and/or Health Education & Promotion Staff in the use of the appropriate PPE for the tasks or procedures employees will perform.

E. PPE Accessibility

- Clinic Supervisors from Personal Health and Disease Prevention shall ensure that appropriate PPE in the appropriate sizes are readily accessible for all Category A employees.

The following protective equipment will be provided to employees:

1. Latex gloves/non-latex gloves
2. Disposable aprons OR GOWNS
3. Protective eyewear (with solid side shield)
4. One-way resuscitation devices (in emergency kits)
5. Protective face mask (NP-95)
6. Hypoallergenic gloves, glove liners, powderless gloves, or other similar alternatives for employees who are allergic to the gloves normally provided.

Locations:

Branch Office: Lab room in Clinic

Hillsdale Office: Lab Room

Three Rivers Office: Lab Room in Clinic

Sturgis Office: Lab Room

All employees using PPE must observe the following precautions:

- Wash hands immediately or as soon as feasible after removal of gloves or another PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in regular trash, unless grossly contaminated. If grossly contaminated, it should then be placed in a biohazard bag. Refer to Section E: Regulated Waste Disposal
- Wear appropriate gloves when it can be reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace glove if torn, punctured, contaminated or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash decontaminated disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.

Gloves

Specifically, gloves must be used for the following procedures: immunizations, pelvic exams, laboratory testing and any addition project blood testing that might be implemented.

Rings must be removed prior to the use of gloves to prevent puncturing, tearing or compromising the effectiveness of the glove.

Additional Protection

Additional protective clothing (such as lab coats, gowns, aprons, clinic jackets, or similar outer garments) shall be worn in instances when gross contamination can reasonably be anticipated.

F. Work Area Restrictions (MIOSHA RULES: 325.100007)

In work areas where there is a reasonable likelihood of exposure to blood or other potentially infectious materials, employees are not to eat, drink, apply cosmetics or lip balm, smoke, or handle contact lenses. Food and beverages are not to be kept in refrigerators, freezers, shelves, cabinets, or on counter tops or bench tops where blood or other potentially infectious materials are present.

Mouth pipetting/suctioning of blood or other potentially infectious materials is prohibited.

All procedures will be conducted in a manner that will minimize splashing, spraying, splattering, and generation of droplets of blood or other potentially infectious materials.

G. Specimens

Specimens of blood or other potentially infectious materials will be placed in a container that prevents leakage during the collection, handling, processing, storage, and transport of the specimens.

The container used for this purpose will be labeled or color-coded in accordance with the requirements of the OSHA standard.

Any specimens that could puncture a primary container will be placed within a secondary container that is puncture resistant.

If outside contamination of the primary container occurs, the primary container shall be placed within a secondary container that prevents leakage during the handling, processing, storage, transport, or shipping of the specimen.

HOUSEKEEPING

A. Cleaning Procedures

The Branch-Hillsdale-St. Joseph Community Health Agency will assure that the worksite is maintained in a clean and sanitary condition. Each Clinic Supervisor in Personal Health and Disease Prevention will be responsible for the implementation of the housekeeping requirements at their respective sites. The clinic employees will be responsible for inspecting patient care areas at the close of each business day to ensure that no blood or OPIM contaminants are present. All contaminated work surfaces will be decontaminated after the completion of procedures and immediately or as soon as feasible after any spill of blood or other potentially infectious materials, as well as at the end of the work shift if the surface may have become contaminated since the last cleaning.

All bins, pails, cans and similar receptacles are cleaned and decontaminated as soon as feasible after visible contamination and decontaminated according to the policy and procedure guidelines posted in each clinic.

Broken glassware, which may be contaminated, should not be picked up with the hands. It must be soaked with disinfectant and then cleaned up using mechanical means, such as a brush and dust pan, tongs or forceps.

B. Blood or OPIM Spills

Only Category A employees are responsible for cleaning up blood or OPIM spills.

A “Bloodborne Pathogen Clean-up Supply Kit” is available for use at all office locations. They are easily accessible, clearly labeled and examined on a regular basis

to ensure all materials are available for clean-up. A checklist is located on each supply kit. ***It is the responsibility of each person who uses the kit to replace any items that have been used. The Clinic Supervisor in each office may be contacted for location of these items.*** The clean-up kits available at the following locations:

Coldwater: Exam Room 1
Hillsdale: Clinic Coat closet
Three Rivers: Coat closet

Appropriate gloves, gowns and masks should be worn if necessary, to protect clothing and employee during cleaning and decontamination procedures.

The CHA uses the following EPA approved disinfectants to properly clean up blood or OPIM spills on ***non-porous surfaces*** when used according to the manufacturer's instructions, located on product labels.

- Germicidal wipe
- Citrace Deodorant Spray

A freshly prepared Chlorine Bleach solution (within the last 24 hours) may also be used for clean up when used according the manufacturer's instructions. The following guidelines must be used:

- 2.5 cups of bleach added to a gallon of water (1/10)
- Contact time for bleach is generally considered to be the time it takes to "air dry".

Porous Surfaces (i.e. carpeting) – OSHA does not have any evidence to support whether decontamination of plush carpets is possible; it is our opinion that carpeted surfaces cannot be routinely decontaminated.

C. Contaminated Equipment

Employees in each work area (Personal Health and Disease Prevention, Environmental Health, etc.) are responsible for ensuring that equipment which has become contaminated with blood or other potentially infectious materials shall be examined prior to servicing or shipping and shall be decontaminated as necessary, unless decontamination of the equipment is not feasible.

Refer to CHA Decontamination Procedures – Exposure Control Manual

D. Laundry Procedures

Most items utilized are disposable. Any items that might need professional cleaning will be referred to Administrative Services Director.

The following laundering requirements must be met:

- Handle contaminated clothing as little as possible, with minimal agitation.

- **If contamination has occurred, the contaminated area should be initially treated at the time with 10 percent bleach to prevent transfer of potential pathogens and then sent to be laundered.**
- Handle wet contaminated laundry in leak-proof, labeled or color-coded containers before transport. Use red biohazard bags for this purpose.
- Gloves must be worn when handling and/or sorting contaminated laundry. Other items include gown and goggles, if gross contamination present.
- Laundry services will pick up the soiled lab coats for cleaning. Employees will not be responsible for this cost.

E. Protective Coverings

Disposable table coverings used for the infant table(s) shall be changed between each client. If disposable table covering is soiled with blood or OPIM, place it into a biohazard waste bag and use appropriate cleaner, wipe, or a 1:10 solution of bleach and water to disinfect the table top.

Centrifuge covers shall be kept on while not in use. The lid and outside of the machine can be disinfected by using a Sani-wipe. The centrifuge machine will be sent off-site for internal decontamination. Package machine in a puncture proof leak-proof box labeled as biohazard waste and make arrangements for transporting to the appropriate agency for cleaning.

Scale covers shall be changed between clients. If scale covering is soiled with blood or OPIM, use a Sani-wipe cleaner or a 1:10 solution of chlorine bleach and water.

F. Regulated Waste Disposal

Regulated waste is placed in containers which are closable, constructed to contain all contents and prevent leakage, appropriately labeled or color-coded (see Labels) and closed prior to removal to prevent spillage or protrusion of contents during handling. Hazardous material handling for disposal is reviewed at intervals with the contracted vendor.

Biohazard Waste

Biohazard waste is defined as:

- Liquid or semi-liquid blood or other potentially infectious materials
- Contaminated items that would release blood or other potentially infectious material in a liquid or semi-liquid state if compressed
- Items which are caked with dried blood or other OPIM material and which are capable of releasing these materials during handling
- Contaminated sharps
- Pathological and microbiological waste that contains blood or other potentially infectious material.
- Place all bagged and labeled biohazard waste in BFI biohazard waste containment receptacle located in the clinic storage area of each office.

Branch Office: Clinic Storage Room

Hillsdale Office: Clinic Storage Room
St. Joseph Office: Clinic Storage Room

- All employees participating in off-site biohazard waste producing activities will dispose of biohazard waste at the home office following the same guidelines as stated above.

G. Disposal of Sharps

Contaminated sharps are discarded immediately or as soon as feasible in containers that are closable, puncture resistant, leak-proof on sides and bottom and labeled or color-coded appropriately.

During use, containers for contaminated sharps shall be easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found.

The containers shall be maintained upright throughout their use and replaced routinely. Sharps containers in each clinic will be replaced by clinic staff at least every 90 days or whenever necessary to prevent overfilling.

When moving containers of contaminated sharps from the area of use, the containers shall be closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport or shipping.

The container shall be placed in a secondary container if leakage of the primary container is possible. The second container shall be closable, constructed to contain all contents and prevent leakage during handling, storage and transport or shipping. The second container shall be labeled or color-coded to identify its contents.

Sharps containers to be disposed of will be placed in the biohazard waste box located in the clinic storeroom in each office location.

Sharps Containers will be located:

- in clinic storage areas
- in exam/clinic rooms
- with the Nurse in his/her vehicle for off-site visits
- with the necessary equipment for potential biohazard waste producing activities (immunization clinics, HIV testing, etc.) occurring off-site.

At no time will anyone leave any sharps in the pockets of lab coats.

Needles

Contaminated needles and other contaminated sharps will not be bent, recapped, removed, sheared or purposely broken. OSHA allows an exception to this if the procedure would require that the contaminated needle be recapped or removed and no alternative is feasible and the action is required by the medical procedure. If such

action is required then the recapping or removal of the needle must be done by the use of a mechanical device or a one-handed technique. Contaminated needles and other contaminated sharps must be disposed of in a sharps container.

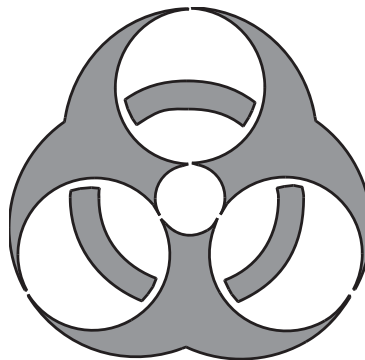
H. Labels and Signs

The following labeling method is used in this facility:

<u>Equipment to be labeled</u> (e.g. specimens, contaminated laundry, etc.)	<u>Label type</u> (size, color, etc.) (red bag, biohazard label, etc.)
Lab Chemicals	Biohazard Label/Chemical Hazard Label
Refrigerators/Freezers	Biohazard Label
Contaminated Laundry	Biohazard Bag
Contaminated Sharps	Biohazard Sharps Container

Each department of the Community Health Agency will ensure warning labels are affixed or red bags are used as required if regulated waste or contaminated equipment is brought into the facility. Employees are to notify the Clinic Supervisor or the Division Director if they discover regulated waste containers, refrigerators containing blood or OPIM, contaminated equipment, etc. without proper labels.

The universal biohazard symbol shall be used. The label shall be fluorescent orange or orange-red.



BIOHAZARD

[Name of infectious agent]

[Special requirements for entering the area]

[Name and telephone number of the lab director or other responsible person]

Labels shall either be an integral part of the container or shall be affixed as close as safely possible to the container by string, wire, or adhesive or by another method that prevents the loss of labels or the unintentional removal of labels.

Labels required for contaminated equipment shall describe which portions of the equipment remain contaminated.

Red bags or containers may be substituted for labels. However, regulated wastes must be handled in accordance with the rules and regulations of the organization having jurisdiction.

Blood products that have been released for transfusion or other clinical use are exempted from these labeling requirements.

HEPATITIS B VACCINATION

A. Administration

The Branch-Hillsdale-St. Joseph Community Health Agency shall make available the Hepatitis B vaccine and vaccination series to all Category A employees.

The hepatitis B vaccination series is available at no cost after training and within 10 days of initial assignment to employees identified exposure determination section of this plan. Vaccination is encouraged unless:

- Documentation exists that the employee has previously received the series.
- Antibody testing reveals that the employee is immune.
- A medical evaluation shows that the vaccination is contraindicated.

However, if an employee chooses to decline vaccination, the employee must sign a declination form. Employees who decline may request and obtain the vaccination at a later date at no cost. Documentation of refusal of the vaccination will be kept with the employee's other medical records, which will be maintained and filed by the Administrative Service Director.

Employees who receive the Hepatitis B vaccination series are to be tested for antibody to Hepatitis B surface antigen, one to two months after the completion of the three dose vaccination series. Employees who do not respond to the primary vaccination series must be revaccinated with second three dose series and retested, unless they are HbsAg positive (infected). Non-responders must be medically evaluated. Previously vaccinated employees who are directly exposed to blood or OPIM will also have a blood level titer drawn.

Vaccination will be provided by a Registered Nurse at this agency.

Following the medical evaluation, a copy of the health care professional's Written Opinion will be obtained and provided to the employee. It will be limited to whether the employee requires the hepatitis vaccine, and whether the vaccine was administered.

HEPATITIS B DECLINATION STATEMENT

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with the Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If, in the future, I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employees _____ Name _____ (please _____ print)

Employee _____ Signature _____

Social Security Number _____

Date _____

POST- EXPOSURE EVALUATION & FOLLOW-UP

A. Exposure Incident

An exposure incident is defined in the standard as “a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious material that results from the performance of an employee’s duties.”

Should an exposure incident occur, contact the appropriate person from the list:

Health Education & Promotion Staff:	Health Officer
Personal Health & Disease Prevention Staff:	Clinic Supervisor
Environmental Health Staff:	Environmental Health Director

An immediately available confidential medical evaluation and follow-up will be conducted by the local hospital.

Coldwater – Branch County Community Health Center
 Hillsdale – Hillsdale Hospital
 Sturgis – Sturgis Hospital
 Three Rivers – Three Rivers Hospital

Following the initial first aid (clean wound, flush eyes or other mucous membrane, etc.) the following activities will be performed:

- A. Document the routes of exposure and how the exposure occurred as soon as possible. (Appendix Exposure Incident Report Form) Completed forms maintained in the Administrative Services Director office.
- B. If a sharps injury occurs, a sharps injury log needs to be completed. Forms maintained in the Administrative Services Director office.
- C. Identify and document the source individual *unless the employer can establish that identification is not feasible or prohibited by state or local law.* (Exposure Incident Investigation Form)
- D. Obtain consent and make arrangements to have the source individual tested as soon as possible to determine HIV and HBV/HCV status; document that the source individual's test results were conveyed to the employee's health care provider (the local hospital ER physician and the primary care physician).
- E. If the source individual is already known to be HIV and/or HBV positive, new testing need not be performed.
- F. Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).
- G. After obtaining consent, collect exposed employee's blood as soon as feasible after exposure incident, and test blood for HBV/HCV and HIV serological status. If the employee does not give consent for HIV serological testing during collection of blood for baseline testing, preserve the baseline blood sample for at least 90 days; if the exposed employee elects to have the baseline sample tested during this waiting period, perform testing as soon as feasible.
- H. Follow the "Standard Protocol for Emergency Management and Medical Follow-up for Exposure to Blood or Body Fluids-BHSJ CHA"

B. Administration of Post Exposure Evaluation & Follow-up

The Administrative Services Director will ensure that health care professionals responsible for employee's hepatitis B vaccination and post-exposure evaluation/follow-up be given a copy of OSHA's bloodborne pathogens standard as well as CDC's "Updated U.S. Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis".

The Administrative Services Director will ensure that the health care professional evaluating an employee after an exposure incident receives the following:

- a description of the employee's job duties relevant to the exposure incident
- route(s) of exposure
- circumstances of exposure
- if possible, results of the source individual's blood test
- relevant employee medical records, including vaccination status

The Administrative Services Director will provide the employee with a copy of the evaluating health care professional's written opinion within 15 days after completion of the evaluation.

All other diagnoses must remain confidential and are not to be included in the written report to our agency.

C. Procedures for Evaluating the Circumstances Surrounding an Exposure Incident

Administrative Team and/or Communicable Disease Staff will review the circumstances of all exposure incidents to determine:

- Engineering controls in use at the time
- Work practices followed
- A description of the device being used (including type and brand)
- Protective equipment or clothing that was used at the time of the exposure incident
- Location of the incident
- Procedure being performed when the incident occurred
- Employee's training

Administrative Services Director will record all percutaneous injuries from contaminated sharps in the Sharps Injury Log.

If it is determined that ECP revisions need to be made, the director will consult with Administration and Personal Health and Disease Prevention Staff and ensure that appropriate changes are made to this ECP.

Documentation of this evaluation should accompany the exposure report and be maintained in the office of the Administrative Services Director.

DISCIPLINARY POLICY

This ECP is a method to provide a safe work environment for the employees of the Branch-Hillsdale-St. Joseph Community Health Agency and shall follow the disciplinary policy set by the agency. This policy can be found in the Personnel Policies Manual.

Let it be known that disciplinary action is taken from the circumstances surrounding the employee's actions and will not be enforced with every situation that occurs in the agency.

Group I Offense - The disciplinary procedure in this group shall be: first offense - written warning; second offense - one-day suspension without pay; third offense - three-day suspension without pay; fourth offense - seven-day suspension without pay; and fifth offense - discharge. The violations shall be cumulated for a period of not more than one year.

Examples of this offense are, but not limited to:

- incorrect use of PPE

- incorrect cleaning procedure
- eating, smoking, applying make-up where possible contamination may occur

Group II Offense - The disciplinary procedure in this group shall be: first offense - three-day suspension without pay; second offense - seven days suspension without pay; third offense - discharge. The violations shall be cumulated for a period of not more than two years.

Examples of this offense are, but not limited to:

- falsifying schedules, reporting forms
- not reporting an exposure incident
- blatant disregard for PPE, or safety procedures

Group III Offense - This disciplinary procedure will be an immediate discharge from the agency.

Examples of this offense are, but not limited to:

- misuse or removal from the premises any agency records, confidential information, except as necessary in their performance of any employee's duty
- deliberately exposing another employee or person to biohazard waste

Employees are directed to the Personnel Policy Manual for grievance and appeal procedures.

BLOOD BORNE PATHOGEN TRAINING

- A. All Category A employees will receive training during their initial orientation, which will occur at the time of initial assignment. A refresher training will be provided once every following year.
- B. All Category A employees will receive training on the epidemiology, symptoms, and transmission of bloodborne pathogen diseases. In addition, the training program will cover, at a minimum, the following elements:

- a copy and explanation of the bloodborne pathogens standard
- an explanation of the ECP and how to obtain a copy
- an explanation of methods to recognize tasks and other activities that may involve exposure to blood and OPIM, including what constitutes an exposure incident
- an explanation of the use and limitations of engineering controls, work practices, and PPE
- an explanation of the types, uses, location, removal, handling, decontamination, and disposal of PPE
- an explanation of the basis for PPE selection

- information on the hepatitis B vaccine, including information on its efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine will be offered free of charge
- information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIM
- an explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available
- information on the post-exposure evaluation and follow-up that the employer is required to provide for the employee following an exposure incident
- an explanation of the signs and labels and/or color coding required by the standard and used at this facility
- an opportunity for interactive questions and answers with the person conducting the training session

C. Training Records

Training records are completed for each employee upon completion of training. These documents will be kept for at least **three years** and maintained by the Administrative Services Director.

The training records shall include:

- the dates of the training sessions
- the contents or a summary of the training sessions
- the names and qualifications of persons conducting the training
- the names and job titles of all persons attending the training sessions

Employee training records are provided upon request to the employee or the employee's authorized representative within fifteen (15) working days. Such requests should be addressed to the Administrative Services Director.

MEDICAL RECORDS

Medical records are maintained for each employee with occupational exposure in accordance with 29 CFR 1910.20, "Access to Employee Exposure and Medical Records."

The Administrative Services Director is responsible for the maintenance of the required medical records. These **confidential** records are kept at the administrative office, 570 Marshall Road, Coldwater, MI 49036 for at least the **duration of employment plus 30 years**.

In addition to the requirements of 29 CFR 1910.20, the medical record will include:

- the name and social security number of the employee
- a copy of the employee's hepatitis B vaccinations and any medical records relative to the employee's ability to receive vaccination

- a copy of all results of examinations, medical testing, and follow-up procedures as required by the bloodborne pathogens standard protocol
- a copy of all health care professional's written opinion(s) as required by the bloodborne pathogens standard protocol

Employee medical records shall be provided upon request of the employee or to anyone having written consent of the employee within fifteen (15) working days. Such requests should be sent to the Director of Human Resources.

OSHA RECORD KEEPING

An exposure incident is evaluated to determine if the case meets OSHA's Record keeping requirements (29 CFR 1904). This determination and the recording activities are done by the Administrative Services Director.

SHARPS INJURY LOG

All percutaneous injuries from contaminated sharps are recorded in the Sharps Injury Log (Appendix B). The log includes:

- date of the injury
- type and brand of device involved
- department of work area where the exposure occurred; and
- explanation of how the incident occurred.

The log is reviewed at least annually as part of the annual evaluation of the program and is maintained for at least five years following the end of the calendar year that they cover. If a copy is requested by anyone, it must have any personal identifiers removed from the report.

The log is recorded and maintained to protect the confidentiality of the injured employee. This log is completed and maintained by the Administrative Services Director.

Chemical Hygiene Plan

Branch-Hillsdale-St. Joseph Community Health Agency
(BHSJ CHA)

The Hazard Communication Plan (Chemical Hygiene Plan) is required by Part 431 of the Michigan Occupational Safety and Health Act governing hazardous work in laboratories and supercedes federal regulations in Michigan to ensure that information is transmitted to employees about the chemical hazards that they are exposed to. This is accomplished through labels, material safety data sheets, instructions, written information, training and other forms of warning.

1. BASIC RULES & PROCEDURES

The standard requires that BHSJ CHA employees work cooperatively in providing a safe and healthful work environment with training, evaluations and periodic meetings that ensure that all staff are aware of and comply with safeguards that are in place to limit accidents and injuries by the following basic rules (MIOSHA Rule 325.70113, Part E).

- Institute a Chemical Hygiene Program at the Work Site.
- Avoid Underestimation of Risk
- Provide Adequate Ventilation When Working With Chemicals
- Minimize Chemical Exposures
- Observe the Permissible Exposure Limits (PEL's) and Threshold Limit Values (TLV's) as defined by the MSDS for all chemicals in use at the work site.

2. PROCUREMENT/HAZARD DETERMINATION/CHEMICAL INVENTORY (MIOSHA Rule 325.70113, Part D, No. 2)

General Considerations:

- Procurement: Before a substance is received, information on proper handling, storage, and disposal should be known to those who will handle, store, work with or dispose of the substance.
- Laboratory storage: Amounts stored should be as small as practical. A **Laboratory** means a facility where the laboratory use of hazardous chemicals occurs. It is a workplace where relatively small quantities of hazardous chemicals are used on a non-production basis. Laboratory scale means work with substances in which the containers used for reactions, transfers, and other handling of substances are designed to be easily and safely manipulated by one person.
- Distribution: When chemicals are hand carried outside of the immediate work area, the container should be placed in an outside container or bucket. Freight only elevators should be used if possible.

Information supplied by the manufacturers will be relied upon for the hazard determination.

- A **hazardous chemical** means a chemical for which there is statistically significant evidence based on at least one study conducted in accordance with established scientific principles that acute or chronic health effects may occur in exposed employees. The term **health hazard** includes chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic systems, and agents which damage the lungs, skin, eyes, or mucous membranes.
- A **physical hazard** means a chemical for which there is scientifically valid evidence that it is a combustible liquid, a compressed gas, explosive, flammable, an organic peroxide, an oxidizer, pyrophoric, unstable (reactive) or water-reactive.
- A **health hazard** includes chemicals which are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, corrosives, sensitizers, hepatotoxins, nephrotoxins, neurotoxins, agents which act on the hematopoietic systems, and agents which damage the lungs, skin, eyes, or mucous membranes.

It is the policy of Branch-Hillsdale-St. Joseph Community health Agency to request a material safety data sheet for each chemical that is used in the workplace, except for the following items:

Laboratory uses of hazardous chemicals that provide no potential for employee exposure. Examples of such conditions might include:

- Procedures using chemically-impregnated test media such as dip-and-read tests where a reagent strip is dipped into the specimen to be tested; and
- Commercially prepared kits, such as pregnancy tests, in which all of the reagents needed to conduct the test are contained in the kit.
- Medications and drugs are considered exempt from the Hazard Communication Plan when it is determined that are in solid, final form, for direct administration to the patient (i.e., tablets, pills, capsules).
- Consumer products, when it is determined that they are used in the same manner and with no more frequency than a normal consumer would use them.

The chemical inventory is monitored and training updates are coordinated by: Candy Cox, Clinic Manager, and updated whenever one or more of the following occurs:

- A new hazard is introduced into the workplace.
- A hazard has been removed from use in the workplace.
- The hazard determination process is reviewed during annual self-inspection to ensure that it is current and that any new safety situations are promptly addressed.

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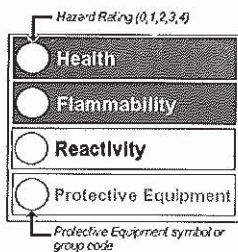
3. HOUSEKEEPING, INSPECTIONS & MAINTENANCE

(MIOSHA Rule 325.70113, Part D, No. 4)

- Housekeeping. Floors should be cleaned regularly. The cleaning schedule with particulars listed for Branch-Hillsdale-St. Joseph Community Health Agency is posted in the Lab QA Manual
- Inspections. Formal housekeeping and chemical hygiene inspections should be held at least quarterly for units which have frequent personnel changes and semiannually for others; informal inspections should be continual.
- Passageways. Stairways and hallways should not be used as storage areas. Access to exits, emergency equipment, and utility controls should never be blocked. The inspection schedule for Branch-Hillsdale-St. Joseph CHA is posted as follows: checked daily
- Maintenance - As applicable- and documented - for Branch-Hillsdale-St. Joseph CHA. Eye wash fountains should be inspected at intervals of not less than three months. Respirators (if supplied) for routine use should be inspected periodically by the laboratory supervisor. Safety showers (if supplied) should be tested routinely. Other safety equipment should be inspected regularly (e.g., every 3-6 months). Procedures to prevent restarting of out-of-service equipment must be established. These records are maintained by: Clinic Managers at each site

4. HAZARD LABELING SYSTEM (MIOSHA Rule 325.70109 & 325.70113, Part D, No. 8)

In accordance with the hazardous work in laboratories standard, chemical hazard labels are to be legible, in English, and displayed either on the container (of the product) or readily available in the work area throughout each work shift. The immediate work area is defined as the room where the product will be used by the employee. In keeping with the interpreted intent of the law, it is policy to ensure that the employee is familiar with the hazards they have contact with and that there is a label available to remind or warn them of the hazards.



A label will be provided for each chemical product that will include an indication of the hazards presented by the product in each of four areas fire, reactivity, health and special hazards. (See example) Special safety equipment, which is required to handle the hazardous products, must be indicated on the label.

Prominent signs and labels of the following types must be posted;

- Emergency telephone numbers of emergency personnel/facilities, supervisors, and laboratory workers;
- Identity labels, showing contents of containers (including waste receptacles) and associated hazards;

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- Location signs for safety showers, eyewash stations, other safety and first aid equipment, exits and areas where food and beverage consumption and storage are permitted;
- Warnings at areas or equipment where special or unusual hazards exist.

5. CHEMICAL SPILL RESPONSE (MIOSHA Rule 325.70113, Part D, No. 9)

The initial step in controlling any type of spill is prevention. All hazardous chemicals should be handled with care and with appropriate PPE. The cleanup process for spills is much more costly than slowing down to be cautious when working with these items.

Spill Control Policy for Branch-Hillsdale-St. Joseph CHA

All accidents or near accidents should be carefully analyzed with the results distributed to all who might benefit. In the event of a chemical spill, the material safety data sheet will be referred to for proper spill response procedures. These will include appropriate materials to be used for collection of the material (i.e., absorbents, spill kit materials), as well as protective measures to be taken with the particular product. Below, are outlined some basic steps for responding to a chemical spill should one occur at Local Health Department:

- Location signs for safety showers, eyewash stations, other safety and first aid equipment, exits and areas where food and beverage consumption and storage are permitted;
- Warnings at areas or equipment where special or unusual hazards exist.

There should be an alarm system to alert people in all parts of the facility including isolation areas such as cold rooms - if applicable . . . at Branch-Hillsdale-St. Joseph CHA

- Determine what has been spilled and locate the material safety data sheet (MSDS) for the product.
- If the product is toxic, evacuate personnel from the area.
- Provide adequate ventilation as described on the MSDS. Try to contain the spill from spreading with absorbent material.
- Cleanup personnel must use proper personal protective equipment as described for spill response (within the MSDS).
- If the MSDS is incomplete, professional judgment will be used in the absence of specific spill response information. The manufacturer may be contacted for further information, if time allows.
- Dispose of clean up materials as recommended by the manufacturer and in accordance with local, state and federal regulations. Ensure that materials saturated with flammable liquids are

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placed into containers that will limit the potential for combustion and subsequent fire hazards.

- An incident report must be completed and turned in to management for review and discussion with other staff so that recurrence of the incident can be avoided.

Spill kits 1 spill kit per each clinic for this facility are located in each clinic's lab

6. MEDICAL PROGRAM

(MIOSHA Rule 325.70108 & 325.70113, Part D, No. 5)

Regular medical surveillance will be established to the extent required by regulations (per MSDS's) at: Branch-Hillsdale-St. Joseph CHA

Routine surveillance - as necessary (Per MSDS's). Anyone at Branch-Hillsdale-St. Joseph CHA whose work involves regular and frequent handling of toxicologically significant quantities of a chemical will be referred to a qualified physician to determine on an individual basis whether a regular schedule of medical surveillance is desirable.

- Personnel trained in first aid will be available during working hours and an emergency room with medical personnel should be nearby. The nearest emergency room is located at: They are site specific, each clinic has an emergency room located within 5 miles

7. PPE SELECTIONS, PROVISION, USE AND ACCESSIBILITY

(MIOSHA Rule 325.70113, Part D, No. 6)

Personal protective equipment (PPE) is provided to employees of Branch-Hillsdale-St. Joseph CHA for the protection of eyes, face, head and extremities, where there is a potential for injury or impairment in the function of the body through absorption, inhalation or physical contact. The PPE for employees has been selected based upon the type of task being performed and the degree of exposure anticipated from the hazard to which the employee has been exposed. Equipment is maintained in accordance with manufacturers guidelines to ensure its proper functioning and is available in sizes to fit all staff.

The use of personal protective equipment is considered to be a condition of employment. Employees who choose to disregard the importance of personal protective equipment may be subject to reprimand and potential dismissal from their position.

Annual employee training regarding personal protective equipment will include:

- when PPE is required to be used,
- what PPE is necessary for specific tasks,
- how to properly wear, use and adjust PPE,
- the proper care, maintenance, limitations, useful life and disposal of PPE.
- Other items designated by the laboratory supervisor may be required.

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Examples of PPE provided and their intended use at Branch-Hillsdale-St. Joseph CHA are as follows.

Item	Location
Fire Extinguishers	Site specific – per fire Inspector’s Requirements
Fire Alarms	Site specific – per Fire Inspector’s REquirements
Emergency Phones	All phones and cell phones
Safety Showers	Non applicable
Eyewash Fountain(s)	In each laboratory
Safety Goggles/glasses	PPE stations - posted
Lab Coats	Personal lab coats in each clinic
Masks	PPE stations - posted

Lab coats, gowns or other protective clothing are worn whenever there is the reasonable potential for the soiling of clothes when working with hazardous chemicals or blood and body fluids. The protective garments have been selected to meet the type and amount of soiling expected to be present during a specific task. The material safety data sheets of hazardous chemicals will be reviewed to select proper PPE for a given product.

Protective Eye Wear and Masks

Protective eye wear and/or masks are worn whenever there is the potential for the generation of splashes, spills, spray, splatter, droplets, or aerosols of chemicals and there is the potential for eye, nose or mouth contamination. Appropriate eye wear or masks will be worn as recommended by the manufacturer of a hazardous product.

Gloves

When working with hazardous chemicals, blood or body fluids, gloves will be worn according to manufacturer recommendations. General-purpose gloves, not used for healthcare purposes, may be decontaminated and reused. Gloves are not to be used if they are peeling, cracking or discolored, or if they have punctures, tears or other evidence of deterioration.

Maintenance and Replacement of PPE

Branch-Hillsdale-St. Joseph CHA will periodically survey PPE to ensure its condition allows for the intended protection of the employee. Employees will immediately notify supervision of any damage or defects that make the PPE incapable of properly protecting them. Repair and/or replacement of personal protective equipment are provided by the employer as needed to maintain its effectiveness.

Necessary cleaning, laundering or disposal of personal protective equipment is provided by Branch-Hillsdale-St. Joseph CHA. Linens are **NOT** to be taken home by the employee for laundering.

Employees will not be responsible for the cost of any personal protective equipment that is required to protect them from exposure to chemical or biohazards in the workplace.

8. RECORDS (MIOSHA Rule 325.7011 & 325.70113, Part D, No. 7)

- Accident records must be written with any follow up or corrective actions taken noted.
- Chemical Hygiene Plan records must document that the facilities and precautions were compatible with current knowledge and regulations.
- Inventory and usage records for high-risk substances, if present, will be kept at Branch-Hillsdale-St. Joseph CHA. Records of the amounts of these materials on hand, amounts used, and the names of the workers involved (if an accident occurs) will be maintained.

Medical records – Branch-Hillsdale-St. Joseph CHA will establish and maintain for each employee an accurate record of any measurements taken to monitor employee exposures and any medical consultation and examinations including tests or written opinions required by this standard Branch-Hillsdale-St. Joseph CHA will assure that such records are kept, transferred, and made available. All medical records will be retained by Branch-Hillsdale-St. Joseph CHA in accordance with the requirements of state and federal regulations for at least the duration of employment plus 30 years (MIOSHA Rule 325.70108).

- All training records will include the following information will be maintained for three years from the date on which the training occurred: Documentation of the training will be maintained in employee personnel files or in a master training file.
 - The dates of the training sessions;
 - The contents or a summary of the training sessions;
 - The names and qualifications of persons conducting the training;
 - The names and job titles of all persons attending the training sessions.
 - Material Safety Data Sheets are to be retained for 30 years from the date of removal from the active file.

9. MATERIAL SAFETY DATA SHEETS (MIOSHA Rule 325.70109)

Material safety data sheets are maintained at Branch-Hillsdale-St. Joseph CHA to comply with MIOSHA's Hazardous Work in Laboratories Standard. Material safety data sheets contain useful information regarding the hazards associated with products or chemicals used in the facility. Employees are not required to memorize the information contained within the data sheets but are provided with training so that they can locate them and find information such as:

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- Flammability Hazard, Reactivity Hazard, Health Hazard, Precautions for Safe Handling and Use, and Control Measures.

This information will ensure that chemicals and products are used in a safe manner and that employees are aware of the hazards associated with those items.

- It is the responsibility of Branch-Hillsdale-St. Joseph CHA to collect material safety data sheets for each hazardous chemical or product that is used in the facility. The suppliers and manufacturers of such products are required to supply material safety data sheets along with the first order of each product. If a material safety data sheet is not received with a first order, one will be requested.
- In order for hazard labeling to be completed, certain information must be provided on the MSDS. If any necessary information is missing, the manufacturer will be contacted in order to obtain it.
- The location of the material safety data sheets must be posted on the employee bulletin board.
- When new or revised data sheets are received they should be posted on the employee bulletin board for review by employees before they are included in the designated MSDS file.

If an MSDS is removed because it has been revised or the product is no longer used, the data sheet must be marked with the date it was removed and then placed in a separate file of archived data sheets. These data sheets are to be retained for 30 years from the date of removal from the active file.

MSDS sheets for Branch-Hillsdale-St. Joseph CHA are located at: Sign in room at each site

10. WASTE MANAGEMENT (MIOSHA Rule 325.70113, Part D, No. 9)

Chemical waste (or hazardous products) is disposed of in accordance with information provided on the MSDS by the products manufacturer at Branch-Hillsdale-St. Joseph CHA. Should the MSDS fail to provide adequate instruction, the manufacturer is contacted by telephone for further information on proper disposal of the product.

If the chemical waste has become contaminated with blood or other potentially infectious materials, then it will be disposed of in accordance with the guidelines set forth in the medical waste management plan located at Exposure control Manual located in sign in rooms at each site.

- Content: The waste disposal program at Branch-Hillsdale-St. Joseph CHA must specify how waste is to be collected, segregated, stored, and transported and include consideration of what materials can be incinerated.
- Aim: To assure that minimal harm to people, other organisms, and the environment will result from the disposal of waste laboratory chemicals. Transport from the institution must be in accordance with DOT regulations.

- Discarding Chemical Stocks: Unlabeled containers of chemicals and solutions must undergo prompt disposal; if partially used, they should not be opened. Before a worker's employment in the laboratory ends, chemicals for which that person was responsible should be discarded or returned to storage.
- Frequency of Disposal: Waste should be removed from laboratories to a central waste storage area at least once per week and from the central waste storage area at regular intervals.
- Method of Disposal: Incineration in an environmentally acceptable manner is the most practical disposal method for combustible laboratory waste. Indiscriminate disposal by pouring waste chemicals down the drain or adding them to mixed refuse for landfill burial is unacceptable.
- Hoods must not be used as a means of disposal for volatile chemicals.
- Disposal by recycling or chemical decontamination should be used when possible. Branch-Hillsdale-St. Joseph CHA's Waste Disposal Plan is located in the Laboratory QA Manual..

11. EMPLOYEE INFORMATION AND TRAINING (MIOSHA Rule 325.70113, Part D, No. 10)

Candy Cox, Clinic Manager, will coordinate and maintain records of training conducted for Branch-Hillsdale-St. Joseph CHA. The training and education program will be a regular, continuing activity--not simply an annual presentation at Branch-Hillsdale-St. Joseph CHA.

- Before any new hazardous chemical is introduced into the workplace, each employee will be given information in the same manner as during the initial safety class.
- Before starting work, at the time of their initial assignment, each new employee at Branch-Hillsdale-St. Joseph CHA will attend a safety class.
- In that class, each employee will be given information on:
 - < Location and availability of this Chemical Hygiene Plan
 - < Details of the written Chemical Hygiene Plan
 - < Chemicals and their hazards in the workplace.
 - < PEL's for MIOSHA regulated substances or exposure limits in use at Branch-Hillsdale-St. Joseph CHA. This information is in the MSDS
 - < How to lessen or prevent exposure to these chemicals.
 - < Signs and symptoms associated with exposure to hazardous chemicals.
 - < What Branch-Hillsdale-St. Joseph CHA has done to lessen or prevent workers' exposure to these chemicals?
 - < Protective measures employees can take to protect themselves from chemical exposures, such as PPE, work practices, and emergency procedures.
 - < Methods and observation that may be used to detect the presence of, or release of

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a hazardous chemical such as monitoring and the visual or odor of hazardous chemicals when being released.

- < Procedures to follow if they are exposed.
- < How to read and interpret labels and M.S.D.S.s.
- < Where to locate M.S.D.S.s at Branch-Hillsdale-St. Joseph CHA and from whom they may obtain copies.

The employee will be informed that:

Branch-Hillsdale-St. Joseph CHA is prohibited from discharging, or discriminating against, an employee who exercises the rights regarding information about hazardous chemicals in the workplace.

As an alternative to requesting an M.S.D.S. from the Branch-Hillsdale-St. Joseph CHA, the employee may obtain a copy from Consumer and Industrial Services at the Michigan Department of Community Health. A sign will be posted with the address and telephone number of the department/individual responsible for such requests.