

**BOARD OF HEALTH Meeting**  
**Agenda for January 23, 2025 at 9:00 AM**

1. Call to Order
  - a. Opening ceremonies – Pledge Allegiance to the Flag of the United States of America
  - b. Roll Call
  - c. Approval of the Agenda\*
  - d. Officer Elections
    - o Chair\*
    - o Vice-Chair\*
  - e. Committee Assignments\*
  - f. Approval of the Minutes from December 12, 2024\*
2. Public Comment
3. Health Officer’s Report – pg 7
4. Medical Director’s Report – pg 9
5. Departmental Reports
  - a. Health Education & Promotion – pg 11
  - b. Environmental Health – pg 13
  - c. Area Agency on Aging – pg 29
  - d. Personal Health & Disease Prevention – pg 37
6. Financial Reports
  - a. Approve Payments\* - pg 45
  - b. Review Financials\* - pg 47
7. Committee Reports
  - a. Finance Committee – Did not meet.
  - b. Program, Policies, and Appeals – Approval of the January 15, 2025 Program, Policy, and Appeals Committee meeting. – pg 52
8. Unfinished Business
  - a.
9. New Business
  - a. Health Officer Evaluation Policy\* - pg 53
  - b. 2025 Board of Health Meeting Schedule – pg 54
  - c. Personnel Policy Manual Update\* – pg 55
  - d. Board of Health By-laws – pg 119
  - e. Employee Recognitions – pg 122
  - f. Audit Governance Letter – pg 123

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

11. Adjournment - Next meeting: February 27, 2025

Upcoming Education Opportunities Offered After BOH Meeting:

- November

Upcoming Meeting Dates:

- February 14, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- February 19, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- February 27, 2025 @ 9:00 AM – Full Board Meeting
- March 17, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- March 19, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- March 27, 2025 @ 9:00 AM – Full Board Meeting
- April 21, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- April 16, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- April 24, 2025 @ 9:00 AM – Full Board Meeting
- May 19, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- May 21, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- May 22, 2025 @ 9:00 AM – Full Board Meeting
- June 16, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- June 18, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- June 26, 2025 @ 9:00 AM – Full Board Meeting
- July 21, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- July 16, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- July 24, 2025 @ 9:00 AM – Full Board Meeting
- August 18, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- August 20, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- August 28, 2025 @ 9:00 AM – Full Board Meeting
- September 15, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- September 17, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- September 25, 2025 @ 9:00 AM – Full Board Meeting
- November 3, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- November 5, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- November 13, 2025 @ 9:00 AM – Full Board Meeting
- December 1, 2025 @ 9:00 AM - Finance Committee (Hoffmaster, Houtz, & ??)
- December 3, 2025 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- December 11, 2025 @ 9:00 AM – Full Board Meeting
- January 16, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & ??)
- January 21, 2026 @ 8:30 AM - PPA Committee (?, Leininger, ??)
- January 22, 2026 @ 9:00 AM – Full Board Meeting

Upcoming Board Education Topics:

- January 23, 2025 – Board of Health Orientation
- February 27, 2025 – Health Department Overview
- March 27, 2025 – Audit Presentation (during the meeting)
- April 24, 2025 – Open Meetings Act and Conflict of Interest
- May 22, 2025 – Finance
- September 25, 2025 – to be determined
- November 13, 2025 – to be determined

## Officer Elections

Article IV, Section 3 of the by-laws indicate that the Chair and Vice-Chair positions will be elected according to a rotation by county. This year's Chair should represent Branch County and the Vice-Chair should represent Hillsdale County.

### Rotation History

2025 Chair – Branch County, Vice-Chair Hillsdale County

2024 Chair – St. Joseph County, Vice-Chair Branch County

2023 Chair – Hillsdale County, Vice-Chair St. Joseph County

## 2024 Committee Appointments

### **Finance Committee**

Branch – Jon Houtz

Hillsdale – Steve Lanius

St. Joseph – Jared Hoffmaster

### **Program, Policy, and Appeals Committee**

Branch – Tom Matthew

Hillsdale – Brent Leininger

St. Joseph – Rusty Baker

## December 12, 2024 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Jared Hoffmaster at 9:01 AM with the Pledge of Allegiance to the Flag of the United States. Roll call was completed as follows: Jared Hoffmaster, Jon Houtz, Brent Leininger, Rusty Baker, and Steve Lanus. Tom Matthew was absent.

Also present from BHSJ: Rebecca Burns, Dr. Karen Luparello, Theresa Fisher, Laura Sutter, Joe Frazier, Heidi Hazel, and Kris Dewey.

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

Mr. Houtz moved to approve the minutes from the November 14, 2024 meeting with support from Mr. Baker. The motion passed unopposed.

Public Comment: No public comments were given.

Rebecca Burns, Health Officer, reviewed the monthly Health Officer's Report with the following items included: Thanking our Board of Health, Budget Amendment #1 & Salary Adjustment Proposal, Board of Health Meeting Schedule for 2025, Open Enrollment, Respiratory Virus Season, Environmental Health Electronic Application Portal, Staffing Update, Community Health Needs Assessment by Beacon Health System, Michigan Legislation, Billing for Community Health Worker Services, Public Health Concerns, Coldwater Office, Hillsdale Office, Three Rivers Office, Sturgis Office, and Board Education.

Dr. Luparello reviewed the Medical Director's monthly report. This month's educational report was titled, "Differences Between Latent TB Infection and TB Disease".

### Departmental Reports:

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

### Financial Reports/Expenditures

- Mr. Leininger moved to approve the expenditures for November with support from Mr. Lanus. The motion passed unopposed.
- Mr. Baker moved to place the financials for October on file with support from Mr. Houtz. The motion passed unopposed.

### Committee Reports:

- Finance Committee – Mr. Lanius moved to approve the minutes from the December 2, 2024 Board of Health Finance Committee meeting with support from Mr. Houtz. The motion passed unopposed.
- Program, Policy, & Appeals Committee – Mr. Leininger moved to approve the minutes from the December 4, 2024 Board of Health Program, Policy, and Appeals Committee meeting with support from Mr. Houtz. The motion passed unopposed.

Unfinished Business:

- There was no unfinished business.

New Business:

- Mr. Leininger moved to approve the FY24-25 Budget Amendment #1, with support from Mr. Houtz. The motion passed unopposed.
- Mr. Houtz moved to approve the updated salary scale, which includes a 5% increase, effective January 2, 2025, with support from Mr. Lanius. The motion passed.
- Mr. Leininger moved to approve the 2025 BOH Meeting Schedule, with support from Mr. Lanius. The motion passed unopposed.
- Mr. Leininger moved to grant the Board Chair the authority to appoint new BOH members to committees for the January 2025 committee meetings, with support from Mr. Lanius. The motion passed unopposed.
- Mr. Leininger moved to approve the Personnel Policy Manual as presented, with support from Mr. Houtz. The motion passed unopposed.


Tabled Items:

- No action was taken

Public Comment: No public comments were given.

With no further business, Mr. Baker moved to adjourn the meeting with support from Mr. Leininger. The motion passed unopposed and the meeting was adjourned at 10:22 AM.

Respectfully Submitted by:

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

# PUBLIC COMMENT

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**Health Officer's Report to the Board of Health for January 23, 2025**  
**Prepared by: Rebecca A. Burns, M.P.H., R.S.**

**Agency Updates**

**Welcoming Board of Health Members:** A new two-year appointment session to the BOH has begun. We want to welcome and welcome back the following Commissioners:

Branch County:

Commissioner Jon Houtz

Commissioner Tim Stoll

Hillsdale County:

Commissioner Brent Leininger

Commissioner Kevin Collins

St. Joseph County:

TBD as of the writing of this report.

**Board of Health Schedule for 2025:** The schedule for 2025 was approved at the December meeting and is provided today for your information and discussion. The schedule does include dates on when BOH education session will be held directly after the conclusion of the meeting. The first education session is at the conclusion of the January 23<sup>rd</sup> meeting and will focus on BOH orientation.

**Board of Health Bylaws:** The bylaws are reviewed annually. There is a recommendation for a change by the Program, Policy and Appeals committee. As outlined in the bylaws, amendments must be submitted in writing to all members at least 10 days prior to the meeting so this will be an action item at the February meeting.

**Personnel Policy Updates:** The agency has a Personnel Policy committee that is made up of a representative and alternate member from each office, the Health Officer, and the Administrative Services Director. The Personnel Policies outline staff work requirements and the committee provided some updates that were reviewed and adopted in December. At that meeting the proposed changes to sick leave for compliance with the new sick leave law which goes into effect on February 21<sup>st</sup> were set aside pending the legislative lame duck session. As the legislature did not pass legislation during lame duck, we are now bringing this back. The PPA committee is suggesting that the BOH adopt the attorney reviewed language should there be no legislative change to Sick Leave by February 21<sup>st</sup>. It is necessary to do this in January as the February BOH meeting is after the implementation date. Our attorney also reviewed information related to Resignation in Good Standing and sick leave and provided language suggestions.

**Employee Recognitions:** In January every year we recognize employees who have been a valuable team member at BHSJCHA on 5-year increments. This year we are recognizing the following:

5 Years: Josh Englehart, Annalisa Rice, and Lisa Palmer

20 Years: Joe Frazier

25 Years: Theresa Fisher

30 Years: Rebecca Burns

35 Years: Lee Zimmerman

**Environmental Health Electronic Application Portal:** The portal is live on our website and will be publicly launched in the next few weeks. Using the portal residents can apply for permits and look up some existing records electronically.

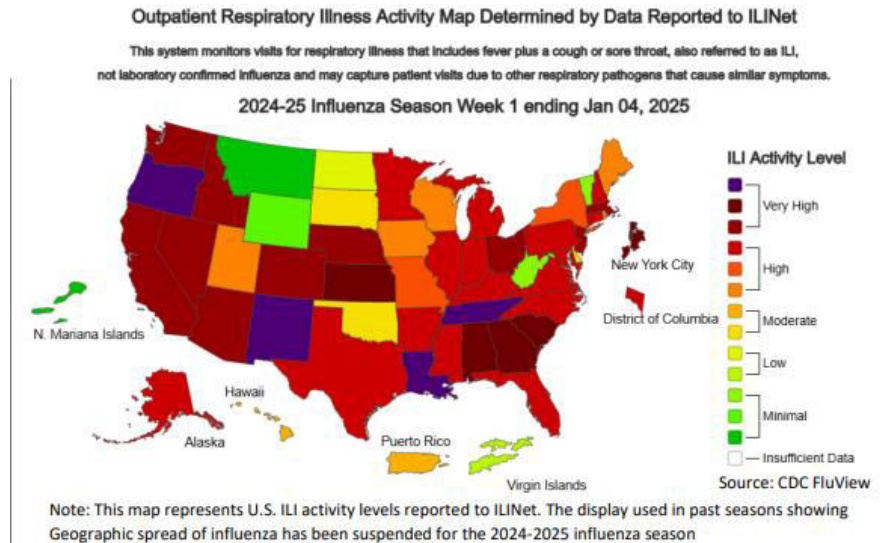
**Staffing Update:** Personal Health & Disease Prevention: Is seeking an RN to staff the Mobile Unit.

Area Agency on Aging: Is seeking an RN Care Consultant.

### **Respiratory Virus Season:**

Michigan is currently ranked “high” for respiratory illnesses. I’m sharing the current 2024-25 map. You can review the full report for the week ending January 4<sup>th</sup> at:

[MIFluFocus.pdf](#) It is not too late to receive vaccinations that prevent or lessen symptoms of respiratory diseases; influenza, COVID, and RSV and we encourage everyone to reach out to their Provider, Pharmacy, or local health department to schedule recommended vaccinations.



### **Public Health Concerns:**

*Cold-Related Illness ED visits:* The very cold temperatures beginning January 19<sup>th</sup> can lead to a spike in CRI ED visits. This can also result in cold weather illnesses such as Carbon Monoxide poisoning when generators and other gas equipment are used improperly. The agency will share cautionary information about taking care during these extreme cold weather events.

*Pertussis:* Pertussis cases continue in the district and state. Pertussis “whooping cough” can cause serious illness in people of all ages but is most dangerous to infants. Pertussis is a vaccine preventable disease. We continue to see declining childhood immunization rates leaving more infants and children at risk for severe pertussis illnesses.

*Highly Pathogenic Avian Influenza “Bird Flu”:* We received notification of the identification of another backyard flock found to have HPAI in Michigan. This was the 4<sup>th</sup> notification in January 2025. HPAI has been found in backyard flocks, commercial poultry operations, and on dairy farms. In poultry, the illness is nearly 100% fatal and when identified, the flock is culled or depopulated. This is resulting in higher costs for eggs and chicken at the grocery store. The best defense flock owners can take is biosecurity measures to prevent domestic animals from mingling with wildlife.

**Coldwater Office:** The HVAC upgrade in Coldwater will go forward in the Spring so that we don’t have days without heat in the building over the winter. The restroom and clinic counter upgrades in the Coldwater building will happen this year.

**Hillsdale Office:** The repairs to the Hillsdale buildings lower level needed as a result of the water damage are complete.

**Sturgis:** The floor repair that was needed in our Sturgis location has been completed.

**Three Rivers Office:** Electrical and plumbing repairs mentioned in my December report have been completed. I will soon be working on gathering quotes for painting and new carpet in this location, to be paid out of the infrastructure grant funding.



## **MEDICAL DIRECTOR'S REPORT**

**January 2025**

1. Watching numbers of communicable diseases.
2. Director and Administrator meetings, in person and zoom.
3. Meetings via zoom and teleconference with several associations.
4. TB subcommittee of physician public health group meetings.
5. Continuing treatment of multiple latent TB patients and several active TB patients.  
Utilized state consultant multiple times for active TB patients.
6. Discussions regarding salmonella – providers and nursing staff.
7. Working on Winter Provider Newsletter.

## Respiratory Syncytial Virus (RSV)

Common respiratory virus that infects the nose, throat, and lungs and typically causes mild, cold-like symptoms.

Usually spread in fall and winter along with other respiratory viruses. Peaks in December to mid-February. It spreads when an infected person coughs or sneezes, by direct contact with someone who has RSV, or by touching a contaminated surface.

Most people get RSV for the first time as an infant or toddler. Nearly all children will get RSV before their second birthday.

People with RSV are usually contagious for 3 to 8 days and may become contagious a day or two before they start showing signs of illness. People with weakened immune systems may spread the virus for 4 weeks or longer.

Infants and older adults are more likely to develop severe RSV and require hospitalization. Adults with chronic cardiovascular disease, chronic lung or respiratory disease, end stage renal disease, complicated diabetes mellitus, chronic liver disease, neurologic or neuromuscular conditions causing impaired airway clearance, chronic hematologic conditions, moderate or severe immune compromise, severe obesity, living in a nursing home are at risk for more severe RSV and should consider immunization.

Can do lab tests to confirm RSV infection.

2.1 million outpatient (non-hospitalized) visits among children younger than 5 years old each year.

58,000-80,000 hospitalizations among children younger than 5 years old.

100,000-150,000 hospitalizations among adults 60 years and older.

CDC recommends immunizations to protect infants, some young children, and older adults.

Nirsevimab is a monoclonal antibody (not a vaccine) that prevents severe RSV disease and is recommended for infants and some young children. Administration is recommended during October through March in most of the US. Children ages 8 through 19 months with chronic lung disease, severe immunocompromise, cystic fibrosis and/or American Indian or Alaska Native children, should also be given Nirsevimab. Early data shows that Nirsevimab was at least 80-90% effective in preventing babies from being hospitalized.

Pregnant people should get a single dose of the maternal RSV vaccine (Pfizer's Abrysvo) during weeks 32 through 36 of pregnancy to protect their baby from severe RSV disease.

CDC recommends a single dose of any FDA-licensed RSV vaccine for all adults ages 75 and older and adults ages 60-74 at increased risk of severe RSV. There are three RSV vaccines currently available for older adults (Arexvy, mResvia and Abrysvo). In June 2024 the FDA licensed Arexvy for use in people ages 50-59 who are at increased risk of RSV lower respiratory tract infections. Adults who have already received one dose (including last year) should not receive another dose at this time.

***Included in This Month's Report:***

- 1. HEP Update**
- 2. Community Health Worker (CHW) Program Update**
- 3. Community Events**
- 4. Social Media Update**

**1. Health Education & Promotion Department Update:**

The Michigan Office of Highway Safety and Planning grant continues to be on target with the deliverables for the grant. Since the last Board of Health meeting, our team has met with area Bishops in all three counties. We met with 3 Bishops in Branch, Alganssee Township, 5 Bishops in Hillsdale, Camden Township, and 12 Bishops in St. Joseph County, Nottawa Township. The Advisory Committee met on January 13<sup>th</sup> and will be dividing in to subgroups looking at enhancing the vulnerable population module of Drivers' Education and a community education booklet on road safety. In the meetings with the Bishops and Advisory Committee, we have developed a survey tool that the Bishops will be sharing with their congregants. The survey asks questions regarding travel patterns, modes of transportation, and areas of greatest concern or danger.

Our partnership with Beacon Health in the area of mental health services and maternal/infant health projects supporting our agency's CHIP continue is wrapping up. The marketing campaign on Facebook, Spotify, Pandora, and Hulu promoting the WIC program and Immunizations resulted in 210,153 impressions and 53,544 individuals reached. The agency did see an increase in WIC participant numbers from October and November, 3,199 in the two offices.

The Michigan Medical Marijuana Grant applications were completed and submitted. We are awaiting our award letters.

January is Radon Awareness Month. We completed a YouTube video for the community with Joe Frazier, EH Director and Kyle Moore, EH Supervisor. <https://youtu.be/MyQf1nh5660?feature=shared>

Rebecca Burns and Kris Dewey were guest of Hillsdale Hospital's Facebook Live broadcast on January 9<sup>th</sup> and the WCSR radio segment on January 10<sup>th</sup>. Topics covered included Radon, respiratory illnesses, maternal child health programs including WIC and breastfeeding peers, and cervical health awareness month.

<https://www.facebook.com/HillsdaleHospital/videos/2180873382372601>

Social Media continues to spread our message to the community. In December we covered the following topics:

<p>World Aids Day (December 1st) Beacon Health Partnership December Data:</p> <ul style="list-style-type: none"> <li>• <b>Meta/Facebook Reach: 16,216</b></li> <li>• <b>Pandora/Audio Go Impressions: 42,323</b></li> <li>• <b>Disney/Hulu December Impressions: 14,547</b></li> <li>• <b>Spotify Impressions: 35,225</b></li> </ul> <p>National Influenza Vaccination Week (December 2-6th) December WIC social media toolkit COVID-19 at home testing kits Respiratory illness prevention tips Take Control of Your Birth Control <a href="https://www.michigan.gov/TakeControl">Michigan.gov/TakeControl</a> Safe sleep tips Wear One- Free Condoms in all public restrooms Lead safety Breastfeeding Newsletter- Holiday Edition Link: <a href="#">Breastfeeding Newsletter: Issue 3</a></p>	<p>Holiday Food &amp; Toy safety tips MDHHS Public Health toolkit Winter Ready/Winter safety tips BHSJ Job postings Winter car seat safety Project Child Safe- Gun Locks Hillsdale County: CHNA- <a href="https://bit.ly/hillsdalehealthsurvey">bit.ly/hillsdalehealthsurvey</a> Food Safety Course for January- <a href="#">National Registry of Food Safety Professionals Registration Course - Three Rivers   Branch Hillsdale St. Joseph Community Health Agency</a> Recall: Stokke Recalls YOYO<sup>3</sup> Strollers Due to Injury Hazard Learn more at <a href="https://www.cpsc.gov/.../Stokke-Recalls-YOYO3-Strollers...">https://www.cpsc.gov/.../Stokke-Recalls-YOYO3-Strollers...</a></p>
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**2. The Michigan Center for Rural Health (MCRH) – Embedding a Community Health Worker Program within the Local Public Health Department Grant:**

The program continues to support CHW services at Covered Bridge Healthcare two days a week and see referred clients at our offices or during home visits the other three days. We continue exploring opportunities to continue the program beyond our current grant funding.

The greatest needs requested were assistance with Medicaid applications, insurance options, assistance with home repairs, homelessness/risk of homelessness, and finding financial resources through MDHHS.

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

Date	Event
12/5	December to Remember – Branch County
12/9	King’s Kupboard – Hillsdale County
12/13	Friendship Friday – St. Joseph County
12/19	Diaper Bank – St. Joseph County
12/20	King’s Kupboard Christmas Basket distribution – Hillsdale County
12/23	Coach Eby Dinner – Branch County
1/24	Friendship Friday – St. Joseph County
1/27	Coach Eby Dinner – Branch County

**Social Media Data (As of January 1st, 2025)**

	# of Followers (Facebook & Instagram)	Instagram Reach (Amount a post is viewed, commented on, shared, etc.)	Facebook Reach (Amount a post is viewed, commented on, shared, etc.)	Video (# and Topic)	Agency Mentions in Local Media (radio stations, local newspaper/digital articles, etc.)	Boosted Activities (# and Topic)
December	4,368	1,400 <i>(Up 604.4% from November)</i>	16,272 <i>(Down 17.4% from November)</i>	Videos shared (3): Lead Awareness, Winter Safety Tips, How Dad’s Can Support Breastfeeding	4	(2) Beacon Health Facebook Boosting for WIC and Immunizations for St. Joseph County.
<b>TOTAL TO DATE</b> (Since 10/1/2022)	13 NEW followers since last report	4,161	662,654	13	372	18

**Branch-Hillsdale-St. Joseph Community Health Agency**  
**Environmental Public Health Services**  
**Report for the January 23, 2025 Board of Health Meeting**  
**Prepared by Joseph Frazier R.E.H.S. , Director of Environmental Health**

### **Food Service Program Update**

In our food section, we have experienced several changes in ownership and new opening inspections. The following establishments have been noted: CC and Company in Bronson, El Cunado Mexican Cuisine in Coldwater, Sutra Indian Cuisine in Three Rivers, Café Butter Chicken in Sturgis, and Culvers #530 and #466 in Sturgis and Coldwater, as well as South Lanes in Three Rivers. Our new Food Supervisor is currently in training at our Agency and is scheduled to attend the Food Code Food Law training in Kalamazoo at the end of the month.

### **Well, Septic, and Pools**

Recently, a large number of our general staff attended the wastewater conference held on the campus of MSU. This training allows installers of septic systems and regulators to collaborate. Additionally, Jordyn Knierim has started as our new Type II Coordinator in St. Joseph County.

### **Other Areas**

January is Radon Action Month in the State of Michigan. Staff from Environmental Health have been actively distributing free radon test kits to the public. They have also recorded a YouTube video outlining the dangers of radon, how to obtain free test kits, and possible ways to remove radon gas from homes.



570 Marshall Road  
Coldwater, MI 49036  
(517) 279 - 9561 ext. 106

20 Care Drive  
Hillsdale, MI 49242  
(517) 437 - 7395 ext. 311

1110 Hill Street  
Three Rivers, MI 49093  
(269) 273 - 2161 ext. 233

## Inspection Type Count By County

For Date Range: 12/01/2024 - 12/31/2024

County	Inspection Type / Reason	Count
<b>Branch County</b>		
<u>Food Safety</u>		
	Pre-Opening - Pre-Opening	3
	Risk Based Inspection - Routine	18
	Temporary Food Inspection - Routine	2
	<b>Total # of Food Safety inspections - Branch County</b>	<b>23</b>
<b>Hillsdale County</b>		
<u>Food Safety</u>		
	Progress Note - New Inspection Reason	3
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	22
	STFU Pre-Opening - Pre-Opening	1
	<b>Total # of Food Safety inspections - Hillsdale County</b>	<b>27</b>
<b>St. Joseph County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Non Foodborne Illness Complaint - Initial	3
	Plan Review Activity - Initial	1
	Pre-Opening - Pre-Opening	4
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	33
	STFU Inspection - Routine	1

**Inspection Type Count By County**

For Date Range: 12/01/2024 - 12/31/2024

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<b>County</b>	<b>Inspection Type / Reason</b>	<b>Count</b>
	Temporary Food Inspection - Routine	3
	<b>Total # of Food Safety inspections - St. Joseph County</b>	<b>47</b>
	<b><u>Total # of inspections - All counties</u></b>	<b><u>97</u></b>



570 Marshall Road  
Coldwater, MI 49036  
(517) 279 - 9561 ext. 106

20 Care Drive  
Hillsdale, MI 49242  
(517) 437 - 7395 ext. 311

1110 Hill Street  
Three Rivers, MI 49093  
(269) 273 - 2161 ext. 233

## Food Establishment Inspection Report by Facility Name

For Date Range: 12/01/2024 - 12/31/2024 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Abundant Life Assembly	Cement City	12/16/2024	Progress Note - New Inspection Reason	0	0	0	0
Abundant Life Assembly	Cement City	12/17/2024	Progress Note - New Inspection Reason	0	0	0	0
Abundant Life Assembly	Cement City	12/30/2024	Risk Based Inspection - Routine	0	0	0	0
Allen United Methodist Church	Allen	12/27/2024	Risk Based Inspection - Routine	0	0	0	0
Amaz'n Nutrition	Three Rivers	12/16/2024	Risk Based Inspection - Routine	0	0	0	0
AMERICAN LEGION POST #52	COLDWATER	12/10/2024	Risk Based Inspection - Routine	0	0	0	0
AMIGO CENTRE (Food)	Sturgis	12/18/2024	Risk Based Inspection - Routine	0	0	0	0
Applebee's #8399	Three Rivers	12/13/2024	Risk Based Inspection - Routine	0	0	0	1
Arby's # 5968	Three Rivers	12/17/2024	Risk Based Inspection - Routine	1	0	1	1
Burr Oak Heritage Festival	Burr Oak	12/02/2024	Temporary Food Inspection - Routine	0	0	0	0
Cafe Butter Chicken	Sturgis	12/04/2024	Plan Review Activity - Initial	0	0	0	0
Cafe Butter Chicken	Sturgis	12/09/2024	Pre-Opening - Pre-Opening	1	0	1	2
Cavoni's	Three Rivers	12/04/2024	Risk Based Inspection - Routine	0	0	0	0
CC & Company LLC	Bronson	12/05/2024	Pre-Opening - Pre-Opening	1	0	0	2
Centreville Lions Club	Centreville	12/09/2024	Temporary Food Inspection - Routine	0	0	0	0



Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Clemens Food Group LLC	COLDWATER	12/11/2024	Risk Based Inspection - Routine	0	0	0	1
COLDWATER BURGER KING #4652	COLDWATER	12/10/2024	Risk Based Inspection - Routine	0	0	0	0
COLON MASONIC LODGE #73 F&A	Colon	12/03/2024	Risk Based Inspection - Routine	0	0	0	0
COMMERCIAL SPORTS BAR	COLDWATER	12/11/2024	Risk Based Inspection - Routine	0	0	0	0
COMMUNITY CHURCH OF NORTH ADAMS	North Adams	12/05/2024	Risk Based Inspection - Routine	0	0	0	0
Culvers #466	Coldwater	12/19/2024	Pre-Opening - Pre-Opening	0	0	0	2
Culver's #530	Sturgis	12/20/2024	Pre-Opening - Pre-Opening	0	1	1	0
Dairy Queen	Sturgis	12/18/2024	Risk Based Inspection - Routine	0	0	0	1
Dawn's Cafe LLC	Colon	12/03/2024	Risk Based Inspection - Routine	0	0	0	0
Dickey's Barbeque Pit	Coldwater	12/03/2024	Risk Based Inspection - Routine	0	0	0	1
EL CERRITO	HILLSDALE	12/27/2024	Risk Based Inspection - Routine	0	1	0	2
EL Cunado Mexican Cuisine LLC	Coldwater	12/05/2024	Pre-Opening - Pre-Opening	0	0	0	3
El Patron Mexican Restaurant	Sturgis	12/20/2024	Risk Based Inspection - Routine	1	4	5	3
Farrand Bakery	Colon	12/09/2024	Consultation - Plan Review Consultation	0	0	0	0
Farrand Hall Event Center	Colon	12/03/2024	Risk Based Inspection - Routine	0	0	0	0
FIRST BAPTIST CHURCH	COLDWATER	12/09/2024	Risk Based Inspection - Routine	0	0	0	0
FIVE STAR PIZZA	BRONSON	12/13/2024	Risk Based Inspection - Routine	0	0	0	0
Flat Rock Grill & Breakfast Spot	Three Rivers	12/04/2024	Risk Based Inspection - Routine	0	1	1	0
FRATERNAL ORDER OF EAGLES #1907	COLDWATER	12/17/2024	Risk Based Inspection - Routine	0	2	1	0
Gilbert Harvey House	Constantine	12/27/2024	Risk Based Inspection - Routine	0	1	1	1
GINOLFI'S	North Adams	12/30/2024	Risk Based Inspection - Routine	0	0	0	0
HERE'S TO YOU PUB AND GRUB	HILLSDALE	12/05/2024	Risk Based Inspection - Routine	0	0	0	0
Immaculate Conception Church Hall	THREE RIVERS	12/16/2024	Risk Based Inspection - Routine	0	0	0	1
Jaywalker Restaurant	Mottville	12/05/2024	Risk Based Inspection - Routine	0	0	0	1
JEANNIE'S DINER	COLDWATER	12/17/2024	Risk Based Inspection - Routine	0	2	2	1
Jimmy John's #3994	Three Rivers	12/17/2024	Risk Based Inspection - Routine	0	0	0	0
Just Dranks LLC	Hillsdale	12/06/2024	STFU Pre-Opening - Pre-Opening	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
LAKE LEANN GOLF COURSE	Jerome	12/18/2024	Risk Based Inspection - Routine	1	2	2	0
Lake View Church	Camden	12/11/2024	Risk Based Inspection - Routine	0	0	0	0
LakeHouse Three Rivers	Three Rivers	12/09/2024	Risk Based Inspection - Routine	0	1	1	2
LIFESONG COMMUNITY CHURCH	OSSEO	12/06/2024	Risk Based Inspection - Routine	0	0	0	0
Litchfield Fire Department	Litchfield	12/13/2024	Risk Based Inspection - Routine	0	0	0	0
LOYAL ORDER OF MOOSE 474	Three Rivers	12/04/2024	Risk Based Inspection - Routine	0	0	0	1
LUIGI'S PIZZA	LITCHFIELD	12/03/2024	Risk Based Inspection - Routine	0	0	0	0
Magic Capital Grille LLC	Colon	12/03/2024	Risk Based Inspection - Routine	2	1	1	2
MANCINO'S OF COLDWATER	COLDWATER	12/20/2024	Risk Based Inspection - Routine	0	0	0	0
McDONALDS OF STURGIS 2180	Sturgis	12/18/2024	Non Foodborne Illness Complaint - Initial	0	0	0	1
McDONALDS OF STURGIS 2180	Sturgis	12/26/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
MESSIAH LUTHERAN CHURCH	Constantine	12/17/2024	Risk Based Inspection - Routine	0	0	0	0
NEW YORK TACO	Hillsdale	12/03/2024	Progress Note - New Inspection Reason	0	0	0	0
NEW YORK TACO	Hillsdale	12/27/2024	Risk Based Inspection - Routine	0	0	0	2
OMARS BAR INC	COLDWATER	12/12/2024	Risk Based Inspection - Routine	0	0	0	0
Prop Blast Cafe	COLDWATER	12/13/2024	Risk Based Inspection - Routine	0	0	0	2
Punjab Group Mendon Inc DBA Mendon Quick Stop	Mendon	12/20/2024	Risk Based Inspection - Follow-up	0	0	0	1
QUINCY UNITED METHODIST CHURCH	QUINCY	12/20/2024	Risk Based Inspection - Routine	0	0	0	0
RAMSHACKLE BREWING CO	Jonesville	12/05/2024	Risk Based Inspection - Routine	0	0	0	0
River Trade Brewing Co	Constantine	12/06/2024	Risk Based Inspection - Routine	0	0	0	1
RIVIERA THEATRE BAR	THREE RIVERS	12/18/2024	Risk Based Inspection - Routine	0	0	0	0
Rooster's Wing Shack	THREE RIVERS	12/18/2024	Risk Based Inspection - Routine	0	0	0	1
Schwartz Cafe	Bristol	12/09/2024	Temporary Food Inspection - Routine	0	0	0	0
Smitty's Pizza & Subs, LLC	Bronson	12/20/2024	Risk Based Inspection - Routine	1	0	1	1
SOMERSET CONGREGATIONAL CHURCH	SOMERSET	12/05/2024	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
SOUTH LANES	Three Rivers	12/27/2024	Pre-Opening - Pre-Opening	0	0	0	0
Spangler's Family Restaurant	Jonesville	12/30/2024	Risk Based Inspection - Routine	1	0	1	1
St Anthony's Catholic Church	HILLSDALE	12/23/2024	Risk Based Inspection - Routine	0	0	0	0
St. Joseph County Commision on Aging	Three Rivers	12/09/2024	Risk Based Inspection - Routine	0	1	1	0
Stateline Bar	White Pigeon	12/05/2024	Risk Based Inspection - Routine	0	0	0	2
STOUT-NESBIT AMERICAN LEGION	MONTGOMERY	12/09/2024	Risk Based Inspection - Routine	1	0	1	0
STURGIS PIZZA HUT	STURGIS	12/18/2024	Risk Based Inspection - Routine	1	0	1	1
Sutra Indian Cuisine	Three Rivers	12/06/2024	Pre-Opening - Pre-Opening	0	0	0	0
Taco Bell #33023	Three Rivers	12/05/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
Taqueria El Cunado	Constantine	12/26/2024	STFU Inspection - Routine	0	0	0	0
The Bistro Barrel	Constantine	12/02/2024	Temporary Food Inspection - Routine	0	0	0	0
The Chicken Shack of Constantine LLC	Constantine	12/11/2024	Risk Based Inspection - Routine	0	1	1	1
The Chill Bean	CENTERVILLE	12/19/2024	Risk Based Inspection - Routine	0	0	0	0
THE HUNT CLUB OF HILLSDALE	HILLSDALE	12/20/2024	Risk Based Inspection - Follow-up	0	0	0	0
THE IN BETWEEN	Sturgis	12/11/2024	Risk Based Inspection - Routine	0	1	0	0
THE LOCAL EATERY	Hillsdale	12/06/2024	Risk Based Inspection - Routine	0	0	0	0
The Oaks	Moscow	12/17/2024	Risk Based Inspection - Routine	0	0	0	0
The Parlor Ice Cream & Coffee		12/11/2024	Risk Based Inspection - Routine	0	0	0	0
The Post	Allen	12/09/2024	Risk Based Inspection - Routine	1	0	1	1
THE SALVATION ARMY	HILLSDALE	12/04/2024	Risk Based Inspection - Routine	0	0	0	0
The Stables	Quincy	12/13/2024	Risk Based Inspection - Routine	0	0	0	1
The Well AC	Hillsdale	12/12/2024	Risk Based Inspection - Routine	0	0	0	0
THREE RIVERS 6	Three Rivers	12/18/2024	Risk Based Inspection - Routine	0	0	0	1
Ultzimate Eatz	Burr Oak	12/09/2024	Temporary Food Inspection - Routine	0	0	0	0
VETERANS FOREIGN WARS	STURGIS	12/20/2024	Risk Based Inspection - Routine	0	0	0	0
Wendy's #4444		12/03/2024	Risk Based Inspection - Routine	0	0	0	0

<b>Name</b>	<b>Location</b>	<b>Date</b>	<b>Inspection Type/Reason</b>	<b># of P</b>	<b># of Pf</b>	<b>CDI</b>	<b># of C</b>
Whiskey Creek Old #7	Burr Oak	12/17/2024	Risk Based Inspection - Routine	1	1	2	0
Willow's Bar & Grill	Coldwater	12/11/2024	Risk Based Inspection - Routine	0	0	0	0
Wine About it LLC	White Pigeon	12/19/2024	Risk Based Inspection - Routine	0	0	0	0
WING HOUSE	COLDWATER	12/13/2024	Risk Based Inspection - Routine	0	0	0	1
				<b>13</b>	<b>20</b>	<b>26</b>	<b>46</b>

## Food Inspection Codes

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

Pf-This is a priority foundation violation which is a violation that supports a priority violation. For example, the lack of soap or towels at a handwash sink is a Pf. This supports the priority violation of not washing hands.

C- This is a core violation. This is an item that usually relates to general sanitation, operation controls and maintenance of facilities and equipment. Not cleaning floors is an example of a core violation.

CDI- This indicates a violation was observed during the inspection and was brought to the attention of the person in charge. At that time, the violation was corrected while the inspector was present at the facility.



570 Marshall Road  
Coldwater, MI 49036  
(517) 279 - 9561 ext. 106

20 Care Drive  
Hillsdale, MI 49242  
(517) 437 - 7395 ext. 311

1110 Hill Street  
Three Rivers, MI 49093  
(269) 273 - 2161 ext. 233

## Inspection Type Count By County

For Date Range: 11/01/2024 - 11/30/2024

County	Inspection Type / Reason	Count
<b>Branch County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Non Foodborne Illness Complaint - Follow Up	1
	Non Foodborne Illness Complaint - Initial	2
	Risk Based Inspection - Routine	12
	<b>Total # of Food Safety inspections - Branch County</b>	<b>16</b>
<b>Hillsdale County</b>		
<u>Food Safety</u>		
	Consultation - Change of Owner	2
	Progress Note - New Inspection Reason	2
	Risk Based Inspection - Routine	28
	STFU Inspection - Routine	3
	<b>Total # of Food Safety inspections - Hillsdale County</b>	<b>35</b>
<b>St. Joseph County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	35
	STFU Inspection - Routine	6
	Temporary Food Inspection - Routine	1
	<b>Total # of Food Safety inspections - St. Joseph County</b>	<b>44</b>

**Inspection Type Count By County**  
For Date Range: 11/01/2024 - 11/30/2024

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County	Inspection Type / Reason	Count
	<u>Total # of inspections - All counties</u>	<u>95</u>

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570 Marshall Road  
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1110 Hill Street  
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(269) 273 - 2161 ext. 233

## Food Establishment Inspection Report by Facility Name

For Date Range: 11/01/2024 - 11/30/2024 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
ADVENTURE ZONE, INC	COLDWATER	11/25/2024	Risk Based Inspection - Routine	0	1	1	0
AMERICAN LEGION #223	Constantine	11/05/2024	Risk Based Inspection - Routine	0	0	0	3
AMERICAN LEGION 73	Sturgis	11/12/2024	Risk Based Inspection - Routine	0	1	1	1
AMERICAN LEGION POST 170	THREE RIVERS	11/01/2024	Risk Based Inspection - Routine	0	1	1	0
American Legion Post 53	Hillsdale	11/22/2024	Risk Based Inspection - Routine	1	0	0	0
AMERICAN LEGION REC CLUB	QUINCY	11/08/2024	Risk Based Inspection - Routine	0	0	0	1
ARBY'S	COLDWATER	11/22/2024	Consultation - Plan Review Consultation	0	0	0	0
Arby's 8946	Sturgis	11/12/2024	Risk Based Inspection - Routine	0	0	0	0
Auntie Anne's & Cinnabon	Hillsdale	11/05/2024	Consultation - Change of Owner	0	0	0	0
Bass Boosters	Three Rivers	11/23/2024	STFU Inspection - Routine	0	0	0	0
BEACH CONCESSIONS #88	Hillsdale	11/07/2024	STFU Inspection - Routine	0	0	0	0
BEACH CONCESSIONS #90	Hillsdale	11/07/2024	STFU Inspection - Routine	0	0	0	0
Biggby Coffee North Sturgis	Sturgis	11/14/2024	Risk Based Inspection - Follow-up	0	0	0	0
Bird Lake Christian Academy	OSSEO	11/12/2024	Risk Based Inspection - Routine	0	0	0	0
Bronson Nutrition	Bronson	11/21/2024	Risk Based Inspection - Routine	0	0	0	0



Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Cazuela's Mexican Restaurant	Three Rivers	11/06/2024	Risk Based Inspection - Routine	0	1	0	0
CENTREVILLE ELEMENTARY	Centreville	11/05/2024	Risk Based Inspection - Routine	0	1	1	0
CENTREVILLE HIGH SCHOOL	Centreville	11/05/2024	Risk Based Inspection - Routine	0	0	0	1
CHURCH OF THE NAZARENE	STURGIS	11/12/2024	Risk Based Inspection - Routine	0	0	0	0
COLDWATER BROADWAY GRILLE	COLDWATER	11/19/2024	Risk Based Inspection - Routine	1	0	1	4
COLDWATER FREE METHODIST CHURCH	COLDWATER	11/22/2024	Risk Based Inspection - Routine	0	0	0	0
Community Action Agency (Greenfield)	Hillsdale	11/14/2024	Risk Based Inspection - Routine	0	0	0	0
COMMUNITY ACTION AGENCY (HEAD START)	HILLSDALE	11/14/2024	Risk Based Inspection - Routine	0	0	0	0
COMMUNITY CHURCH OF NORTH ADAMS	North Adams	11/25/2024	Progress Note - New Inspection Reason	0	0	0	0
COTTAGE INN PIZZA	Hillsdale	11/26/2024	Risk Based Inspection - Routine	0	0	0	0
DAVIS MIDDLE SCHOOL	HILLSDALE	11/05/2024	Risk Based Inspection - Routine	0	0	0	0
DOMINO'S PIZZA #1228	JONESVILLE	11/26/2024	Risk Based Inspection - Routine	0	0	0	0
ELKS LODGE #1248	THREE RIVERS	11/22/2024	Risk Based Inspection - Routine	0	0	0	1
Elotes Don Martin	Sturgis	11/22/2024	STFU Inspection - Routine	0	0	0	0
Ethan's Donut Factory	Hillsdale	11/05/2024	Risk Based Inspection - Routine	0	0	0	1
FIRST UNITED METHODIST CHURCH	Three Rivers	11/27/2024	Risk Based Inspection - Routine	0	0	0	0
Five Lakes Coffee	Sturgis	11/21/2024	Risk Based Inspection - Routine	0	1	1	0
GIER ELEMENTARY SCHOOL	HILLSDALE	11/05/2024	Risk Based Inspection - Routine	0	0	0	0
Go Cafe	Centreville	11/05/2024	Risk Based Inspection - Routine	1	0	1	0
Hampton Inn--food	Sturgis	11/14/2024	Risk Based Inspection - Routine	0	0	0	0
Healthies of Hillsdale	Hillsdale	11/18/2024	Risk Based Inspection - Routine	0	0	0	0
Healthies Sturgis	Sturgis	11/12/2024	Risk Based Inspection - Routine	0	0	0	0
HILLSDALE ACADEMY	HILLSDALE	11/22/2024	Risk Based Inspection - Routine	0	0	0	0
HILLSDALE BREWING COMPANY	HILLSDALE	11/05/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College - Beverage Cart	Hillsdale	11/04/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College - Grill Cart	Hillsdale	11/04/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College - Ice Cream Cart	Hillsdale	11/04/2024	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Hillsdale College Dining Hall	Hillsdale	11/04/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College Dow Conference Center	Hillsdale	11/04/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College Halter Center	Hillsdale	11/06/2024	Risk Based Inspection - Routine	1	1	0	0
Hillsdale County ISD - Hillsdale Preparatory	Hillsdale	11/08/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale County Senior Service Center	Hillsdale	11/19/2024	Risk Based Inspection - Routine	0	1	1	0
HILLSDALE FREE METHODIST CHURCH	HILLSDALE	11/08/2024	Risk Based Inspection - Routine	0	0	0	0
Hillsdale Preparatory School	Hillsdale	11/08/2024	Risk Based Inspection - Routine	0	0	0	0
Hillside Lanes & Lane 17	Hillsdale	11/18/2024	Risk Based Inspection - Routine	1	1	0	1
Homestead Cinnamon Rolls	Colon	11/22/2024	STFU Inspection - Routine	0	0	0	0
Howardsville Christian School	Marcellus	11/01/2024	Risk Based Inspection - Routine	1	0	0	1
JONESVILLE FIRST PRESBYTERIAN CHURCH	JONESVILLE	11/26/2024	Risk Based Inspection - Routine	0	0	0	0
Kentucky Fried Chicken Coldwater	COLDWATER	11/15/2024	Non Foodborne Illness Complaint - Follow Up	0	0	0	2
Kentucky Fried Chicken Coldwater	COLDWATER	11/19/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
Kentucky Fried Chicken Coldwater	COLDWATER	11/22/2024	Non Foodborne Illness Complaint - Initial	0	0	0	0
LA Coffee Cafe	Three Rivers	11/20/2024	Risk Based Inspection - Routine	0	0	0	0
LAKE LEANN GOLF COURSE	Jerome	11/25/2024	Progress Note - New Inspection Reason	0	0	0	0
Main Street Smokehouse	Mendon	11/22/2024	Risk Based Inspection - Routine	0	0	0	1
MaMazzoni's Italian Beef	Sturgis	11/13/2024	STFU Inspection - Routine	0	0	0	0
MENDON GRADE SCHOOL	Mendon	11/13/2024	Risk Based Inspection - Routine	0	0	0	0
MENDON JR & SR HIGH SCHOOL	MENDON	11/13/2024	Risk Based Inspection - Routine	0	0	0	0
Michindoh Conference Center	Hillsdale	11/06/2024	Risk Based Inspection - Routine	0	0	0	0
MOSHERVILLE LADIES AID SOCIETY	Mosherville	11/14/2024	Risk Based Inspection - Routine	0	0	0	0
No. 1 Chinese Food	Three Rivers	11/06/2024	Risk Based Inspection - Routine	0	1	1	0
NORTH ADAMS PUBLIC SCHOOLS	North Adams	11/14/2024	Risk Based Inspection - Routine	0	1	0	1
Nottawa Communy Schools	Sturgis	11/12/2024	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Our Bar	LEONIDAS	11/27/2024	Risk Based Inspection - Routine	0	0	0	1
PARK COMMUNITY SCHOOL	THREE RIVERS	11/01/2024	Risk Based Inspection - Routine	0	0	0	1
PATHFINDER: FOOD	Centreville	11/12/2024	Risk Based Inspection - Routine	0	0	0	0
PIGHEADED BBQ	LEONIDAS	11/23/2024	STFU Inspection - Routine	0	0	0	0
Punjab Group Mendon Inc DBA Mendon Quick Stop	Mendon	11/22/2024	Risk Based Inspection - Routine	0	3	0	2
SKATE RANCH INC	COLDWATER	11/05/2024	Risk Based Inspection - Routine	0	0	0	0
St Paul Lutheran Church	Coldwater	11/06/2024	Risk Based Inspection - Routine	0	0	0	0
St. Edward's Catholic Church	Mendon	11/13/2024	Risk Based Inspection - Routine	0	0	0	0
St. Joe's Cafe	Hillsdale	11/19/2024	Consultation - Change of Owner	0	0	0	0
St. Pauls Lutheran Church Sunshine Preschool Daycare	Coldwater	11/06/2024	Risk Based Inspection - Routine	1	0	1	0
Starbucks Coffee #61499	Three Rivers	11/26/2024	Risk Based Inspection - Routine	0	1	1	2
STRAND THEATRE	Sturgis	11/20/2024	Risk Based Inspection - Routine	0	1	0	0
SUBWAY #1951	COLDWATER	11/18/2024	Risk Based Inspection - Routine	0	0	0	1
Subway @ 131	THREE RIVERS	11/25/2024	Risk Based Inspection - Routine	1	0	1	0
Subway @ Main	Three Rivers	11/26/2024	Risk Based Inspection - Routine	0	0	0	0
Subway @ Tolbert	Three Rivers	11/25/2024	Risk Based Inspection - Routine	1	0	1	0
Sutra Indian Cuisine	Three Rivers	11/07/2024	Consultation - Plan Review Consultation	0	0	0	0
The Bronson Strike Zone	Bronson	11/04/2024	Risk Based Inspection - Routine	0	1	1	2
The Hope Cafe	Coldwater	11/26/2024	Risk Based Inspection - Routine	0	0	0	0
THE HUNT CLUB OF HILLSDALE	HILLSDALE	11/25/2024	Risk Based Inspection - Routine	1	1	1	0
The Joint...Smokin' Good Foods LLC	Hillsdale	11/12/2024	STFU Inspection - Routine	0	0	0	1
The Wagyu Shack	Sturgis	11/07/2024	STFU Inspection - Routine	0	1	1	0
THREE RIVERS HIGH SCHOOL	THREE RIVERS	11/04/2024	Risk Based Inspection - Routine	0	0	0	1
THREE RIVERS MIDDLE SCHOOL	Three Rivers	11/04/2024	Risk Based Inspection - Routine	0	1	1	0
Three Rivers Promise	Three Rivers	11/12/2024	Temporary Food Inspection - Routine	0	0	0	0
Three Rivers Young Adult Program	Three Rivers	11/20/2024	Risk Based Inspection - Routine	0	0	0	0

<b>Name</b>	<b>Location</b>	<b>Date</b>	<b>Inspection Type/Reason</b>	<b># of P</b>	<b># of Pf</b>	<b>CDI</b>	<b># of C</b>
WINGS ETC...	Sturgis	11/21/2024	Risk Based Inspection - Routine	0	0	0	1
ZHENG'S SUPER GRAND BUFFET	COLDWATER	11/08/2024	Risk Based Inspection - Routine	0	0	0	2
				<b>10</b>	<b>20</b>	<b>17</b>	<b>32</b>



## Director's Report

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### Enclosures:

1. Services to Victims of Elder Abuse 1<sup>st</sup> Q Programmatic Report
  2. ACLS Bureau Correspondence: dated 12/27/2024, approval of FY2024 final Annual Implementation Plan budget
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### Updates:

1. Services to Victims of Elder Abuse Program Updates
  - The team continues to focus on directly serving victims of abuse, neglect and exploitation. Their first quarter program report is enclosed – quite busy, still working with many who are homeless.
  - The FY2024 Contract Review is considered “complete” at this time. All recommendations have been implemented and we remain in good status. We are hearing “rumblings” the Division will re-bid the grant statewide in 2025...
  - Victim Specialists are working to develop relationships w/ our new St. Joseph County Prosecutor & Probate judge and Branch County Sheriff as a way to introduce them to each county's Interdisciplinary Team. Monthly IDT meetings are ongoing.
2. Legislative Updates of Interest
  - The House adjourned prior to passing Senate Bills 922-925 which sought to enhance protections against financial exploitation, abuse, and neglect of vulnerable adults.
  - The guardianship bills (House Bills 4909-4912) were on the Senate floor, the full chamber did not pass that package of bills either.
  - These bills will have to be reintroduced in the new session...
3. We are still searching for a full time RN Care Consultant for the Community Living Program. In the meantime, we are sharing a nurse from the clinic to support CLP functions.
4. Our team has successfully completed our year end programmatic & financial reporting. FY2024 closeout w/ the Bureau is in process...
5. No Wrong Door Updates

No news to share regarding our collaborative proposal for “No Wrong Door 2025” (NWD). NWD seeks to change statewide administration of the State Health Insurance Program along with implementing a new project called Options Counseling for people seeking information about long term supports and services. Three Area Agencies on Aging: Region 3A (Kalamazoo), Region 3B/CareWell (Calhoun & Barry) and Region 3C (Branch & St. Joseph) developed a proposal to work together to build upon our existing service delivery systems and local partnerships to provide Person-Centered Options Counseling and the State Health Insurance Assistance Program across the collaborative 5-county area. Region 3B volunteered to be “lead” as the applicant, with the proposal outlining sub-agreements to 3A and 3C. We've also invited our shared community partner, Disability Network of Southwest Michigan, to the project as they bring long-standing expertise in serving people with disabilities. Awards are anticipated to be announced at the end of January.



## Services to Victims of Elder Abuse Grant FY24-25 1st Quarter Report (St. Joseph County)

10/1/2024 to 12/31/2024

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

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

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**For additional information or questions please contact:**

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Demographics - New Clients	Total	Previous Qtr. Totals	YTD
Black/African-American	1	0	1
Hispanic/Latino	0	0	0
Caucasian/Non-Latino	11	0	11
Female	5	0	5
Male	7	0	7
Vulnerable: Age 18-59	3	0	3
Elderly: Age 60 and Older	9	0	9
<b><u>New Clients Total</u></b>	<b>12</b>	<b>0</b>	<b>12</b>
<b><u>Continuing Clients</u></b>	<b>0</b>	<b>0</b>	<b>0</b>
<b><u>Total Clients Served</u></b>	<b>12</b>	<b>0</b>	<b>12</b>

Types of Victimization	Total	Previous Qtr. Totals	YTD
Arson	0	0	0
Bullying (Verbal, Cyber or Physical)	3	0	3
Domestic or Family Violence	2	0	2
Elder Abuse or Neglect	9	0	9
Identity Theft/Fraud/Financial Crime	5	0	5
Physical Assault	2	0	2
Robbery/Burglary	0	0	0
Sexual Assault	0	0	0
Survivors of Homicide	0	0	0
Multiple Victimizations	10	0	10

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	4	0	4
Disability	12	0	12
Homeless	7	0	7
LGBTQ	1	0	1
Veteran	1	0	1

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	6	0	6
Referral to Other Services	46	0	46
Referral to Other Victim Services	0	0	0
Victim Notification	6	0	6

**Services to Victims of Elder Abuse Grant  
FY24-25 1st Quarter Report (St. Joseph County)  
Continued**

<b>Personal Advocacy</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Child/Dependent Assistance	0	0	0
Emergency Medical Care	2	0	2
Individual Advocacy	41	0	41
Intervention with Person or Institutions	49	0	49
Law Enforcement Interview	0	0	0
Transportation	14	0	14

<b>Emotional Support or Safety Services</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Crisis Intervention	4	0	4
Emergency Financial Assistance	1	0	1

<b>Shelter/Housing Services</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Relocation Assistance	135	0	135
Transitional Housing	7	0	7

<b>Criminal Justice Assistance</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Criminal Advocacy	0	0	0
Law Enforcement Interview	0	0	0
Notification of Criminal Justice Event	6	0	6
Other Emergency Assistance	0	0	0
Personal Protective Order	0	0	0
Prosecution Interview	0	0	0
Restitution Assistance	0	0	0
Victim Impact Statement	0	0	0



## Services to Victims of Elder Abuse Grant FY24-25 1st Quarter Report (Branch County)

10/1/2024 to 12/31/2024

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

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

570 Marshall Road, Coldwater, MI 49036

[www.bhsj.org/aaa](http://www.bhsj.org/aaa)

Office: (517) 278-2538

Toll Free (888) 615-8009

### For additional information or questions please contact:

Toni Laughlin

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

Wendy Nowicke

Ph: (517) 933-3070 Email: [nowickew@bhsj.org](mailto:nowickew@bhsj.org)

Demographics - New Clients	Total	Previous Qtr. Totals	YTD
Black/African-American	0	0	0
Hispanic/Latino	0	0	0
Caucasian/Non-Latino	9	0	9
Female	7	0	7
Male	3	0	3
Vulnerable: Age 18-59	2	0	2
Elderly: Age 60 and Older	8	0	8
<b><u>New Clients Total</u></b>	<b>10</b>	<b>0</b>	<b>10</b>
<b><u>Continuing Clients</u></b>	<b>0</b>	<b>0</b>	<b>0</b>
<b><u>Total Clients Served</u></b>	<b>10</b>	<b>0</b>	<b>10</b>

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

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	2	0	2
Disability	8	0	8
Homeless	1	0	1
LGBTQ	0	0	0
Veteran	0	0	0

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	10	0	10
Referral to Other Services	31	0	31
Referral to Other Victim Services	0	0	0
Victim Notification	0	0	0



**Services to Victims of Elder Abuse Grant  
FY24-25 1st Quarter Report (Branch County)  
Continued**

<b>Personal Advocacy</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Child/Dependent Assistance	0	0	0
Emergency Medical Care	0	0	0
Individual Advocacy	18	0	18
Intervention with Person or Institutions	17	0	17
Law Enforcement Interview	7	0	7
Transportation	4	0	4

<b>Emotional Support or Safety Services</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Crisis Intervention	7	0	7
Emergency Financial Assistance	1	0	1

<b>Shelter/Housing Services</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Relocation Assistance	4	0	4
Transitional Housing	1	0	1

<b>Criminal Justice Assistance</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Criminal Advocacy	0	0	0
Law Enforcement Interview	4	0	4
Notification of Criminal Justice Event	7	0	7
Other Emergency Assistance	6	0	6
Personal Protective Order	3	0	3
Prosecution Interview	0	0	0
Restitution Assistance	2	0	2
Victim Impact Statement	0	0	0



## Services to Victims of Elder Abuse Grant FY24-25 1st Quarter Report (Both Counties)

10/1/2024 to 12/31/2024

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

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

570 Marshall Road, Coldwater, MI 49036

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**For additional information or questions please contact:**

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

Wendy Nowicke      Ph: (269) 501-2869      Email: nowickew@bhsj.org

Demographics - New Clients	Total	Previous Qtr. Totals	YTD
Black/African-American	1	0	1
Hispanic/Latino	0	0	0
Caucasian/Non-Latino	20	0	20
Female	12	0	12
Male	10	0	10
Vulnerable: Age 18-59	5	0	5
Elderly: Age 60 and Older	17	0	17
<b><u>New Clients Total</u></b>	<b>22</b>	<b>0</b>	<b>22</b>
<b><u>Continuing Clients</u></b>	<b>0</b>	<b>0</b>	<b>0</b>
<b><u>Total Clients Served</u></b>	<b>22</b>	<b>0</b>	<b>22</b>

Types of Victimization	Total	Previous Qtr. Totals	YTD
Arson	0	0	0
Bullying (Verbal, Cyber or Physical)	12	0	12
Domestic or Family Violence	8	0	8
Elder Abuse or Neglect	16	0	16
Identity Theft/Fraud/Financial Crime	8	0	8
Physical Assault	5	0	5
Robbery/Burglary	3	0	3
Sexual Assault	0	0	0
Survivors of Homicide	0	0	0
Multiple Victimizations	19	0	19

Special Classification	Total	Previous Qtr. Totals	YTD
Deaf/Hard of Hearing	6	0	6
Disability	20	0	20
Homeless	8	0	8
LGBTQ	1	0	1
Veteran	1	0	1

Direct Services	Total	Previous Qtr. Totals	YTD
Crime Victims Compensation	0	0	0
Information about Criminal Justice	16	0	16
Referral to Other Services	77	0	77
Referral to Other Victim Services	0	0	0
Victim Notification	5	0	5

**Services to Victims of Elder Abuse Grant  
FY24-25 1st Quarter Report (Both Counties)  
Continued**

<b>Personal Advocacy</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Child/Dependent Assistance	2	0	2
Emergency Medical Care	2	0	2
Individual Advocacy	59	0	59
Intervention with Person or Institutions	66	0	66
Law Enforcement Interview	7	0	7
Transportation	18	0	18
<b>Emotional Support or Safety Services</b>		<b>Previous Qtr. Totals</b>	<b>YTD</b>
Crisis Intervention	11	0	11
Emergency Financial Assistance	2	0	2

<b>Shelter/Housing Services</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Relocation Assistance	139	0	139
Transitional Housing	8	0	8

<b>Criminal Justice Assistance</b>	<b>Total</b>	<b>Previous Qtr. Totals</b>	<b>YTD</b>
Criminal Advocacy	0	0	0
Law Enforcement Interview	4	0	4
Notification of Criminal Justice Event	11	0	11
Other Emergency Assistance	6	0	6
Personal Protective Order	3	0	3
Prosecution Interview	0	0	0
Restitution Assistance	2	0	2
Victim Impact Statement	0	0	0



STATE OF MICHIGAN

GRETCHEN WHITMER  
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

ELIZABETH HERTEL  
DIRECTOR

December 27, 2024

Rebecca Burns  
Health Officer  
Branch-St. Joseph Area Agency on Aging  
570 N. Marshall Road  
Coldwater, MI 49036

Dear Ms. Burns:

The Behavioral and Physical Health and Aging Services Administration, Bureau of Aging, Community Living, and Supports (ACLS Bureau), has reviewed Branch-St. Joseph Area Agency on Aging's (AAA) final Area Plan Grant Budget for Fiscal Year (FY) 2024, dated November 26, 2024, for the following points:

- Mathematical accuracy
- Reasonableness of costs
- Agreement with amounts shown on the Statement of Grant Award
- Match requirements
- Services listed in the approved FY 2024 area plan
- Program requirements (including evidence-based programs funded with Title III-D)

As a result of this review, your budget has been approved and supersedes all previous budgets for FY 2024.

If you have any questions, please contact your assigned Aging Network Support (ANS) Section Regional Aging Representative, Ashley Ellsworth, at [ellswortha2@michigan.gov](mailto:ellswortha2@michigan.gov) or 517-294-9680.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Masterson".

Cindy Masterson, Director  
Operations & Aging Network Support Division

CM:ae

c: Jared Hoffmaster, Board Chair, Branch-St. Joseph AAA  
Laura Sutter, AAA Director, Branch-St. Joseph AAA  
Amy Colletti, Manager, Financial Quality & Grant Support Section  
Jen Hunt, Manager, ANS Section  
Ashley Ellsworth, Regional Aging Representative, ANS Section

## **Personal Health and Disease Prevention: January 23, 2025**

**Heidi Hazel, BSN, RN**

### **Communicable Disease:**

Data from our regional epi's for the end of December.

Here is a link to the Seasonal Respiratory Viruses dashboard. [MDHHS Seasonal Respiratory Viruses Dashboard](#).

**Influenza:** Emergency Department (ED) visits for Influenza-Like Illness (ILI) had increased steadily from October through November and increased more quickly during December. The chief complaints were fever, chills and sore throat and/or cough. Our current ILI level is high so cases are increasing.

Pediatric deaths: Nationally, there have been 17 influenza associated deaths and zero for Michigan.

Michigan's goal is to have 4 million residents vaccinated for this season and as of January 4<sup>th</sup>, we are at 61% towards that goal.

**RSV:** ED visits for RSV increased steadily in mid-December but activity is lower this year compared to the same time last year. RSV peak season is usually from late December to mid-February. Cases are currently increasing in Michigan.

**COVID:** Cases decreased from September through October and remained at lower levels through November. Cases have increased starting in early December but are lower than this time last year.

We have been working with a local nursing facility to help them manage a recent outbreak. They had 26 residents and 19 staff diagnosed with COVID-19. During this time, they also had 3 staff with Influenza A and 1 staff member with RSV.

**NOROVIRUS:** Michigan is seeing an increase in Norovirus cases. Peak season is from December to March. The total 2024-2025 reported outbreaks is above the range from previous years.

### **Immunizations/STD/HIV:**

Our Supervisors have been working with our providers to schedule their Vaccine for Children (VFC) compliance visits. This is an assessment of a provider's compliance with the VFC Program. This includes a review of charts, policies, and the storage and handling of the vaccines. Additionally, a Quality Improvement component will be included in some visits, which requires a 2, 6 and 12 month follow up.

St. Joseph County has noticed an uptick in Syphilis cases. These cases include both homosexual and heterosexual patients. According to the state, there are other areas in Michigan that are experiencing this.

Staff Updates:

We recently filled our Part time Communicable Disease Nurse position. We are still looking for a Mobile Unit RN.

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

St. Joseph County partnered with Beacon Health to improve health outcomes in the community by offering \$10 gift cards to clients attending their WIC recertifications. The latest report, covering July through November 2024, shows a slight increase in participation. In July, Three Rivers had 830 participants and Sturgis had 712. By November, Three Rivers had grown to 884 participants, while Sturgis increased to 725.

**Children's Special Health Care Services (CSHCS), Hearing/Vision and KOHA:**

CSHCS:

The Family Center for Children and Youth with Special Health Care Needs is once again accepting applications for Camp Scholarships. As the statewide parent-directed center within Children's Special Health Care Services, the Family Center offers camps tailored to children with specific diagnoses. These summer camps provide children and youth with special health care needs the chance to engage with their community, develop a sense of belonging, build relationships, and enjoy fun activities in a safe, supportive environment. Families can contact CSHCS for more information and to obtain a scholarship application.

HEARING AND VISION:

We have hired a part-time hearing and vision technician for Branch County. She has started her training to be state certified in hearing testing. She will do her vision certification in September.

KOHA:

Our hygienist has been visiting schools and is getting acclimated to the new program. As this is a new program for us, she is making adjustments to improve the flow and effectiveness of her visits.

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

Confirmed & Probable Case Totals	Dec-24				FYTD 2024-2025 (Oct-Sept)				FYTD 2023-2024 (Oct-Sept)			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	-	3	-	3	2	9	-	11	1	10	2	13
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	1	1	1	3	3	1	4	8	4	4	2	10
Chicken Pox	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia	3	9	14	26	13	24	59	96	27	18	50	95
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	-	-	2	2	1	5
Dengue Fever	-	-	-	-	-	-	-	-	-	1	1	2
Giardiasis	-	-	-	-	-	-	1	1	-	2	-	2
Gonorrhea	-	1	5	6	2	3	12	17	8	8	8	24
H. Influenzae Disease - Inv.	-	-	1	1	-	1	1	2	1	-	-	1
Hepatitis B - Acute	-	-	1	1	-	-	2	2	1	-	-	1
Hepatitis B - Chronic	1	-	-	1	1	-	-	1	-	-	1	1
Hepatitis C - Acute	-	-	-	-	-	-	-	-	-	-	1	1
Hepatitis C - Chronic	-	2	-	2	-	3	3	6	2	4	5	11
Hepatitis C Unknown	-	-	-	-	-	-	-	-	-	-	-	-
Histoplasmosis	-	-	-	-	-	-	-	-	1	-	1	2
HIV/AIDS	-	-	-	-	1	-	-	1	1	-	1	2
Influenza	61	5	18	84	61	5	23	89	40	5	49	94
Latent TB	-	-	-	-	-	-	-	-	-	-	-	-
Legionellosis	-	1	-	1	-	1	-	1	-	-	-	-
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Lyme Disease	-	1	-	1	2	2	3	7	-	1	4	5
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	-	-	-	-	1	-	1	-	-	1	1
Menengitis - Bacterial	-	-	-	-	1	-	-	1	-	-	1	1
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	1	-	1	3	1	-	4	1	1	3	5
Norovirus	-	-	-	-	-	-	-	-	-	-	-	-
Novel Coronavirus	52	143	53	248	101	217	86	404	375	461	260	1,096
Pertussis	-	5	1	6	6	8	1	15	-	-	-	-
RSV	-	2	-	2	-	-	-	-	-	-	-	-
Salmonellosis	1	-	2	3	1	-	2	3	3	-	-	3
Shiga Toxin-prod. (STEC)	-	-	-	-	-	1	-	1	-	1	-	1
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	-	1	1	-	-	1	1	1	-	-	1
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	1	-	-	1	1	-	-	1	2	3	-	5
Strep Pneumonia Inv Ds.	-	-	-	-	-	1	-	1	1	2	4	7
Syphilis - Primary	-	-	-	-	-	-	3	3	-	-	-	-
Syphilis - Secondary	-	-	-	-	1	-	1	2	-	-	-	-
Syphilis To Be Determined	-	-	4	4	-	3	7	10	-	1	-	1

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

Confirmed & Probable Case Totals	Nov-24				FYTD 2024-2025 (Oct-Sept)				FYTD 2023-2024 (Oct-Sept)			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	-	2	-	2	2	6	-	8	1	9	1	11
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	-	-	1	1	2	-	3	5	4	3	2	9
Chicken Pox	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia	4	6	20	30	10	15	45	70	20	13	30	63
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	-	-	1	1	1	3
Creutzfeldt-Jakob Disease	-	-	1	-	-	-	1	1	-	-	-	-
Cryptosporidiosis	-	-	-	-	-	-	-	-	-	1	-	1
Giardiasis	-	-	-	-	-	-	1	1	-	2	-	2
Gonorrhea	1	-	2	3	2	2	7	11	8	3	7	18
H. Influenzae Disease - Inv.	-	-	-	-	-	1	-	1	-	-	-	-
Hepatitis B - Acute	-	-	1	1	-	-	1	1	1	-	-	1
Hepatitis B - Chronic	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis C - Acute	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis C - Chronic	-	1	-	1	-	1	3	4	1	4	5	10
Hepatitis C Unknown	-	-	-	-	-	-	-	-	-	-	-	-
Histoplasmosis	-	-	-	-	-	-	-	-	1	-	1	2
HIV/AIDS	-	-	-	-	1	-	-	1	1	-	-	1
Influenza	-	-	2	2	-	-	5	5	22	-	10	32
Kawasaki	-	-	-	-	-	-	-	-	-	-	-	-
Legionellosis	-	-	-	-	-	-	-	-	-	-	-	-
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Lyme Disease	1	-	1	2	2	1	3	6	-	1	4	5
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	-	-	-	-	1	-	1	-	-	-	-
Menengitis - Bacterial	-	-	-	-	1	-	-	1	-	-	1	1
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	-	-	-	3	-	-	3	1	1	1	3
Norovirus	-	-	-	-	-	-	-	-	-	-	-	-
Novel Coronavirus	29	35	19	83	49	74	33	156	160	194	129	483
Pertussis	5	1	-	6	6	3	-	9	-	-	-	-
Salmonellosis	-	-	-	-	-	-	-	-	3	-	-	3
Shiga Toxin-prod. (STEC)	-	1	-	1	-	1	-	1	-	1	-	1
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	-	-	-	-	-	-	-	1	-	-	1
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	-	-	-	-	-	-	1	1	-	2
Strep Pneumonia Inv Ds.	-	1	-	1	-	1	-	1	1	1	3	5
Syphilis - Primary	-	-	1	1	-	-	3	3	-	-	-	-
Syphilis - Secondary	-	-	-	-	1	-	1	2	-	-	-	-
Syphilis To Be Determined	-	1	1	2	-	3	3	6	-	1	-	1



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

	Dec-24					YTD 2024-2025					YTD 2023-2024				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
<b>CHILD IMMUNIZATIONS</b>															
# Vaccines Given CHA	123	100	38	12	273	1,259	696	120	1,175	3,250	484	426	220	215	1,345
All VFC Doses Given	759	395	-	434	1,588	1,692	928	157	1,322	4,099	2,575	1,246	-	2,226	6,047
Waivers	6	5	-	8	19	44	50	6	44	144	66	50	1	44	161
<b>ADULT IMMUNIZATIONS</b>															
# Vaccines Given CHA	46	9	24	7	86	137	63	42	38	280	376	87	16	118	597
All AVP Doses Given	10	8	-	9	27	224	82	14	71	391	70	103	-	22	195
<b>COMMUNICABLE DISEASE</b>															
TB Tests Done	1	1	-	3	5	14	19	-	9	42	10	16	1	3	30
STD treatments	1	1	-	18	20	3	3	-	36	42	2	12	-	59	73
HIV Testing	-	3	-	11	14	2	7	-	27	36	-	3	-	18	21
<b>ENROLLMENTS</b>															
Medicaid & Michild	2	1	-	-	3	6	1	-	-	7	8	6	-	-	14
<b>REFERRAL SERVICE</b>															
MCDC Referrals	4	2	14	12	32	14	6	36	45	101	19	33	42	4	98
MIHP referrals	1	-	46	51	98	1	-	145	178	324	2	1	46	46	95
<b>Hearing Screens</b>															
Pre-school	-	-	-	15	15	199	82	-	64	345	35	29	-	44	108
School Age	12	64	-	106	182	556	665	619	285	2,125	320	687	-	1,247	2,254
<b>Vision Screens</b>															
Pre-school	-	-	-	18	18	189	80	-	54	323	75	15	-	38	128
School Age	36	138	-	422	596	738	846	-	1,229	2,813	751	1,096	-	1,298	3,145
<b>Children's Special Health Care Services</b>															
Diagnostics	2	1	-	-	3	5	2	-	-	7	8	3	-	-	11
Assessments-Renewal	22	27	-	16	65	68	75	-	81	224	66	70	-	86	222
Assessments-New	9	5	-	1	15	24	20	-	8	52	15	9	-	14	38

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

	Nov-24					YTD 2024-2025					YTD 2023-2024				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
<b>CHILD IMMUNIZATIONS</b>															
# Vaccines Given CHA	96	109	82	69	356	1,136	596	82	1,163	2,977	364	329	193	169	1,055
All VFC Doses Given	732	287	-	753	1,772	933	533	157	888	2,511	1,921	903	-	1,662	4,486
Waivers	6	7	3	12	28	38	45	6	36	125	64	50	1	42	157
<b>ADULT IMMUNIZATIONS</b>															
# Vaccines Given CHA	49	17	18	26	110	91	54	18	31	194	317	71	13	102	503
All AVP Doses Given	15	17	-	11	43	214	74	14	62	364	46	92	-	18	156
<b>COMMUNICABLE DISEASE</b>															
TB Tests Done	11	8	-	-	19	13	18	-	6	37	8	16	1	2	27
STD treatments	-	-	-	11	11	2	2	-	18	22	2	10	-	54	66
HIV Testing	2	-	-	5	7	2	4	-	16	22	-	1	-	12	13
<b>ENROLLMENTS</b>															
Medicaid & Michild	3	-	-	-	3	4	-	-	-	4	7	3	-	-	10
<b>REFERRAL SERVICE</b>															
MCDC Referrals	4	-	12	15	31	10	4	22	33	69	16	25	32	4	77
MIHP referrals	-	-	30	47	77	-	-	99	127	226	2	1	36	36	75
<b>Hearing Screens</b>															
Pre-school	-	-	-	13	13	199	82	-	49	330	35	29	-	44	108
School Age	438	322	-	179	939	544	601	619	179	1,943	271	537	-	1,078	1,886
<b>Vision Screens</b>															
Pre-school	-	-	-	13	13	189	80	-	36	305	75	15	-	38	128
School Age	581	249	-	263	1,093	702	708	-	807	2,217	508	751	-	1,166	2,425
<b>Children's Special Health Care Services</b>															
Diagnostics	1	1	-	-	2	3	1	-	-	4	8	1	-	-	9
Assessments-Renewal	25	13	-	28	66	46	48	-	65	159	46	51	-	68	165
Assessments-New	6	6	-	2	14	15	15	-	7	37	10	7	-	10	27

State Participation/Enrollment Ratio [2]:

Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Curr Year P/E Ratio (last 12 months)
95.3%	95.6%	96.3%	96.0%	96.2%	94.7%

Months	Enrollment [3]	Initial Participation [4]	Closeout Participation [5]	% Change in Participation [6]	Participation/Enrollment Ratio[2]
Oct / 2023	4,263	3,999	4,039		93.81%
Nov / 2023	4,252	3,953	4,007	-0.79%	92.97%
Dec / 2023	4,201	3,849	3,931	-1.90%	91.62%
Jan / 2024	4,262	3,916	3,989	1.48%	91.88%
Feb / 2024	4,269	3,953	3,997	0.20%	92.60%
Mar / 2024	4,271	3,941	3,997	0.00%	92.27%
Apr / 2024	4,305	3,984	4,024	0.68%	92.54%
May / 2024	4,316	3,959	3,992	-0.80%	91.73%
Jun / 2024	4,333	3,929	4,006	0.35%	90.68%
Jul / 2024	4,390	4,029	4,075	1.72%	91.78%
Aug / 2024	4,412	4,054	4,096	0.52%	91.89%
Sep / 2024	4,389	4,067	4,110	0.34%	92.66%
Oct / 2024	4,449	4,160	4,195	2.07%	93.50%
Nov / 2024	4,450	4,161	4,211	0.38%	93.51%
Dec / 2024	4,441	4,138	(est[7]) 4,259		93.18%
Jan / 2025	0	0	(est[7]) 4,221		
Feb / 2025	0	0	0		
Mar / 2025	0	0	0		
Apr / 2025	0	0	0		
May / 2025	0	0	0		
Jun / 2025	0	0	0		
Jul / 2025	0	0	0		
Aug / 2025	0	0	0		
Sep / 2025	0	0	0		

Total (Year to date)	13,340	12,459	8,406		
Curr Year Avg	4,447	4,153	4,203	299.07%	92.44%
Months with Count	3	3	2	2	3
Average to Base % [8]		107.3%	108.58%		
Last yrs Base % [9]		106.7%	108.12%		
Last yrs Average	4,305	3,969	4,022		92.20%

Estimated average participation for current year to date:

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

4,222
4,203

**Funding Allocation Information**

Total Funding Allocation:	\$908,156
Assigned Funding Participation Count [11]:	
Current Yr Base:	3,871
Previous Yr Base:	3,720

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

**Branch-Hillsdale-St Joseph Community Health Agency**

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 12/1/2024 Through 12/31/2024

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Accident Fund	125.00	24-12-27 P.01	12/27/2024
ACD.NET	1,903.57	54653	12/13/2024
Aflac District Office	497.27	24-12-06 PR.01	12/6/2024
Aflac District Office	497.27	24-12-20 PR.01	12/20/2024
Alert Medical Alarms	224.60	54654	12/13/2024
Alerus Retirement Solutions	3,401.00	24-12-06 R.01	12/6/2024
Alerus Retirement Solutions	3,401.00	24-12-20 R.01	12/20/2024
Amazon Capital Services, Inc	197.78	24-12-13 P.01	12/13/2024
Amazon Capital Services, Inc	2,317.14	24-12-27 P.02	12/27/2024
Angela Shedd	1,309.88	24-12-13 A.01	12/13/2024
Angela Shedd	2,115.66	24-12-27 A.01	12/27/2024
Area Agencies On Aging Mich.	2,477.50	24-12-27 A.02	12/27/2024
Barbara P. Foley	46.16	54639	12/6/2024
Barbara P. Foley	46.16	54664	12/20/2024
Beacon Properties Administration	4,631.85	24-12-27 A.03	12/27/2024
Blue Cross Blue Shield	59,949.68	24-12-27 P.03	12/27/2024
Branch Area Transit Authority	1,566.48	24-12-13 A.02	12/13/2024
Branch County Commission	27,451.79	24-12-13 A.03	12/13/2024
Branch County Complex	5,694.28	24-12-27 A.04	12/27/2024
Card Services Center	1,904.96	24-12-27 P.04	12/27/2024
CDW GOVERNMENT INC.	153.95	24-12-13 A.04	12/13/2024
CDW GOVERNMENT INC.	426.18	24-12-27 A.05	12/27/2024
Century Bank - Hillsdale Maintenance	2,000.00	24-12-27 A.06	12/27/2024
Century Bank - Three Rivers Maintenance	2,000.00	24-12-27 A.07	12/27/2024
Century Basic	957.53	24-12-06 R.02	12/6/2024
Century Basic	957.82	24-12-20 R.02	12/20/2024
Century EFPTS	22.96	24-12-06 L.01	12/6/2024
Century EFPTS	25,130.24	24-12-06 R.03	12/6/2024
Century EFPTS	135.33	24-12-20 L.01	12/20/2024
Century EFPTS	25,315.91	24-12-20 R.03	12/20/2024
Century EFPTS	3,509.50	24-12-20 S.01	12/20/2024
Century EFPTS	12.70	24-12-23 R.01	12/23/2024
Century Mastercard	1,100.60	24-12-13 P.03	12/13/2024
Century MERS	55,707.72	24-12-13 A.05	12/13/2024
Century MERS	22,590.00	24-12-27 A.08	12/27/2024
Century State/Michigan State Treasury	4,538.66	24-12-06 R.04	12/6/2024
Century State/Michigan State Treasury	18.55	24-12-20 L.02	12/20/2024
Century State/Michigan State Treasury	4,574.36	24-12-20 R.04	12/20/2024
Century State/Michigan State Treasury	596.65	24-12-20 S.02	12/20/2024
Century State/Michigan State Treasury	3.53	24-12-23 R.02	12/23/2024
Charter Communications	149.98	24-12-13 P.04	12/13/2024
Cintas Corporation Loc 351	141.08	24-12-13 P.05	12/13/2024
City Of Coldwater	60.00	24-12-27 A.09	12/27/2024
ConnectAmerica	114.00	24-12-13 A.06	12/13/2024
Crossroads Home Care Inc.	1,630.71	24-12-13 A.07	12/13/2024
CSHCS	360.00	54655	12/13/2024
CSHCS	240.00	54656	12/13/2024
CSHCS	360.00	54657	12/13/2024
CSHCS	360.00	54667	12/27/2024
Current Office Solutions	2,304.65	24-12-13 A.08	12/13/2024
DELTA DENTAL	4,152.01	24-12-27 A.10	12/27/2024
DiningRD	3,378.84	24-12-13 A.09	12/13/2024

**Branch-Hillsdale-St Joseph Community Health Agency**

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 12/1/2024 Through 12/31/2024

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
DL Gallivan Office Solutions	633.72	54668	12/27/2024
Docuphase	2,916.28	24-12-27 A.11	12/27/2024
Dr. Karen M. Luparello	4,225.53	24-12-27 A.12	12/27/2024
Frontier	292.79	24-12-27 P.05	12/27/2024
GDI Services Inc.	4,688.98	24-12-27 A.13	12/27/2024
Glaxo-Smithkline Financial Inc.	906.91	24-12-27 A.14	12/27/2024
Griffiths Mechanical Contracting, Inc.	540.00	24-12-27 A.15	12/27/2024
Health Equity	1,810.84	24-12-06 PR.02	12/6/2024
Health Equity	1,810.84	24-12-20 PR.02	12/20/2024
Hedgerow Software US, Inc.	13,000.00	24-12-13 A.10	12/13/2024
Helping Angels Home Care LLC	1,309.28	24-12-13 A.11	12/13/2024
Hillsdale County Treasurer	1,593.75	24-12-13 A.12	12/13/2024
Hillsdale Hospital	221.55	54658	12/13/2024
Home Roots Companion & Home Care Services LLC	160.32	24-12-13 A.13	12/13/2024
HomeJoy of Kalamzoo	2,417.31	24-12-13 A.14	12/13/2024
Indiana MI Power Company	763.42	24-12-13 P.06	12/13/2024
Indiana State Tax	96.14	24-12-06 R.05	12/6/2024
Indiana State Tax	96.14	24-12-20 R.05	12/20/2024
JeneRose Domincel	142.42	54659	12/13/2024
Laboratory Corporation of America	59.30	24-12-13 A.15	12/13/2024
LAURA SUTTER	96.16	24-12-27 A.16	12/27/2024
Legal Services Of S.Central MI	1,000.00	24-12-13 A.22	12/13/2024
LHD Academy of Science LLC	1,000.00	54660	12/13/2024
Macquarie Equipment Capital Inc.	1,322.75	24-12-27 A.17	12/27/2024
MALEHA	70.00	54669	12/27/2024
Maplecrest, LLC	1,265.08	24-12-27 A.18	12/27/2024
McKesson Medical-Surgical Gov. Solutions LLC	197.26	24-12-13 P.07	12/13/2024
McKesson Medical-Surgical Gov. Solutions LLC	2,852.43	24-12-27 P.06	12/27/2024
Medical Care Alert	439.05	24-12-13 A.16	12/13/2024
Merck Sharp & Dohme LLC	2,726.59	54670	12/27/2024
MERS 5% EMPLOYEES	5,860.85	24-12-13 A.17	12/13/2024
MI Municipal Risk Management Authority	10,811.00	24-12-27 A.19	12/27/2024
Michigan Gas	52.29	24-12-27 P.07	12/27/2024
Michigan State Disbursement Unit	190.11	54640	12/6/2024
Michigan State Disbursement Unit	190.11	54665	12/20/2024
Mistel de Varona	1,282.50	54671	12/27/2024
Nationwide	620.00	24-12-06 R.06	12/6/2024
Nationwide	620.00	24-12-20 R.06	12/20/2024
Nissley Disposal Inc	110.00	24-12-13 P.08	12/13/2024
PFIZER INC	6,506.80	54672	12/27/2024
Pitney Bowes Inc.	757.17	24-12-13 P.09	12/13/2024
Principal Life Insurance Company	1,900.48	24-12-27 P.08	12/27/2024
ProAssurance Indemnity Company, Inc	718.00	24-12-13 P.10	12/13/2024
Prompt Care Express PC	284.00	54661	12/13/2024
Richard Clark	2,500.31	24-12-27 A.20	12/27/2024
Riley Pumpkin Farm	1,745.00	24-12-27 A.21	12/27/2024
Rosati Schultz Joppich Amtsbueshler	585.00	24-12-27 A.22	12/27/2024
Sanofi Pasteur Inc.	0.00	24-12-27 P.09	12/27/2024
Semco Energy	176.17	24-12-27 P.10	12/27/2024
Shaffmasters U-Stor-n-Lock	150.00	24-12-27 A.23	12/27/2024

**Branch-Hillsdale-St Joseph Community Health Agency**

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 12/1/2024 Through 12/31/2024

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Shred It	90.00	24-12-13 P.11	12/13/2024
St Joseph County COA	31,818.09	24-12-13 A.18	12/13/2024
St Joseph County Transit Authority	2,853.90	24-12-13 A.19	12/13/2024
Staples	111.08	24-12-13 P.12	12/13/2024
Staples	10.89	24-12-27 P.11	12/27/2024
State of Michigan - MDHHS	417,245.08	54673	12/27/2024
State of Michigan-Dept	34.50	54662	12/13/2024
State of Michigan-Dept	103.50	54674	12/27/2024
Stephanie Hough	33.80	54675	12/27/2024
Thurston Woods Village	399.50	54663	12/13/2024
TMK Worldwide, LLC	165.30	24-12-13 A.20	12/13/2024
Velocity Investments C/O Timothy Baxter & Associates	498.36	54641	12/6/2024
Velocity Investments C/O Timothy Baxter & Associates	490.61	54666	12/20/2024
Verizon	1,093.73	24-12-13 P.13	12/13/2024
VRI INC.	108.00	24-12-13 A.21	12/13/2024
Wal-Mart Community	87.77	24-12-13 P.14	12/13/2024
Webster Electric	1,500.00	24-12-27 A.24	12/27/2024
Report Total	823,121.23		

Branch-Hillsdale-St Joseph Community Health Agency  
Balance Sheet - Unposted Transactions Included In Report  
As of 12/31/2024

	Current Period Balance
<b>Assets</b>	
Cash on Hand	14,703.88
Cash with County Treasurer	4,091,050.75
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	38,450.00
Cash TR Building Maintenance	63,049.40
Accounts Receivable	75,377.50
Due from Dental DAPP	1,275.67
Due from State	(799,448.98)
Due from Other Funding Sources	155,166.93
Prepaid Expenses	187,722.57
Biologic Inventory	173,437.19
<b>Total Assets</b>	4,310,740.85
<b>Liabilities</b>	
Accounts Payable	193,466.62
Payroll Liabilites	196,908.53
Deferred Revenue	271,982.71
Biologics	173,437.19
<b>Total Liabilities</b>	835,795.05
<b>Net Assets</b>	
Operation Fund Balance	353,740.20
Restricted Fund Balance	360,280.76
Designated Fund Balance	2,760,924.84
<b>Total Net Assets</b>	3,474,945.80
<b>Total Liabilities and Net Assets</b>	4,310,740.85



Branch-Hillsdale-St Joseph Community Health Agency  
Statement of Revenues and Expenditures - Amend 1 - Expense By Program - Summary New - Unposted Transactions  
Included In Report  
From 12/1/2024

**12 Month Grants Should be 25.00% Expended, 9 Month Grants Should be 33.33%** % Total

RU Description	Current Month	Year to Date	Total Budget - Expende Amendment1	d
024 MERS Pension Underfunded Liability Over budget due to one time payment of \$22,590 already completed for the year. Will fall back in line as the year progresses.	22,590.00	30,620.72	44,590.00	68.67%
717 EGLE Swimming Pools Over budget due to extra staff time for training. This will fall more in line as the year progresses, but we will continue to monitor and adjust at the next amendment if necessary.	3,136.89	11,185.00	16,652.59	67.16%
210 Beacon Health Grant ends in May 2025, this will fall back in line as the year progresses.	1,828.70	12,109.55	20,000.00	60.54%
720 EH- Complaints Increased activity. We will continue to monitor and may need to address at the next amendment.	1,184.28	3,142.79	6,109.89	51.43%
008 Salary & Fringe Payoff Over budget due to yearly pay out of sick time. This will fall in line as the year progresses.	15,055.85	36,545.50	80,000.00	45.68%
010 Agency Support Within budget, but one-time revenues prevent expenses from being spread to the programs through indirect. This will fall back in line as the year progresses.	8,362.60	49,657.22	126,220.00	39.34%
325 CSHCS Slightly over budget - RU 325 must be fully expended before RU 112 can be used. When looking at these 2 budgets together they are currently at 25.14%. Will continue to monitor.	26,178.80	75,644.71	222,409.00	34.01%
719 Body Art Over budget due to extra staff time for training. This will fall more in line as the year progresses, but we will continue to monitor and adjust at the next amendment if necessary.	296.74	1,944.62	6,259.47	31.06%
332 HIV Prevention Over budget due to increased staff time. Should fall in line as the year progresses.	1,793.40	7,546.67	25,498.93	29.59%
107 Medicaid Outreach Over budget due to increased staff time. Should fall in line as the year progresses.	829.77	4,244.29	14,928.97	28.42%
605 General EH Services Over budget due to one time equipment purchase and staff training that will be moved to another program. Should fall back in line as the year progresses.	3,061.66	9,150.48	32,660.38	28.01%

Branch-Hillsdale-St Joseph Community Health Agency  
Statement of Revenues and Expenditures - Amend 1 - Expense By Program - Summary New - Unposted Transactions  
Included In Report  
From 12/1/2024

RU	Description	Month	Year to Date	Total Budget - Expende Amendment1	d
138	Immunization IAP Over budget, due to increased staff time and activity. We will continue to monitor and adjust at the next budget amendment if necessary.	96,702.99	355,198.98	1,300,401.52	27.31%
714	Onsite Sewage Disposal	40,403.92	118,163.51	477,364.15	24.75%
329	MCH Enabling Children	7,867.42	23,602.25	99,409.00	23.74%
327	Hearing (ELPHS)	8,711.82	29,159.25	123,035.71	23.69%
341	Infectious Disease	31,927.17	88,440.90	376,327.24	23.50%
109	WIC	93,277.52	273,236.93	1,166,245.37	23.42%
014	VOCA	16,599.61	48,062.65	205,743.40	23.36%
326	Vision (ELPHS)	9,117.61	29,108.00	124,893.05	23.30%
108	WIC Breastfeeding	11,592.26	32,737.28	140,989.60	23.21%
021	Dental Clinic - Three Rivers	4,631.85	13,895.55	60,000.00	23.15%
331	STD	15,472.65	39,881.50	176,115.32	22.64%
207	MCRH Community Health Workers	6,954.34	26,141.64	115,599.08	22.61%
704	Food Service	52,077.69	139,054.33	616,146.78	22.56%
338	Immunization Vaccine Handling	6,165.85	20,115.79	89,356.68	22.51%
032	Emergency Preparedness	13,161.25	40,115.74	182,953.96	21.92%
721	Drinking Water Supply	35,794.09	97,611.03	453,011.68	21.54%
255	Community Health Direction	20,718.57	30,122.21	150,000.00	20.08%
012	Area Agency on Aging	101,109.97	307,773.53	1,582,916.42	19.44%
345	Lead Testing	2,872.14	8,983.00	48,328.50	18.58%
029	Dental Clinic - Hillsdale	746.46	2,225.41	12,000.00	18.54%
201	CSF Carseats	1,465.58	5,560.05	30,779.56	18.06%
405	Grant Writing	548.44	548.44	3,246.50	16.89%
202	Oral Health	4,446.85	12,672.81	84,585.50	14.98%
205	OHSP Grant	5,419.66	12,186.87	82,583.69	14.75%
286	HEP Special Projects	779.75	1,755.06	15,565.22	11.27%
722	PFAS Response	178.39	337.98	3,000.09	11.26%
745	Type II Water	9,596.91	24,588.80	220,763.05	11.13%
096	CSHCS Donations SJ	0.00	2,223.72	20,574.31	10.80%
363	363 CVDIMS Covid Immz Supplemental	2,515.22	12,897.90	135,349.60	9.52%
101	Workforce Development	3,410.55	4,846.79	51,027.54	9.49%
097	CSHCS Donations BR HD	1,320.00	1,470.00	20,640.49	7.12%
718	EGLI Septage	64.09	389.98	6,309.81	6.18%
716	EGLI Campgrounds	88.87	516.94	18,377.23	2.81%
723	PFAS Response - White Pigeon	19.61	263.40	9,700.09	2.71%
351	CELC Infection Prevention	6,404.93	10,038.40	400,000.00	2.50%
724	PFAS - Westside Landfill	17.11	146.84	7,675.09	1.91%
355	COVID-19 PH Workforce Supplemental	8.69	407.47	66,263.00	0.61%
025	PH Workforce & Infrastructure	0.00	134.01	135,967.06	0.09%

Branch-Hillsdale-St Joseph Community Health Agency  
Statement of Revenues and Expenditures - Amend 1 - Expense By Program - Summary New - Unposted Transactions  
Included In Report  
From 12/1/2024

RU	Description	Current Month	Year to Date	Total Budget - Expend Amendment1	d
023	Capital Expenditures	0.00	0.00	78,000.00	0.00%
035	Vector Borne Disease Surveillance	1.42	1.42	61,338.75	0.00%
112	CSHCS Medicaid Outreach	0.00	0.00	78,501.57	0.00%
212	Medical Marijuana BR	0.00	0.00	17,732.37	0.00%
230	Medical Marijuana HD	0.00	0.00	9,666.18	0.00%
275	Medical Marijuana SJ	0.00	0.00	7,466.18	0.00%
715	EGLE Long-Term Monitoring	0.00	0.00	3,958.10	0.00%
015	Local Expenses - Unallowable by Grants	(557.91)	(257.21)	37,956.74	(0.67)%
	Total Total Expense	695,952.03	2,056,150.70	9,703,194.41	<u>21.19%</u>

**The Agency is currently 3.81% under budget.**

## January 15, 2025 – Board of Health Program, Policy, & Appeals Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Program, Policy, & Appeals Committee meeting was called to order by Committee-Chair, Brent Leininger, at 8:34 AM. Roll call was completed as follows: Brent Leininger, and Tim Stoll. Rusty Baker was absent.

Also present from BHSJ: Rebecca Burns, and Theresa Fisher

Mr. Stoll moved to approve the agenda as presented, with support from Mr. Leininger. The motion passed unopposed.

Public Comment: No public comments were given.

### New Business:

- Mr. Stoll moved to recommend that the full Board approve the updated Health Officer Evaluation Policy with support from Mr. Leininger. The motion passed by unanimous consent.
- The Board of Health meeting schedule was discussed, but no action was taken.
- Mr. Stoll moved to recommend that the full Board approve the proposed changes on page 25 and 26 of the Personnel Policy Manual, effective February 21, 2025 if no other legislation supersedes the current law, which is effective February 21, 2025 (MCL – Act 338 of 2018). The motion received support from Mr. Leininger and passed by unanimous consent.
- The Board of Health By-laws were discussed and proposed changes were recommended by unanimous consent. This item will be added to the full Board agenda as an informational item.
- Employee Recognitions were discussed, but no action was taken.

Public Comment: No public comments were given.

With no further business, the meeting was adjourned at 9:12 AM.

Respectfully Submitted by:



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

<b>Program:</b> Administration	<b>Effective Date:</b> 1/27/2022
<b>Subject:</b> Health Officer Evaluation Policy	<b>Revised Date:</b> <del>8/24/2023</del> <u>1/23/2025</u>

**Purpose:** The purpose of this policy is to define how the Health Officer will be evaluated.

**Authority:** Branch-Hillsdale-St. Joseph Community Health Agency Board of Health. Administrative policies shall be subject to revision or termination by the Board of Health at its discretion. This policy replaces and supersedes any prior policy on this subject matter.

**Responsibility:** The Board of Health or a designee appointed by the Board shall be responsible for the administration and enforcement of this policy.

**Policy Statement:**

The Board of Health shall evaluate the performance of the Health Officer annually at the September Board of Health meeting using the following process:

- The Secretary to the Board will provide each Commissioner assigned to the Board of Health with a link to the performance evaluation tool, after the Board of Health Meeting proceeding the evaluation.
- To validate responses for the purpose of quality control, each evaluation considered will require the author's name. Responses received with no name, or from anyone other than a current Board of Health member, will be discarded.
- Each evaluation response, in whole, will be provided in the evaluation packet for the Health Officer and the Board of Health Members. A composite of all responses will also be provided.
- The Board will be presented a copy of the annual employee satisfaction survey at least one month prior to the evaluation taking place.

Upon a satisfactory evaluation, the Board of Health may award merit pay per the negotiated contract with the Health Officer. The merit pay shall be voted on at the September meeting, and paid as a supplemental payroll charged to the fiscal year which the Health Officer was being evaluated on.

**Adopted: 8/24/2023**

## 2025 Board of Health Meetings

Board of Health Meetings are the 4<sup>th</sup> Thursday at 9 am of each month with the following exceptions: there is no meeting in October, and the November and December meetings are scheduled for the 2<sup>nd</sup> Thursday of the month. Board Education will begin immediately at the conclusion of the meeting and end by noon.

Date	Time	Location	Board Education Scheduled
January 23	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
February 27	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
March 27	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
April 24	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
May 22	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
June 26	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
July 24	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
August 28	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
September 25	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
November 13	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes
December 11	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	No
January 22, 2026	9:00 am	BHSJ, 570 Marshall Rd, Coldwater	Yes

### Board of Health Committees

**Finance Committee – 3 members, one from each county**

**Program, Policy & Appeals Committee – 3 members, one from each county**

**Committees are scheduled to meet as follows:**

**Finance Committee will meet at 9:00 AM on the following days:**

**January 17, February 14, March 17, April 21, May 19, June 16, July 21, August 18,  
September 15, November 3, December 1**

**Program, Policy, & Appeals Committee will meet at 8:30 AM on the following days:**

**January 15, February 19, March 19, April 16, May 21, June 18, July 16, August 20,  
September 17, November 5, December 3**

### BHSJCHA Administration

Health Officer: Rebecca A. Burns, MPH, RS o: 517-933-3040 c: 269-501-2503

Medical Director: Karen Luparello, DO

Director of Administration: Theresa Fisher, BS

Director of Personal Health & Disease Prevention: Heidi Hazel, BSN, RN

Director of Environmental Health: Joe Frazier, REHS

Director of Area Agency on Aging IIC: Laura Sutter, BS

**Approved by the Board of Health on December 12, 2024**

### **Proposed Motion:**

I move to approve the updated Personnel Policy Manual, to be effective February 21, 2025 if no other legislation supersedes the current law, which is effective February 21, 2025 (MCL – Act 338 of 2018).

### **Summary of Proposed Changes to the Personnel Policy Manual**

The Agency continuously strives to provide a comprehensive set of administrative policies. As part of this process, we routinely review the existing policy document to determine 1) if the policy is still relevant and needed, 2) whether the purpose or goal of the policy is being met, and 3) to determine if changes or clarifications are needed to ensure that staff and supervisors are understanding and administering the policies in the same manor across the entire Agency.

The changes summarized below are a compilation of changes that have been identified through routine business, programmatic audits, discussions with the agency's attorney, or issues that came up that were not clearly addressed in current policy.

- Page 25 – Updated Sick Leave Accrual Amount section to comply with the new law. These changes were reviewed/or drafted by the agency's attorney.
- Page 26 – Updated Sick Leave Maximum Accrual section to comply with the new law. These changes were reviewed/drafted by the agency's attorney.

## **PURPOSE OF THE PERSONNEL POLICY MANUAL**

This manual was developed to describe some of the expectations of our employees and to outline the policies, benefits, and procedures available to eligible employees. Employees should familiarize themselves with the contents of the Personnel Policy Manual as soon as possible, for it will answer many questions about employment with Branch-Hillsdale-St. Joseph Community Health Agency.

No personnel policy manual can anticipate every circumstance or question about policy. As time goes on, the need may arise and the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health reserves the right to revise, supplement, or rescind any policy or portion of the manual from time to time as it deems appropriate, in its sole and absolute discretion.

This Personnel Policy Manual supersedes any and all previous personnel policies created separately and collectively by the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health.

This Personnel Policy Manual shall be distributed to appropriate agency personnel at the time of hire. Copies of subsequent updates of this manual shall be provided to appropriate agency personnel as soon as possible after the adoption of such updates.

Board of Health  
Branch-Hillsdale-St. Joseph  
Community Health Agency



## Table of Contents

SECTION 1: DEVELOPMENT OF PERSONNEL POLICIES .....	5
A.    COMPOSITION OF THE PERSONNEL POLICY MANUAL COMMITTEE.....	5
B.    SELECTION OF OFFICE MEMBERS AND ALTERNATES .....	5
C.    MEETING SCHEDULE AND PROCEDURES OF THE COMMITTEE.....	5
D.    IMPLEMENTATION AND INTERPRETATION OF THE PERSONNEL POLICIES	6
SECTION 2: EMPLOYMENT POLICIES, PROCEDURES AND REQUIREMENTS.....	6
A.    EMPLOYMENT POLICIES.....	6
B.    PERSONNEL FILE PROCEDURE.....	9
C.    PERSONAL CONDUCT REQUIREMENTS .....	10
D.    EMPLOYEE CLASSIFICATIONS.....	12
E.    EMPLOYEE PROMOTION OR RECLASSIFICATION.....	13
F.    EMPLOYEE TRANSFER.....	13
G.    WORK RELATED TRAVEL.....	13
H.    STAFF DEVELOPMENT .....	14
SECTION 3: COMPENSATION POLICIES.....	16
A.    MONETARY COMPENSATION.....	16
B.    PAY PERIODS .....	16
C.    ADDITIONAL TIME POLICY.....	16
D.    LONGEVITY COMPENSATION .....	18
E.    JURY SERVICE .....	19
F.    457 DEFERRED COMPENSATION ACCOUNTS .....	19
G.    MERS RETIREMENT PROGRAM.....	20
H.    HEALTH CARE SAVINGS PLAN (MERS).....	20
I.    BASIC FLEX.....	20
J.    AFLAC.....	20
K.    REIMBURSEMENT FROM SOURCES OTHER THAN THE AGENCY .....	20
SECTION 4: INSURANCE BENEFITS .....	21
A.    HEALTH INSURANCE .....	21
B.    LIFE INSURANCE.....	21
C.    SHORT TERM DISABILITY INSURANCE .....	22
D.    UNEMPLOYMENT INSURANCE .....	22
E.    WORKER’S COMPENSATION.....	22
F.    PROFESSIONAL LIABILITY INSURANCE.....	23

G.	SOCIAL SECURITY .....	23
H.	COBRA REQUIREMENT .....	23
SECTION 5: EMPLOYEE LEAVE POLICIES.....		23
A.	VACATION LEAVE.....	23
B.	SICK LEAVE.....	24
C.	BEREAVEMENT LEAVE .....	26
D.	FAMILY AND MEDICAL LEAVE.....	27
E.	EDUCATIONAL LEAVE .....	31
F.	MILITARY LEAVE .....	31
SECTION 6: HOLIDAY POLICY.....		32
A.	HOLIDAY PAY.....	32
SECTION 7: TERMINATION PROCEDURES.....		33
A.	RESIGNATION .....	33
B.	DISCHARGE .....	33
C.	LAYOFF .....	33
D.	FURLOUGH DAYS .....	<u>3433</u>
E.	JOB ELIMINATION .....	34
F.	RETURN OF AGENCY PROPERTY.....	34
G.	RESIGNATION IN GOOD STANDING.....	34
SECTION 8: PROGRESSIVE DISCIPLINE, AND GRIEVANCE AND APPEAL PROCEDURES.....		<u>3434</u>
A.	PROBLEM RESOLUTION STATEMENT .....	<u>3534</u>
B.	PROGRESSIVE DISCIPLINE .....	35
C.	GRIEVANCE AND APPEAL PROCEDURES .....	38
D.	WHISTLEBLOWER POLICY .....	41
SECTION 9: EMERGENCY-WEATHER-DISASTER POLICIES.....		<u>4141</u>
A.	BAD WEATHER POLICY .....	<u>4141</u>
B.	BOMB THREAT PROCEDURE.....	42
C.	DR. STRONG POLICY .....	43
D.	EMERGENCY CONTACT PROCEDURES.....	43
E.	FIRE ALARM EMERGENCY PLAN.....	43
F.	LOCK DOWN POLICY.....	44
G.	DISASTER INITIAL RESPONSE PLAN .....	45
H.	OFFICE CLOSURE PROCEDURE.....	46
I.	ROBBERY POLICY .....	46

J. TORNADO EMERGENCY PLAN .....	<del>46</del> 46
K. UTILITY SHUT OFF PROCEDURES .....	47
L. BURGLARY OR VANDALISM TO THE AGENCY .....	47
SECTION 10: INFORMATION TECHNOLOGY POLICIES.....	<del>48</del> 47
A. COMPUTER USAGE & INTERNET POLICY .....	<del>48</del> 47
SECTION 11: INFORMATION REQUESTS-HIPAA-CONFIDENTIALITY .....	<del>53</del> 53
A. FREEDOM OF INFORMATION REQUEST PROCEDURE.....	<del>53</del> 53
B. MEDICAL RELEASE PROCEDURE .....	<del>54</del> 53
C. SUBPOENA PROCEDURE .....	54
D. CONFIDENTIALITY / SANCTION POLICY.....	54
SECTION 12: SUBSTANCE ABUSE POLICY.....	58

# **SECTION 1: DEVELOPMENT OF PERSONNEL POLICIES**

## **A. COMPOSITION OF THE PERSONNEL POLICY MANUAL COMMITTEE**

The committee shall be composed of the Health Officer, a designee of the Health Officer, three (3) voting members and three (3) alternate members. There shall be one (1) member and one (1) alternate member from each of the three counties - Branch, Hillsdale, and St. Joseph. The purpose of the committee is to provide suggestions to the Health Officer regarding personnel policies contained within.

The Health Officer and their designee serve as representatives of Administration and neither will have voting privileges. They are responsible for taking committee recommendations back to the Board of Health for approval.

## **B. SELECTION OF OFFICE MEMBERS AND ALTERNATES**

A request for nominations of members shall be accepted from all staff in December of each calendar year, term beginning January 1st. Elections will be held each year to elect the alternate member for each county. Staff members shall serve for a two-year term for their respective county's office. Employees elected shall serve the first year as the alternate member and the second year as the voting member. There are no term limits and a member finishing their second year could be re-elected as the new alternate. Staff members may only vote for the member in their home office location.

If there is a vacancy of the voting member or alternate member is vacated during the elected term, the current alternate member shall move into the voting member position for the remainder of their term. If there is a vacancy of an alternate member, a special election will take place to replace the member. The newly elected member will serve the remainder of the current year as alternate and then serve the following year as the voting member.

The committee members, voting and alternates, will elect a chair and a secretary during the first meeting of each year. The secretary shall arrange for the minutes of each meeting to be distributed to each committee member. Committee member names shall be posted annually in the mail room of each office.

## **C. MEETING SCHEDULE AND PROCEDURES OF THE COMMITTEE**

The committee shall meet at the beginning of the year to set a schedule of meetings to be held quarterly. The committee shall meet in special meetings when there are significant issues that warrant meeting more frequently. Meetings are presided over by the Chair or in his/her absence, the Health Officer. The Chair will have an agenda prepared for all meetings. All materials and the agenda will be provided to the members at least two (2) days prior to the scheduled meeting. The Secretary will prepare minutes of all meetings,

share approved minutes with the staff by sharing them in the “personnel Policy” folder on the shared drive, and document draft policy changes discussed by the committee.

Each office shall have one vote. If both the voting member and alternate member from an office are present, they will be allowed only one vote. In the event of a tie vote, the issue is to be tabled until the next scheduled meeting, at which time if the issue still results in a tie it is considered defeated.

The committee members are responsible for posting the minutes in each office. The announcement of personnel policy committee meetings and the minutes from the meetings will be sent to ‘everyone@bhsj.org’ through the Agency’s employee’s email system and in the Personnel Policy folder on the Coldwater shared drive. Each employee shall be responsible for reading the minutes and providing input to a member of the committee.

#### **D. IMPLEMENTATION AND INTERPRETATION OF THE PERSONNEL POLICIES**

The Health Officer shall be responsible for the implementation of the approved personnel policies within this manual. The Administrative Services Director shall be available to the employees and management regarding the interpretation of the personnel policies.

## **SECTION 2: EMPLOYMENT POLICIES, PROCEDURES AND REQUIREMENTS**

### **A. EMPLOYMENT POLICIES**

1. Employment Relations. The Board of Health believes that the work conditions, wages, and benefits it offers to its employees are competitive with those offered by other employers in this area and in this industry. If employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly with their immediate supervisors.

2. Equal Opportunity Employer. In order to provide equal employment and advancement opportunities to all individuals, employment decisions at the agency will be based on merit, qualifications, and abilities. Applicants and employees are protected from employment discrimination based on race, color, religion, sex, national origin, age, disability, genetic information, pregnancy, or veteran status, in all aspects of employment, including hiring, promotion, training, compensation, benefits, discipline, and termination, in accordance with all applicable federal, state, and local laws. The agency will make reasonable accommodations for qualified individuals with known disabilities. This policy governs all aspects of employment, including selection, job assignment, compensation, discipline, termination, and access to benefits and training.

3. Job Posting. The agency provides employees an opportunity to indicate their interest in open positions and advancement according to their skills and experience. Job openings will be posted and normally remain open for five (5) workdays. Each job posting will include the dates of the posting period, job title, department, grade level, essential duties and qualifications.

4. Immigration Law Compliance. In compliance with the Immigration Reform and Control Act of 1986, each new employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and eligibility.

5. Hiring of Relatives. Employment of more than one member of the family may be permitted, providing each individual possesses the necessary qualifications and competed in the usual manner with other qualified applicants.

6. Conflict of Interest. An actual or potential conflict of interest occurs when an employee is in the position to influence a decision that may result in personal gain for that employee or for a relative as a result of the agency's business dealings. If employees have any influence on transactions involving purchases, contracts, or leases, it is imperative that they disclose to their immediate supervisor as soon as possible the existence of any or potential conflict of interest so that safeguards can be established to protect all parties. For the purposes of this policy a relative is any person related by blood or marriage.

7. Outside Employment. Employees may hold outside employment as long as such employment does not present a conflict of interest or in any way interfere with the efficient discharge of duties required to satisfactorily function in the position held with the agency.

8. Pre-Employment Medical Exam and Drug Test. After an offer has been made to an applicant entering agency employment, the new hire shall undergo a medical examination and drug test at the agency's expense. The offer and assignment to duties is contingent upon satisfactory completion of these exams. Information on employees' medical condition or history will be kept separate from other employee information and will be maintained confidentially.

9. Background Check. When an offer has been made to an applicant entering agency employment, the new hire shall undergo an ICHAT background check, a search of the state and national sex offender lists, and a central registry check for anyone working with children or vulnerable adults (as required by contracts and/or grant funding). The offer and assignment to duties is contingent upon satisfactory completion of this background check process. In order to maintain compliance with the boilerplate language in requirements of the agency's grant contracts, any findings in background checks may be reviewed by the Agency's attorney. Any finding that would cause compliance issues

with the contracts will cause the conditional offer of employment to be rescinded. The Agency will conduct annual background checks on all employees.

All employees are required to notify the Administrative Services Director immediately of criminal convictions, pending felony charges, or listing on the CPS Registry. Failure to comply may result in discipline, up to and including dismissal.

10. Hire Date. The date an employee was hired. In the event that an employee had been employed and left employment and subsequently rehired, the Hire Date will be the most recent date of hire.

11. Anniversary Date. The Anniversary Date is the Hire Date or if an employee moves into a new job classification the Anniversary Date will change to the date that the new job classification becomes effective.

12. Continuous Length of Service. Continuous Length of Service is defined as the period of time in which an employee continues in agency employment without interruption subject to the conditions described in other sections of this manual.

13. Orientation. The immediate supervisor will provide each new employee an introduction to their co-worker, work environment, job responsibilities, procedures, and policies. All necessary employment forms and paperwork must be completed on the first day of work with the Administration division.

14. Probationary Period. All new and rehired employees will be on a twelve-month probationary period following their date of hire or rehire. At any time during the twelve-month probationary period, the agency may terminate employment for any or no reason. If an employee is laid off or granted an approved medical leave during their probation, the probationary period will be extended to ensure the Agency has the full twelve months of time worked to evaluate the employee. Employees in their probationary period have no bumping rights. Seniority will be calculated by the date of hire in a position.

15. Work Schedule. Work schedules may vary throughout the agency. Immediate supervisors will advise employees of their individual work schedules. Staffing needs and operational demands may necessitate variations in starting and ending times, as well as variations in the total hours that may be scheduled each day and week.

16. Performance Evaluations. Immediate supervisors and employees are encouraged to discuss job performance and goals on an informal, day-to-day basis. The immediate supervisor shall prepare the formal evaluations at three months, at six-months and at the end of the one-year probationary period and then every subsequent year following the hire or reassignment of employees.

17. Residency Requirement. There shall be no residency requirement that employees live within the boundaries of the areas served by the agency.

18. Approval for Hiring. Final approval of the hiring of all agency employees shall rest with the Health Officer.

19. Removal from Payroll. An employee who is defined as “casual” and does not work in within 6 consecutive payroll periods shall be removed from payroll as a voluntary resignation.

20. Reporting of Accidents/Incidents. The employee must report any & all accidents/injuries within 24 hours to the Administrative Services Director.

21. Reporting of Neglect/Abuse/Exploitation. Employees must report any and all suspected case/cases of abuse, neglect, and exploitation immediately by calling State of Michigan Centralized Intake at 855-444-3911. Employee must also notify immediate supervisor.

22. Identification Badges. All employees are issued an identification badge and are required to wear it during the performance of their job duties. In the event the badge is lost, stolen, or damaged the employee must notify the Administrative Division for a replacement immediately.

23. Sign In/Sign Out Policy. All employees shall sign in when they arrive at work and sign out at the time of leaving the building at any time during the day. This is required so we know who is in the building and who isn't in the event of an emergency. Sign out sheets are in the mail room. Each staff member will be responsible for their own time in and out.

24. Drivers Licenses and Car Insurance. Every employee must possess a valid driver's license and car insurance—you will be asked to present copies of these to the Administrative Division at hire and upon renewal.

## **B. PERSONNEL FILE PROCEDURE**

1. Contents of the Personnel File. The agency maintains a personnel file on each employee. The personnel file includes such information as the employee's job application, resume, performance evaluations, documentation of reassignments and salary increases, and other employment records.

2. Review of the Personnel File. Personnel Files are the property of the agency and access to the information they contain is restricted. Generally, only the immediate supervisor, division director, and other agency personnel who have a legitimate reason, as determined by the Health Officer to review the information in a personnel file, are allowed to do so. Employees are entitled to inspect the contents of their personnel files. Employees who wish to inspect their own personnel file should contact the Administrative Services Director. With reasonable advance notice, employees can review the content of their personnel files in the presence of the Administrative Services Director.



3. Personnel Data Changes. Employees are responsible for promptly notifying the Administrative Division of any changes in personnel data. Changes relating to personal information such as mailing addresses, telephone numbers, individuals to be contacted in the event of an emergency, dependents covered by agency provided insurance, or marital status must be accurate and up to date.

4. Verification of Employment Requests. No information will be shared on an employee until verified with that employee. Verification needs to be made before giving any institutions any information on any employees. **No information will be shared until validated by the Administrative Services Director.**

### C. PERSONAL CONDUCT REQUIREMENTS

1. General Statement of Policy. It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The agency expects employees to perform their job in a manner that will protect the interests and safety of all employees and the agency. Violation of the following Personal Conduct Requirements may lead to progressive disciplinary action, up to and including termination of employment.

2. Personal Appearance. Employees are expected to present a clean and neat appearance and to dress according to the requirements of their position. Employees who appear for work inappropriately dressed will be sent home and directed to return to work in proper attire. Under such circumstances, employees will not be compensated for the time away from work.

3. Agency Phone, Cell Phone, E-mail and Fax Usage. Employees should practice discretion when making personal phone calls and sending e-mail or faxes. Employees shall be required to reimburse the agency for any charges resulting from their personal use of the telephone, fax machine, or copier. Any employee, who has misplaced, lost, or damaged agency property must report such to their supervisor or the Administrative Services Director as soon as possible. The employee may be asked to reimburse the agency for the replacement/repair of said item or items if the loss or damage was a result of negligence by the employee.

4. Smoking Policy. In keeping with the agency's intent to provide a safe and healthful workplace, smoking or the use of E-cigarettes is prohibited in any agency facility or within 50 feet of the building.

5. Breaks and Lunch Periods. Employees will be granted two (2) paid fifteen-minute breaks during the full workday. Employees will have a ½ hour unpaid lunch period for each full workday. The timing of the breaks and lunch periods will be at the discretion of the department head and in compliance with labor law. It is the supervisor's responsibility to have staff coverage during all service hours, allowing for uninterrupted breaks and lunches.

6. Drugs and Alcohol in the Workplace. It is the agency's intent to provide a drug-free, safe and healthful workplace. Employees may not use, possess, distribute, sell, or be

under the influence of illegal drugs, marijuana, or alcohol while on agency premises or while conducting agency business-related activities off agency premises. Please refer to the Agency's Substance Abuse Policy in Section 12 of this document.

7. Harassment in the Workplace. The agency is committed to providing a workplace that is free of discrimination and unlawful verbal and physical harassment. Sexual harassment is defined as unwelcome sexual advances, requests for sexual favors, and other verbal, non-verbal, or physical conduct of a sexual nature. All allegations of harassment should be reported, in writing, to the Administrative Services Director's office as soon as possible. In the event the Administrative Services Director is the alleged harasser, the allegations of harassment should be reported, in writing, to the Health Officer.

8. Sexual Misconduct, Domestic Violence and Dating Violence in the Workplace. The agency is committed to providing a workplace that is free of discrimination, unlawful verbal and physical sexual misconduct, domestic violence and dating violence. All allegations of sexual misconduct, domestic violence and dating violence that occurs in the workplace or by an agency employee should be reported, in writing, to the Administrative Services Director's office as soon as possible. In the event the Administrative Services Director is the alleged harasser, the allegations of harassment should be reported, in writing, to the Health Officer.

Employees, volunteers, consultants, or contractors who are victims will be offered available workplace supports and community resources.

9. Attendance and Punctuality at Work. To maintain a safe and productive work environment, the agency expects employees to be reliable and punctual in reporting for scheduled work. Absenteeism and tardiness place a burden on other employees and on the agency. When employees cannot avoid being late to work or unable to work as scheduled, they must notify their immediate supervisor via call or text as soon as possible in advance of anticipated tardiness or absence.

10. Solicitation. In an effort to ensure a productive and harmonious work environment, persons not employed by the agency may not solicit or distribute literature or products in the workplace at any time for any purpose without the permission of the Health Officer. Employees may not solicit or distribute literature or products concerning outside event and organizations during working time without the permission of the Health Officer.

11. Contributions. Contributions by employees to community organization fund drives shall be entirely voluntary. Agency management personnel or Board of Health shall at no time estimate or determine what amount such contributions shall be.

12. Use of Agency Equipment. Equipment essential in accomplishing job duties is expensive and may be difficult to replace. When using agency property, employees are expected to exercise care, and follow operating and safety standards and guidelines.

Employees shall not engage in the improper, careless, negligent, destructive, or unsafe use or operation of agency equipment. In the event that any Agency owned or leased equipment is misplaced, stolen, lost, or damaged you must report it to the Administrative Services Director immediately. Employees may be asked to reimburse the Agency for the repair/replacement of said item or items if it is deemed the employee was careless and negligent. For legal liability reasons, employees are not to transport non-employees during work time unless special authorization is given.

13. Political Activity. Employees are subject to the rights and limitations of the Hatch Act.

14. Gifts and Favors. Employees or their immediate family shall not be permitted to accept loans, gifts of money or goods, services or other preferred arrangements for personal benefit under any circumstances directly or indirectly involving possible influence or appearance of influence upon the manner in which they perform work, make decisions to otherwise discharge their duties as an employee.

15. Confidentiality of Information. The agency shall be in compliance with the Health Insurance Portability and Accountability Act (HIPAA). Protected information contained in reports, records or communications of the agency shall be considered confidential. Unauthorized disclosure of such information by staff members shall be considered sufficient grounds for dismissal.

16. Dating Supervisors. Supervisory staff are strictly forbidden from dating staff they directly supervise. This includes consensual romantic or sexual relationships. Non-consensual relationships constitute sexual harassment and should be reported immediately so appropriate remedial action may occur.

#### **D. EMPLOYEE CLASSIFICATIONS**

1. Full Time. An employee who is regularly scheduled to work at least 37.5 hours per workweek.
2. Minimum Full Time. An employee who is regularly scheduled to work less than 37.5 hour per workweek but a minimum of 30 hours per workweek.
3. Part Time. An employee who is regularly scheduled to work at least 20 hours per workweek but less than 25 hours per workweek.
4. Casual. An employee who works irregular hours.
5. Contractual Employees. An individual performing a service, job or duty as outlined in the terms of a contract are not subject to the Agency's travel reimbursement, pay schedule, vacation or sick time schedule or other benefits unless stated in their contract,

but are subject to portions of the Personnel Policy that relate to personal conduct.

6. Seasonal Employees. An employee that has been hired to work in a specific program which is suspended each year and the program is scheduled to begin again within 12 months. Employee on seasonal layoff will not earn vacation, sick time, or cash-in-lieu while on layoff. The employee while on seasonal layoff will not be covered by the Health Insurance Policy offered by the Agency and will be transferred to COBRA. The Agency will not issue payments for any benefits which come due while the employee is on seasonal layoff. Such benefits include cash-in-lieu or longevity payments. Any longevity payments normally paid or the cash-in-lieu benefit earned by the employee prior to being placed on seasonal payoff will be paid once the employee returns to work or at the end of our current fiscal year or if the employment is terminated during the seasonal layoff period.

#### **E. EMPLOYEE PROMOTION OR RECLASSIFICATION**

The rate of pay, for employees who have been promoted to a higher-level position, will be adjusted to the minimum rate of pay of the higher-level, or to that salary step on the higher-level which is at least a 3% increase above their current rate of pay, whichever is higher.

The rate of pay, for employees who have been reclassified to a position in a lower level, will be paid at their current level or adjusted to their salary step rate of pay, whichever is lower.

The health officer shall authorize all reclassifications.

#### **F. EMPLOYEE TRANSFER**

The rate of pay, for employees who have transferred to a position in the same classification, the rate of pay shall be determined by the Health Officer and the division Director based on employee knowledge and training needed.

#### **G. WORK RELATED TRAVEL**

Employees who use their own personal vehicles for agency business will be reimbursed at the rate established by the Board of Health. The Board of Health set travel reimbursement at the standard mileage rate as set by the IRS each year. However, if the Health Officer determines that there are budgetary concerns of the agency, any increase in the agency's Travel Reimbursement must be postponed until the budgetary concerns have been addressed.

1. Agency Travel Policy. Travel expense reimbursement is based upon the following:
  - Every employee is assigned a home base office

- Any employee or contractual employee of this Agency who drives a vehicle for business related activities or receives mileage reimbursement from this Agency must possess at all times, a valid driver's license that does not restrict their driving for Agency related business.
- Within the health district, employees are paid mileage from their home base to the place of work assignment and back to their home base. If an employee leaves from their residence to a work assignment other than their home base, the mileage is paid from their residence if the distance is less than from their home base.
- Employees who request to work at an agency office that is not their home base shall not be reimbursed for travel time and mileage from the home base to the office where they have chosen to work.
- Employees assigned by their immediate supervisor to job responsibilities at an agency office that is not their home base shall be reimbursed for mileage.
- Meal expenses incurred within a work day are reimbursed only if they are pre-approved by an immediate supervisor. Supervisors shall use discretion approving meal expenses for offsite training, hosting visiting officials, etc.
  - Breakfast                 \$10.00
  - Lunch                        \$15.00
  - Dinner                       \$20.00
- Reimbursement for travel outside the health district must be pre-approved by the division director.
- Travel time that occurs outside of assigned business hours will be reimbursed in accordance with the adjusted time policy.
- Reimbursement for training and related expenses (tuition, meals, etc.) must be pre-approved by the division director. To begin the pre-approval process, employees shall submit an agency Training form, detailing the anticipated training expenses, to their supervisors.
- Travel mileage between offices shall be calculated as follows:
  - Coldwater to Hillsdale, 25 miles
  - Coldwater to Three Rivers, 40 miles
  - Coldwater to Sturgis, 26 miles
  - Three Rivers to Sturgis, 23 miles

## **H. STAFF DEVELOPMENT**

The Board of Health encourages employees to develop professionally through training and continuing education. Subject to management approval and agency budgetary constraints, employees will be assisted to attend identified training and education events. Attendance at approved conferences, training, or exams shall be treated as a special work

assignment. The agency will require an employee to sign a payback agreement to protect the agency from a premature departure of the employee once high-investment specialty training is concluded.

1. Staff Development Procedure. Pursuant to Section 2, Part H of the Branch-Hillsdale-St. Joseph Community Health Agency's Personnel Policies the following procedure has been developed and approved for implementation regarding employee requested training.

- All regular full-time, minimum full-time, and regular part-time employees are eligible to apply in writing for staff development assistance.
- Applications for staff development assistance shall be endorsed by the appropriate division director, then reviewed and approved by the health officer for being in the "best interest of the agency".
- Approved applicants must maintain employment throughout the training period.
- Approved applicants are eligible for reimbursement of courses taken, not to exceed \$3,000 in four consecutive quarters, three consecutive trimesters, or two consecutive semesters.
- Pre-approval of expenses must be obtained prior to the beginning of the school term.
- Covered course expenses are tuition and books.
- All courses must be through an accredited institution.
- All courses must be part of an educational program that relates to the employee's current position or a future position with the agency.
- An employee may request reimbursement for the course or training by submitting a copy of the receipt showing that the fee had been paid by the employee along with the following:
  - ✓ An employee must obtain a grade of "C" or better at the undergraduate level and "B" or better at the graduate level.
  - ✓ Upon the completion of the course(s) and the posting of grades the employee must present the grades to the health officer.
- Employees who leave before one year's time after the last staff development reimbursement payment must reimburse the agency a pro-rate share of that last payment. This requirement may be waived by the health officer upon appeal.

## SECTION 3: COMPENSATION POLICIES

### A. MONETARY COMPENSATION

1. Rate Determination. The Board of Health shall approve an employee salary scale that seeks to assure that covered salaries are externally competitive and are internally comparable in terms of job difficulty and responsibility. A copy of the approved salary scale shall be available in each office.
2. Starting Wage. A newly hired employee will start at the minimum of the approved salary range for the position for which they were hired. The Health Officer may approve that an employee be started above the starting wage but not at a wage exceeding the maximum of the salary range. The Health Officer shall seek approval from the Board of Health of any new hire that is started above step two on the employee salary scale.
3. Credit Transfer. A division director may recommend to the Health Officer that an employee transferring from a full time or minimum full-time position to another full-time position or minimum full-time position at the same salary range be credited with their prior service for salary.

### B. PAY PERIODS

1. Schedule. All employees are paid on two-week cycles beginning on Saturday at 0:01 a.m. and ending on Friday at midnight. Payday is on the Friday one week following the close of the pay period. If the regular payday falls on a federal banking holiday, employees can receive their paychecks the last day of work prior to the federal banking holiday.
2. Payroll Reporting Responsibility. All employees are responsible for submitting a completed time sheet to their immediate supervisor for approval and processing no later than 9 a.m. of the first work day following the end of the payroll period. The immediate supervisors are responsible for seeing that all submitted and approved time sheets are electronically processed to the agency accounting office no later than 10 a.m. of the first work day following the end of the payroll period.

### C. ADDITIONAL TIME POLICY

The additional time policy applies to staff that are required to work on Saturday, Sunday or in excess of normal business hours or on Agency observed Holiday to conduct Agency work at scheduled venues. Staff will receive a minimum of two (2) hours for reporting on the weekend and if the time worked exceeds two (2) hours they will receive an additional ½ hour

for each ½ hour worked. The agency recognizes two types of additional time; adjusted-time and overtime.

### 1. Adjusted Time Schedule

**Policy:** Full time staff members are limited to a 75 hour per pay period work schedule. Minimum full-time staff members are limited to a 60 hour per pay period work schedule. Part-time staff members are limited to less than 60 hours per pay period work schedule, as specified by their supervisor.

For most staff, their work schedule coincides with the Agency's regular work hours: 7.5 hours per day, Monday through Friday. (Note: While normal business hours are 8 a.m. to 4 p.m., clinic staff, working a late clinic which starts later than 8 a.m. and ends after 4 p.m., should consider a late clinic normal business hours).

Certain positions within the agency (i.e., communicable disease nurse, health educator, sanitarian, outreach worker, etc.) may have work assignments as part of their job duties/responsibilities which require work that can only be done outside of the Agency's normal work schedule. Due to these requirements, the work schedule for these employees can be adjusted, with prior written approval from their division's director, to accommodate these specific duties and responsibilities. (During the affected pay period, the employee will work to accommodate any overages in hours on one day by taking time off on one or more subsequent days. Days selected to adjust for time overages shall be low volume work days or days with limited work commitments.)

Staff members are instructed that, without prior written authorization of the health officer and their director, they are not allowed to work more than their budgeted hours as identified on their Payroll Status Wage Form and are not eligible for overtime payments.

#### **Procedure:**

- A. Employees who have work commitments which fall outside of the Agency's regular work hours of Monday through Friday will submit an adjusted time schedule form to their director for the pay period prior to the time being adjusted.
- B. The form will indicate the Employee's name, Employee Number, and the pay period being adjusted.
- C. Employees will identify the number of hours they are working each day, and include the start and end times for each day.
- D. Employees will identify the reason for the adjustment for those days where they are working outside their normal 7.5 hours per day.



- E. Employees will document that for those days in which they are working more than 7.5 hours, they have made an appropriate adjustment on a subsequent day. Employees will do their best to work with their directors to assure that these adjustments are not made on days which will result in unnecessary work assignment shifts or undue hardship for their co-workers or to the Agency. Scheduled adjustments to offset time in excess of a 7.5-hour day should occur on days that are low volume or with limited commitments.
  - F. Employees will certify that they will not deviate from the schedule or work in excess to the schedule by signature without prior notification and approval. In addition, they will also certify they will not work in excess of budgeted hours without written approval of their director and the health officer. An employee cannot use paid time off to exceed their budgeted hours.
  - G. Once received, the director will provide written approval in a timely manner, but no later than 24 hours prior to the start of the adjustment.
  - H. Written requests and approvals can be submitted in paper form, fax or electronically, as the director prefers.
  - I. The director will keep documentation of adjusted work schedules as required by document retention policies.
  - J. Failure to submit adjusted work schedule forms and to comply with the adjusted policy and procedures will result in progressive disciplinary action.
2. Compensation for Overtime. Hourly/Professional/Technical – When the Agency’s budget permits, or as otherwise required by law. Staff that work in excess of eighty (40) hours in a single week may be compensated at one and one-half their regular rate of pay for the time in excess of 40 hours. Staff may only work in excess of their budgeted schedule with prior division Director and Health Officer written approval. Paid time off is not considered as time-worked toward the calculation for overtime. Employees will only be compensated at time and a half only if they actually worked more than 40 hours in a week.

#### **D. LONGEVITY COMPENSATION**

1. Purpose and Eligibility. Longevity Compensation is granted to regular employees based upon their consecutive years of service. Casual employees are not granted longevity compensation.

2. Amount Granted. The amount of longevity compensation granted to an eligible employee varies with the number of consecutive years of service from their anniversary date as shown in the following schedule:

5-9 Years of Service	=	\$150
10-14 Years of Service	=	\$300
15-19 Years of Service	=	\$450
20 Years Plus of Service	=	\$600

3. Payment Schedule. Longevity compensation payments are paid out to eligible employees on the first payday following the employee’s anniversary date. Seasonal employees receive longevity as outlined under the seasonal employee definition.

**E. JURY SERVICE**

1. Purpose and Eligibility. Jury Service Compensation is available to eligible employees to encourage employees to fulfill their civic responsibility by serving jury duty when required. If an employee of the Branch-Hillsdale-St. Joseph Community Health Agency has been called to serve, notification to the employee’s immediate supervisor and the Administrative Services Director is required for jury service compensation.
2. Amount Compensated. Employees will be compensated at their normal rate of pay, provided they surrender all compensation received for hours served from other sources associated with their jury duty services.
3. Giving Notice. Employees must give reasonable advance notice to their immediate supervisor and the Administrative Services Director of their summons to serve as a possible juror. Employees must also give periodic updates in respect to anticipated jury service completion time.
4. Maintenance of Benefits. All paid leave benefits: vacation leave, sick leave, and holidays will continue to accrue during jury service. All insurance plans the employee participated in prior to the jury service will continue during the jury service.

**F. 457 DEFERRED COMPENSATION ACCOUNTS**

The agency offers two “457” or deferred compensation plans that allow employees to put pre-tax or post-tax dollars away for future retirement needs. All employees are eligible for benefits that are subject to state and federal regulations. Employee participation is voluntary.

## **G. MERS RETIREMENT PROGRAM**

The agency provides a compulsory retirement plan through the Municipal Employees Retirement System (MERS) for its employees classified as full time and minimum full time. In 2015, the Agency's MERS plan changed from defined benefit to defined contribution. Eligible employees contribute 3% of their gross wages to MERS. The agency contributes an amount determined by MERS as the employer match contribution for those employees under the defined benefit plan. The agency contributes 5% of an employee's gross wages to MERS for those employees on the defined contribution plan. A 55/25 waiver for all participating employees is in effect.

## **H. HEALTH CARE SAVINGS PLAN (MERS)**

A post-employment Health Care Savings Program (HCSP) is an employer-sponsored program that allows employees to save money by getting reimbursed for medical expenses and or health insurance premiums after termination of service from their employer. All contributions made to the program are tax free, will accumulate tax free, and since payouts are used for reimbursing medical expenses they will remain tax free. The Health Care Savings Plan was suspended effective January 1, 2018.

## **I. BASIC FLEX**

The Agency offers staff the opportunity to transfer a portion of their gross pay to a flexible spending plan. The employee determines a dollar amount to be set aside in a special account that can be used to pay for qualifying expenses as they occur. Only full-time and minimum full-time employees qualify to use Basic Flex. See the Accounting department for additional detail regarding this plan.

IRS regulations state that if an employee or an employee's spouse is enrolled in a General Purpose Flex plan, the employee would be disqualified from establishing a Health Savings Account (HSA)

## **J. AFLAC**

The Agency offers AFLAC as part of a flexible spending plan.

## **K. REIMBURSEMENT FROM SOURCES OTHER THAN THE AGENCY**

In the case where some other organization reimburses an employee for job-related expenses, employees shall be allowed reimbursement from one source only for job-related expenses. If reimbursement from a non-agency source is sufficient to cover expenses incurred by an employee, the employee shall submit an expense voucher to the agency, and the reimbursement from the non-agency source shall be turned into the agency.

## SECTION 4: INSURANCE BENEFITS

### A. HEALTH INSURANCE

1. Purpose and Eligibility. The agency provides access to health (medical, dental, and vision) insurance for eligible employees and their families. Full time and minimum full-time employees and their dependents until age 26 are eligible for access to health insurance coverage under the agency's plan. Part time and casual employees are not eligible for access to health insurance coverage through the agency's plan.
2. Start of Coverage. Application for health insurance coverage must be made with the Administrative Division upon hiring. Coverage for eligible employees should become effective the first day of employment.
3. Cash-in-Lieu of Health Insurance. Those employees that meet the following eligibility requirements:
  - are full time or minimum full time as outlined in (1.) above, and
  - provide proof of health insurance from another provider on an annual basis to the Agency,Eligible employees may elect to receive a cash-in-lieu payment. This payment is made after the conclusion of each fiscal quarter. An eligible employee as defined above, may elect to take the dental and vision plan and receive a cash-in-lieu payment that is reduced.
4. Insurance Benefit During an Unpaid Leave.
  - a) FMLA qualifying event: Employees on an unpaid leave who are eligible for FMLA are charged their regular cost of the health care plan premium during the qualifying FMLA period. A bi-weekly invoice will be provided and employees have a 30-day grace period in which to remit payment. If payment is not received, the insurance will be cancelled.
  - b) Non-qualifying FMLA leave: If an employee is taking unpaid leave, the employee is responsible for the entire cost of the health care plan premium. This rate will be figured on a daily basis of the monthly premium. Contact the Administration Division regarding what the daily charge would be based on the health care plan selected. A bi-weekly invoice will be provided and employees have a 30-day grace period in which to remit payment. If payment is not received, the insurance will be cancelled.

### B. LIFE INSURANCE

1. Purpose and Eligibility. The Agency provides term life insurance in the amount of \$15,000 for eligible employees. Full time and minimum full-time employees are

eligible for life insurance coverage. Part time and casual employees are not eligible for life insurance. Group life insurance coverage will decrease to \$11,000.00 on the first day of the month after an employee's 65<sup>th</sup> birthday and further shall decrease to \$8,000.00 on the first day of the month after an employee's 70<sup>th</sup> birthday.

2. Accidental Death and Dismemberment Coverage. As part of the agency's life insurance plan, each full time and minimum full-time employee is also covered up to \$15,000 for accidental death and dismemberment. Employees who are on layoff may purchase continuation life insurance coverage.

### **C. SHORT TERM DISABILITY INSURANCE**

1. Purpose and Eligibility. The agency provides short-term (up to twenty-six weeks) disability insurance for eligible employees who are unable to work because of a qualifying disability due to injury or illness. Full time and minimum full-time employees are eligible under the agency's short-term disability plan. Part-time and casual employees are not eligible for short-term disability insurance.
2. Scope of the Plan. Eligible employees are provided with disability insurance that becomes effective 30 days after the disability and pays 70% of an employee's weekly earnings up \$750.00 during the eligibility period.
3. Restrictions. Eligible employees may not collect disability payments in addition to accrued leave time. Only one source of payment either from disability insurance payments or accrued leave time can be collected during any one-time period. Employees who are on layoff are not covered by the short-term disability insurance.
4. Relationship to Worker's Compensation. Disabilities covered by worker's compensation are excluded from the agency's short-term disability plan coverage.
5. Medical Insurance. The employee is responsible for their portion of the bi-weekly payment of the health care plan they have selected while on short term disability. Invoices will be generated and sent out bi-weekly. Employees are given a 30-day grace period to send in the payment. If payment is not received, the agency will give notice that the policy will be cancelled. If the employee does not qualify for FMLA protection, or FMLA protection has expired, the employee is responsible for paying 100% of the premium for their medical insurance.

### **D. UNEMPLOYMENT INSURANCE**

The agency participates in the state/federal unemployment insurance program. All employees are eligible for benefits that are subject to state and federal regulations.

### **E. WORKER'S COMPENSATION**

The agency provides a comprehensive worker's compensation program that covers employee injuries or illnesses sustained in the course of employment that requires medical,

surgical, or hospital treatment. All employees are eligible for benefits that are subject to applicable legal requirements. All work-related injuries or illnesses are to be promptly reported within 24 hours to the Administrative Services Director.

#### **F. PROFESSIONAL LIABILITY INSURANCE**

The agency provides liability insurance coverage for all employees engaged in the day-to-day operations of the agency. The agency shall include surety bond coverage.

#### **G. SOCIAL SECURITY**

The agency participates in the Federal Social Security Plan. All employees shall supply the payroll department with the necessary information for reporting.

#### **H. COBRA REQUIREMENT**

1. Purpose and Eligibility. The federal Consolidated Omnibus Budget Reconciliation Act (COBRA) gives regular full-time employees and minimum full-time employees (who have participated in the health insurance plan) the opportunity to continue health insurance coverage when a “qualifying event” would normally result in the loss of health insurance eligibility.
2. Qualifying Event Defined. Under COBRA, qualifying event is defined as resignation, termination of employment, or death of an employee; reduction of employee’s work hours or a leave of absence; an employee’s divorce or legal separation; and a dependent child no longer meeting eligibility requirements.
3. Payment of Costs. Under COBRA, the employee or beneficiary pays the full cost of coverage at the agency’s health insurance premium rates plus an administration fee.

### **SECTION 5: EMPLOYEE LEAVE POLICIES**

#### **A. VACATION LEAVE**

1. Purpose & Eligibility. Vacation Leave with pay is available to eligible employees. Full time employees are eligible for vacation leave and minimum full-time employees are eligible for vacation leave on a pro-rata basis. Part time and casual employees do not accrue vacation leave.
2. Amount Accrued. The amount of vacation leave employees accrue each year varies with the length of consecutive years of employment. The following accrual schedule assumes a thirty-seven and one-half hour workweek:
  - First 5 years of service = Sixteen (16) days or 4.61 hours per pay period
  - After 5 years of service = Twenty-Two (22) days or 6.34 hours per pay period
  - After 10 years of service = Twenty-Eight (28) days or 8.07 hours per pay period

The following accrual schedule assumes a thirty-hour workweek:

- First 5 years of service = 3.68 hours per pay period
  - After 5 years of service = 5.06 hours per pay period
  - After 10 years of service = 6.456 hours per pay period
3. Start of Accrual. Employees begin to accrue vacation leave from the date of employment. Earned vacation leave is available for use on the 61<sup>st</sup> day of employment.
  4. Vacation Leave and Leaves without Pay. Employees who are on a leave without pay do not accrue any additional vacation leave until their return to service.
  5. Requesting a Vacation Leave. Employees must request advanced approval from their immediate supervisor to utilize accrued vacation leave. Requests will be reviewed based on a number of factors, including department operational needs and staffing requirements.
  6. Rate of Payout. Vacation leave will be paid out at the employee's pay rate at the time of vacation leave.
  7. Maximum Accrual. Employee may accrue vacation leave up to twice the maximum annual accrual allowance schedule. Once an employee has accrued the maximum, no additional vacation leave will be accrued until the employee has used vacation leave to reduce their total below the maximum.
    - a. The following accrual maximum for employees who are full-time:
      - First 5 years of service = 240.00 hours maximum
      - After 5 years of service = 330.00 hours maximum
      - After 10 years of service = 420.00 hours maximum
    - b. The following accrual maximum for employees who are minimum full-time :
      - First 5 years of service = 210 hours maximum
      - After 5 years of service = 270 hours maximum
      - After 10 years of service = 360 hours maximum
  8. Upon Termination. Upon termination of employment, employees will be paid for all unused accrued vacation leave that has been earned through the last day of work. Payment will be received as a lump sum pay off of the accrued vacation leave. Payment will be withheld if the employee owes the agency money, or will be reduced by the amount of money the employee owes the agency.

## **B. SICK LEAVE**

1. Purpose & Eligibility. Sick Leave with pay is available to eligible employees for periods of temporary absences for the following purposes:

- a) a personal mental or physical illness or injury or to seek treatment for such illness or injury, including a Medical/Dental or preventative care appointment;
  - b) a mental or physical illness or injury or to seek treatment for such illness or injury of a family member or any person that the employee is designated as the primary caregiver in accordance with FMLA. A family member includes any child, stepchild, foster child, parent, spouse, grandparent, grandchild, sibling, or any other individual included in the definition of “family member” under Sec. 2(g) of Paid Medical Leave Act (PMLA), MCL 408.962(g).
  - c) to permit an employee to work less than their regularly scheduled work hours until full recovery following a prolonged illness, injury or surgery;
  - d) for purposes of bereavement for events not covered under the bereavement policy;
  - e) due to the closure of the Health Department, the primary Health Department worksite the employee, or to care for the child of the employee due to the closure of the child’s place of care, if such closure is by order of a public official due to a public health emergency;
  - f) if the employee or a family member of the employee is the victim of sexual misconduct, domestic violence, dating violence, or sexual assault, for medical care or counseling, the receipt of victim services, relocation or legal services, or participation in level proceedings related to or resulting from the sexual misconduct, domestic violence, dating violence, or sexual assault;
  - g) for any other purpose not listed above but identified in Section 4 of the PMLA, MCL408.964(1)(a) – (b).
2. Amount Accrued. All employees shall accrue sick leave based on hours worked or employment status. Each full-time employee shall accrue sick leave at the rate of 3.46 hours per pay period and each minimum full-time employee shall accrue sick leave at the rate of 2.76 hours per pay period. Each employee that works a minimum of 25 hours per week on average, but less than 30 hours per week and does not otherwise qualify as a minimum full-time employee, shall accrue sick leave at the rate of 2.31 hours per pay period. Part time and casual employees who work less than 25 hours per week on average ~~do not accrue sick leave.~~ shall accrue sick leave at the rate of 1 hour per 30 hours worked.
3. Start of Accrual. Employees begin to accrue sick leave from the date of employment. Earned sick leave is available for use on the 61<sup>st</sup> day of employment.
4. Sick Leave and Leaves without Pay. Employees who are on a leave without pay do not accrue any additional sick leave until their return to service.
5. Notification of Supervisor. An employee requesting to use sick leave must notify their immediate supervisor as soon as possible, preferably before the scheduled start of their next workday. The immediate supervisor must also be contacted on each additional day of absence.



6. Extended Absences. An employee who is off on sick leave three or more consecutive workdays may be required by their immediate supervisor to submit a physician's verification of illness prior to returning to service. Such verification must include the reason for the absence and any job restrictions that may exist prior to returning to work.
7. Rate of Payout. Sick leave is paid at the employee's pay rate at the time of illness or injury.
8. Maximum Accrual. ~~Employees will be allowed to accrue sick leave up to a maximum of 263 hours. Once an employee has accrued the maximum, no additional sick leave will be accrued until the employee has used sick leave to reduce their total below the maximum. Once a year in December, an employee that has accrued sick leave over 200 hours will be paid for those hours. All payments will be made in the last payroll of the calendar year. Employees will be allowed to accrue earned sick leave without limitation. However, an employee is limited to use of 263 hours of accrued earned sick leave in any given year. If an employee has accrued more than 200 hours of earned sick leave by December of each year, the employee may choose to be paid out for the hours in excess of 200 up to a maximum of 63 hours. The employee must provide notice of the request for payout prior to the final pay period for the calendar year, and such payments will be paid out in a separate check after the final regular payroll for the calendar year.~~
9. Limitation on Payment of Accrued Sick Time. Upon resignation of employment, in good standing, employees who have accrued sick leave on the date that they tender their letter of resignation will be paid their accrued and unused hours of their sick leave up to, but not to exceed, a total of 200 hours. Payment may be made in a lump sum. The purpose of this payment is to encourage an employee who intends to resign their employment to continue working through the effective date of their resignation.

In all other cases where the conditions of this policy are not met, an employee forfeits payment for sick time that has accrued, but remains unused, on the date their employment is terminated. Resignation in good standing is defined in Section 7 (G) below.

## C. BEREAVEMENT LEAVE

1. Purpose & Eligibility. Bereavement Leave with pay is available to eligible employees who need immediate time off to deal with a death in the immediate family. Immediate family shall be defined as spouse, son, daughter, parent, brother, or sister. Full time and minimum full-time employees are eligible for bereavement leave. Part time and casual employees are not eligible for paid bereavement leave.

2. Amount Available. Eligible employees may utilize up to three (3) days of bereavement leave per event.
3. Requesting Bereavement Leave. Employees should request approval from their immediate supervisor for needed bereavement leave.
4. Rate of Payout. Bereavement leave is paid at the employee's rate of pay at the time of the emergency leave.
5. Use of Bereavement Leave. Bereavement leave is set up to assist employees with the death of an immediate family member. Bereavement leave cannot be carried from one calendar year to the next.
6. Upon Termination. There is no accrued bereavement leave for employees upon termination.

#### **D. FAMILY AND MEDICAL LEAVE**

Family and Medical Leave, as specified in federal law (Family and Medical Leave Act of 1993), is available to eligible employees who wish to take time off from work duties to attend to the personal circumstances as outlined in the law. A detailed policy has been approved by the Board of Health

##### FAMILY AND MEDICAL LEAVE POLICY

In compliance with the Family Medical Leave Act of 1993 and the Branch-Hillsdale-St. Joseph Community Health Agency Personnel Policies:

It is the Branch-Hillsdale-St. Joseph Community Health Agency's policy to grant unpaid family and medical leaves of absence to all full-time and regular part-time employees who worked 1,250 hours or more during the 12 months prior to the request for family and medical leave. You are entitled a maximum of 12 work weeks of leave during any calendar year for one or more of the following purposes:

- To care for your child after birth, adoption or placement of a child in your home for fosters care. Such leave may be taken only in the first year after the birth, adoption or placement of the child.

We shall require medical certification (or rectification on a reasonable basis) of the existence of a "serious health condition" of you or your eligible family member, which certification shall contain the date the health condition commenced, the probable duration of the condition, the appropriate medical facts within the health care providers knowledge regarding the condition. Medical Certification Forms may be obtained from Director of Human Resources.

In certain cases, the following additional information may be required in the Medical Certification:

- If the leave is required because of the serious health condition of an employee's child, parent or spouse, a statement that the eligible employee is needed to care for the covered individual and the amount of time necessary for such care.
- If the leave is needed because of the employee's own serious health condition, a statement that the employee is unable to perform the function of his/her position.
- For an intermittent leave or a reduced leave schedule for planned medical treatment for the employee, the dates that such treatment is expected to be given and the duration of such treatment; or if not for planned treatment but for rehabilitation, a statement of the medical necessity for and duration of such intermittent leave or reduced leave schedule.
- For an intermittent leave or leave on a reduced schedule for a child, spouse or parent, a statement that the employee's leave is necessary for the care of such individual or will assist in their recovery, and the expected duration and schedule of the intermittent leave or reduced leave schedule.

We may obtain a second opinion of another physician to verify the health condition certified by your physician.

In the event a conflict exists between the medical opinion of the employee's or covered family member's health care provider and that of the Company in the second opinion examination, a third examination will be required to be performed by a health care provider selected and paid for by the Company. In such instances, the opinion of the third health care provider will be final and binding on the Company and the employee.

Leave may be taken intermittently, when medically necessary, provided that if such leave is recurring, we may require you to transfer temporarily to an available position (at the same pay and benefits) which better accommodates recurring periods of leave.

As part of the leave granted under this policy, you must first use all accrued and unused vacation, sick or earned time off days during a period of family or medical leave.

If you are taking a family and medical leave because of a serious health condition, which makes you unable to perform the functions of your position; you may also be eligible for short- or long-term medical disability benefits. You may not elect to discontinue your family and medical leave at the time you begin receiving medical disability benefits.

All employment benefits that are calculated on an accrual basis, such as vacation, sick time or paid time off, will not accrue during a leave under this policy.

All current group medical insurance benefits will continue during periods leave under this policy, subject to continued payment of your employee premium contribution, if any, which was in effect before your leave.

Participation in pension or retirement plans will continue, subject to the terms and conditions of the plan.

An expected date of return will be determined at the beginning of the leave. If you fail to return within three (3) working days of the expected date of return, you will be considered as having voluntarily resigned employment, without further notice from the employer.

You will be required to report to your supervisor at least every four (4) weeks to report on your status and the possibility that you will be able to return to work at the end of the leave period. You must give the Director of Human Resources five (5) days' notice of the date you expect to return from such leave.

You may not accept nor seek any other employment while on such leave or your employment will be terminated.

When you are released for work by your attending physician, you may be required to make an appointment with our designated physician in order to return to work. The designated physician has the authority to delay or deny your return to work if it is determined that your ability to meet the physical requirements of your position are in question or if it is determined that your condition presents a health hazard to other employees.

- To care for a spouse, child or parent who has a serious health condition.
- To allow you to recover from or receive treatment for a serious health condition which makes you unable to perform the functions of your position.

## DEFINITIONS

For purposes of this policy the following definitions apply:

Calendar Year—the employer has elected to use the “rolling year” method for determining the “12-month period” in which the 12 weeks of leave entitlement occurs. The calendar year is measured backward from the date an employee uses any FMLA leave. Each time an employee takes leave under this policy the remaining leave entitlement would be any balance of the 12 weeks, which has not been used during the immediately preceding 12 months.

Child—includes a biological, adopted, foster child, stepchild, legal ward who is under 18 or older than 18 if incapable of self-care because of a mental or physical disability.

Parent—biological parent or individual legally recognized as a parent to an employee when the employee was a child.

Serious health condition--an illness, injury, impairment, or physical or mental condition that involves inpatient care in a hospital, hospice, or residential medical care facility, or continuing treatment by a health care provider (i.e., a doctor of medicine or osteopathy who is licensed to practice medicine or surgery by the state in which he/she practices).

#### PROCEDURES FOR REQUESTING AND MAINTAINING LEAVE

If the leave is based upon the expected adoption or placement of a child, or for planned medical treatment of you or your child, spouse or parent, you must provide not less than thirty (30) days’ notice of the time your leave is to commence.

If you need to take Family or Medical leave, you must provide us with enough information to determine whether or not you are entitled to such leave as soon as you are able, preferably, before the leave commences.

#### REINSTATEMENT AFTER LEAVE

Eligible employees taking leave under this policy will be reinstated to their former position, or to an equivalent position, with equivalent benefits and other terms and conditions of employment. However, no employee is entitled under this policy to any right, benefit, or position other than that to which the employee would have been entitled had he/she not taken leave. Thus, for example, if a layoff or some other extenuating circumstances or business condition arises which affects the employee's position, reinstatement may not be possible. Additionally, employees on a leave extension are not guaranteed reinstatement.

The Branch-Hillsdale-St. Joseph Community Health Agency also reserves the right, however, to deny leave reinstatement to "key employees," where such denial is necessary to prevent substantial economic injury to the Agency's

operations. Key employees will be notified of the Agency's intention as soon as a determination is made. In the event such notice is given to a key employee already on leave, the employee will be offered the opportunity to terminate his/her leave and immediately return to work. Key employees notified while on leave, who decide not to return to work, will remain on leave. Key employees are defined as the highest paid 10 percent of the employees employed by the Agency, within 75 miles of the facility at which the employee is employed.

## **E. EDUCATIONAL LEAVE**

1. **Purpose & Eligibility.** Educational Leave without pay is available to eligible employees who wish to take time off from work duties to pursue professional educational goals. The department head determines eligibility for educational leave with concurrence from the Health Officer.
2. **Amount Received.** Eligible employees may request educational leave for a defined period of length. Requests will be evaluated based on a number of factors, including department operational needs and staffing requirements.
3. **Requesting an Educational Leave.** Employees must request an educational leave from their immediate supervisor. Each request for educational leave must be in writing.
4. **Rate of Payout.** Educational leave will be unpaid unless the employee has accrued vacation leave to utilize.
5. **Suspension of Benefits.** All paid leave benefits: vacation leave and sick leave will be suspended during the unpaid educational leave. Health insurance benefits may continue during the unpaid educational leave. If an employee is taking unpaid leave, the employee is responsible for the entire cost of the Health Insurance premium. This rate will be figured on a daily basis of the monthly premium.

## **F. MILITARY LEAVE**

1. **Purpose & Eligibility.** Military Leave without pay is granted to employees who are absent from work because of short term and long-term service in U.S. uniformed services in accordance with the Uniformed Services Employment and Reemployment Rights Act (USERRA) and applicable state laws.
2. **Amount Received.** Employees may request up to ten (10) days per calendar year for use as short-term military leave. Employees may request an indefinite period of time for use as long-term military leave.

3. Requesting Military Leave. Employee must give advance notice to their immediate supervisor, unless military necessity prevents such notice or it is otherwise impossible or unreasonable.
4. Rate of Payout. Military Leave will be unpaid unless the employee has accrued vacation leave time to utilize.
5. Continuation of Benefits. Continuation of health insurance is available as required by USERRA based on the length of the leave and subject to the terms, conditions and limitations of the health insurance plan for which the employee is eligible.
6. Termination of Benefits. The military leave and the right to restoration of his/her former position shall automatically terminate if the employee voluntarily remains in the military service beyond the requirement of minimum service.

## **SECTION 6: HOLIDAY POLICY**

### **A. HOLIDAY PAY**

1. Purpose & Eligibility. The agency has designated 12 days for observance of holidays. These holidays are granted with pay for eligible employees. Full time employees are eligible for holiday pay at a rate of 7.5 hours per holiday. Minimum full-time employees are eligible for holiday pay only if the holiday falls on a day that they are scheduled to work. Part time & casual employees are not eligible for holiday pay. To be eligible for Holiday pay, employees must either have preapproved vacation days, a medical slip from a doctor, or work their scheduled work days both before and after the holiday. Employees who are on leave without pay or other extended leaves do not qualify for holiday pay.
2. Designated Holidays. The following days are designated as holidays:
  - New Year's Day
  - Martin Luther King, Jr. Day
  - Presidents' Day
  - Memorial Day
  - Independence Day
  - Labor Day
  - Veterans' Day
  - Thanksgiving
  - Day after Thanksgiving
  - Christmas Eve Day
  - Christmas Day

- New Year's Eve Day
3. Scheduling. In the event Veterans' Day, Christmas Eve, Christmas Day, New Year's Eve Day, New Year's Day and/or Independence Day fall on Sunday the following Monday is recognized as an agency holiday. If an aforementioned holiday falls on Saturday, the preceding Friday is recognized as an agency holiday. If two holidays are observed together, and one or both fall on the weekend, the Agency will try to mirror its holiday observances with our fiduciary, Branch County.
  4. Rate of Payout. Holiday days will be paid out at the employee's pay rate at the time of the holiday.
  5. Compensation for a Holiday Worked: Employees (including supervisors) required to work during an agency designated holiday shall be compensated at one and one-half times the current rate of pay for the time worked in accordance with the additional time policy. Eligible employees will also receive holiday pay. Employees must receive prior approval from their division director before working on a holiday.
  6. Loss of Holiday Pay: An employee who fails to qualify for holiday pay must take any available paid time off. If no paid time off is available, accruals and benefit withholdings will be adjusted accordingly.

## SECTION 7: TERMINATION PROCEDURES

### A. RESIGNATION

Resignation is a voluntary act initiated by the employee to discontinue employment with the agency. All employees should give at least ten (10) working days, but where possible twenty (20) working days, written notice of their intention to terminate employment with the agency. All employees that are ending their employment with this Agency must inform the Administration division so that all necessary paperwork can be completed prior to their resignation.

### B. DISCHARGE

Discharge is a non-voluntary act initiated by the employer to discontinue the employment of the employee with the agency. Any employee may be discharged by the immediate supervisor, provided notification is given to the Health Officer and provided the steps of progressive discipline have been followed.

### C. LAYOFF

Layoff is a non-voluntary act initiated by the employer to discontinue the employment of the employee with the agency for non-disciplinary reasons. Employees may be laid off for the lack of sufficient work or funds. Employees shall be laid off and recalled according to seniority within their service division. Employees on layoff may bump into



a position for which they are qualified and trained that is held by a person with less seniority within their service division.

Employees who are notified of a layoff may appeal the decision of layoff utilizing the Grievance Procedure outlined in Section 8 of this manual.

#### **D. FURLOUGH DAYS**

As a result of unforeseen or unplanned budgetary deficiencies, the Health Officer may order that furlough days be taken by employees. An employee required to take a furlough day does not report to work that day and does not receive any payment for that day. When an employee is taking a required furlough day they will accrue the same benefits and seniority as when they are on a paid leave. The employee will not be able to use sick leave when taking a required furlough day.

#### **E. JOB ELIMINATION**

Job elimination is a management action taken to address a chronic and seeming permanent situation of lack of sufficient work or funds. Employees whose jobs are eliminated are not entitled to bumping rights. Employees who are notified of a job elimination may appeal the decision of job elimination utilizing the Grievance Procedure outlined in Section 8 of this manual.

#### **F. RETURN OF AGENCY PROPERTY**

Employees are responsible for all agency property and materials issued to them or in their possession or control. Employees must return all agency property and materials immediately upon request or termination. Where permitted by applicable laws, the agency may withhold from the employee's check or final paycheck the cost of any items that are not returned when required.

#### **G. RESIGNATION IN GOOD STANDING**

To resign in good standing an employee must meet all of the conditions listed below:

- 1) Meet with their immediate supervisor and agree to a written plan, acceptable to the Agency for transitional staffing of their position.
- 2) Submit a letter of resignation in accordance with "A" above
- 3) Be eligible for re-hire, or retirement, and have no pending or unresolved disciplinary or grievance issues.
- 4) Work the entire notice period other than pre-approved days off or holidays.

## **SECTION 8: PROGRESSIVE DISCIPLINE, AND GRIEVANCE AND APPEAL PROCEDURES**

## A. PROBLEM RESOLUTION STATEMENT

The Branch-Hillsdale-St. Joseph Board of Health is committed to providing the best possible working conditions for its employees. Part of this commitment is encouraging an open and frank atmosphere in which any work-related problem, complaint, suggestion, or question receives a timely response from management.

Not every problem, complaint, suggestion, or question can be addressed to everyone's total satisfaction, but through understanding and discussion, employees and management can develop confidence and trust in each other.

A pre-disciplinary meeting may be used when the Administrative Services Director has been made aware of a situation, action or behavior of an employee that could result in disciplinary action against an employee. The immediate supervisor shall notify the Administrative Services Director as soon as possible when they become aware of a situation that may result in disciplinary action against an employee. The Administrative Services Director shall request, in writing, and within five (5) days of the alleged situation, that a pre-disciplinary meeting be scheduled with the immediate supervisor and employee. Within the request, the Administrative Service Director shall schedule the date, time, and location of the meeting and state the nature of the allegation(s). The employee may bring a personal representative to the meeting. The Administrative Services Director will act as the mediator of the meeting. If the situation is not resolved, the supervisor will continue with the steps listed in the next section (Progressive Discipline). In the event the Administrative Services Director is also the Supervisor; the Health Officer will appoint another director as mediator.

Where appropriate, the following progressive discipline policy and grievance and appeal procedures are superseded by applicable state laws and rules as further outlined in B(4).

## B. PROGRESSIVE DISCIPLINE

1. Purpose. The purpose of this policy is to promote the equitable and consistent administration of discipline for unsatisfactory work performance and behavior in the workplace.
2. Types of Disciplinary Action. Disciplinary action may call for any five steps – oral reprimand, written warning, suspension without pay, demotion or dismissal. Disciplinary action taken will be dependent on the severity of the problem and the number of occurrences.

Oral Reprimand – This is an action taken by the immediate supervisor in which he/she tells an employee about an action or behavior of the employee which he/she as the immediate supervisor find objectionable and/or wishes corrected. This action must be done in a private setting. The Oral Reprimand is an informal action only for

the employee's benefit and is not relevant to Group I, II, or III Offenses as defined below.

**Written Warning** – This is an action taken by the immediate supervisor in which the supervisor writes out the action or behavior which the supervisor wishes the employee to change, cease, or begin. The written warning must describe in detail the behavior to be corrected, and must give direct and concrete orders for the future, and must point out the consequences of non-compliance with the Written Warning.

**Suspension Without Pay** – This is an action taken by the immediate supervisor which removes the employee from the workplace and payroll for a definite period of time. The reason(s) for the suspension must be in writing. The employee does not accrue salary, vacation or sick leave credit during the time of suspension, nor can the employee use such leave time while on suspension. At the end of suspension, the employee returns to the same salary and benefit conditions that existed prior to the suspension.

**Demotion** – This is an action taken by the immediate supervisor which reduces an employee's classification to a classification with a lower minimum salary. The reason(s) for the demotion must be in writing. The employee's salary must be reduced to fall within the range of the new, lower classification, but no lower annual step designation than the one held in the higher classification. The employee's job duties and responsibilities must be reduced to those of the new, lower classification.

**Dismissal** – This is an action taken by the immediate supervisor which permanently removes an employee from agency employment. The reason(s) for the dismissal must be in writing. Dismissed employees shall leave the premises at the time of dismissal and will be reimbursed for time remaining in the day. Dismissed employees shall be paid for all unused vacation leave that has been earned through the last day of work through a lump sum pay off. Dismissed employees shall not be entitled to any form of 'severance pay'.

3. Group Offenses. Examples of behavior that would be cause for disciplinary action are provided below. These examples are divided into three groups of offenses. Guidelines for administering discipline are set forth within each of these groups and the immediate supervisor shall follow these guidelines when dealing with the types of behavior described.

GROUP I OFFENSES include,

- Habitual tardiness at the beginning of a work day or after lunch (Habitual shall be interpreted to mean two instances in one month without sufficient reason, as determined by the immediate supervisor.)
- Excessive absenteeism, which includes but is not limited to absenteeism without sufficient reason, without proper notification, or in excess of accrued time off

- Disregard of safety rules or common safety practices
- Abuse of break time
- Use of profanity or obscene language in the presence of fellow employees or the public
- Quarreling with fellow staff members on the premises.
- Inefficient use of work time
- Any other offenses of like consequences

The disciplinary procedure in this group shall be: 1<sup>st</sup> offense, written warning; 2<sup>nd</sup> offense, one-day suspension without pay, 3<sup>rd</sup> offense, three-day suspension without pay; 4<sup>th</sup> offense, seven-day suspension without pay, 5<sup>th</sup> offense, dismissal. The violations shall be cumulative for a period of not more than one year.

GROUP II OFFENSES, include

- Injurious or dangerous pranks
- Physical fighting on the premises
- Faulty work and/or covering up faulty work
- Making or publishing of false and vicious and/or malicious statements concerning a fellow employee
- Abuse of the public, either verbal or physical
- Willful disobedience to the proper directive of a supervisor, or other acts of insubordination
- Consumption of any alcoholic beverages during work hours
- Intentionally accessing or discussing patient information for purposes other than the care of the patient or other authorized purposes but for reasons unrelated to personal gain or other breaches of privacy by negligence
- Supervisor dating direct report
- Violation of the agency's Social Media Policy
- Any other offenses of like consequences

The disciplinary procedure in this group shall be: 1<sup>st</sup> offense, three-day suspension without pay, 2<sup>nd</sup> offense, seven-day suspension without pay, 3<sup>rd</sup> offense, dismissal. The violations shall be cumulative for a period of not more than two years.

GROUP III OFFENSES, include

- The misuse or removal from the premises, without prior authorization, of any agency records, confidential information, or of any agency property, except as necessary in the performance of the employee's job duties and responsibilities
- Theft of any property belonging to a fellow employee, a customer, or the agency
- Knowingly falsifying any time slip or other payment voucher, or intentionally giving false information to anyone whose duty it is to make such records

- Absence of three consecutive workdays without notice and without justifiable reason for the failure to report
- Using delegated job responsibilities in an unlawful manner to gain unfair advantage against a fellow employee or the public
- Intentionally accessing or discussing patient information for personal gain or with malicious intent
- Listing on the CPS Registry, Sex Offender Registry, or Criminal Background check failure
- Sexual harassment, sexual misconduct, domestic violence, and/or dating violence
- HIPAA violation
- Any other offenses of like consequences.

The disciplinary procedure in this group shall be up to and including immediate dismissal.

4. Exceptions for Severity. There are certain types of employment problems that are serious enough to justify either a three-day suspension, or, in extreme situations, dismissal from employment, without going through the normal progressive discipline steps.
5. Suspension with Pay. It may be necessary to separate an employee from the workplace while an investigation of an allegation against the employee is taking place. At such times, the employee will be placed on suspension with pay pending the investigation. The employee will retain all other fringe benefits during this time.

### **C. GRIEVANCE AND APPEAL PROCEDURES**

1. Purpose. The purpose of this procedure is to provide a method for complaints to be voiced in an orderly manner such that the proper authorities can resolve such matters fairly and in a timely manner.

This procedure outlines for employees and management the proper steps involved when employees believe that there has been:

Alleged violations or misinterpretation of agency policies but not limited to such matters as conditions of employment, promotion, demotions, dismissals, and layoffs, and a claim of discipline without just cause; and

Alleged discrimination due to political opinion or affiliation, religious opinion or affiliation, gender, race, color, national origin, age, or physical disability.

2. Content of the Grievance. The content of the grievance shall include the following:

- Who is the grievant?
  - What specific event occurred?
  - When did it happen?
  - Where did it happen?
  - What sections(s) of the Personnel Policies have allegedly been violated?
  - What adjustments or corrections are requested for each alleged violation?
3. Representation. The grievant may elect to have one representative of their choice at any step in the grievance and appeal procedure. The representative must be an employee of the agency. The name of the representative attending the grievance or appeal proceeding shall be submitted to the agency's Administrative Services Director at least two (2) working days prior to the hearing date. The grievant and one representative, shall be granted the necessary and reasonable absence from work for the scheduled proceeding under this procedure without loss of pay or leave credits.
4. Steps of a Grievance. All grievances and appeals shall be initiated and processed in the following manner:

Step 1. Employee presents the issue in writing to their immediate supervisor within ten (10) workdays after the occurrence of the alleged incident. The immediate supervisor shall respond in writing, to the employee within five (5) workdays of the initial written presentation of the issue.

Step 2. If the grievance cannot be resolved in Step 1, the employee has the option of submitting a written appeal to the Health Officer within five (5) workdays of receiving written notification from their immediate supervisor. The Health Officer shall confer orally with the employee within five (5) days of receiving the written appeal. The Health Officer shall respond back in writing within ten (10) workdays of receiving the written appeal. If the Health Officer is the immediate supervisor in Step 1 of the grievance process, skip directly to Step 3.

Step 3. If the grievance cannot be resolved in Step 2, the employee has the option of submitting the written grievance to the Board of Health within five (5) workdays of receiving the Health Officer's written response. The Board of Health's Program, Policy and Appeals Committee shall schedule a hearing with the employee at their next regularly scheduled meeting in order to review the grievance. The Program, Policy and Appeals Committee shall respond back in writing within five (5) days of hearing the grievance.

In addition to the internal grievance process, employees are able to file a complaint with the Michigan Department of Health and Human Services. The Human Resources department is required to report any civil rights grievances to the Michigan Division of Victim Services in a timely manner. See appendix A.

5. Time Limitations. Time for this grievance and appeal procedure shall be computed in terms of workdays, which are defined as Monday through Friday, excluding holidays.

In the absence of a timely appeal by a grievant, the last decision at any step of the procedure becomes final. In the absence of a timely answer by any level of management, the grievant may appeal to the next step of the procedure within ten (10) workdays from the expiration of management's time for a decision. Time limits may be extended by mutual agreement in writing. Late appeals at any step may be filed upon showing a good cause for the delay.

6. Appeal Hearing Procedure. The appeal hearing is conducted so that the Board of Health's Program, Policy, and Appeals Committee can review pertinent facts and documents. Some guiding principles apply to the appeal hearing, including:
  - Prior to the appeal hearing, the entire appeal file shall be made available to the Committee and the grievant. The appeal file shall include the initial written grievance and all subsequent management written decisions.
  - Attendance at an appeal hearing is limited to persons determined by the Committee to have a direct connection with the grievance. When requested by the grievant, and the Committee does not object, the hearing may be open to the public.
  - As far as it is operationally possible, the agency must make its employees available as witnesses when requested.
  - The order in which the parties are heard is at the discretion of the Committee.
  - Testimony shall be under oath or by affirmation; both the grievant and their representatives shall be given the opportunity to cross-examine all witnesses who appear to testify.
  - A written record of the hearing shall be kept.
  - Each member of the Committee shall have an equal vote. Decision shall be by majority vote.
7. Freedom from Reprisal. This procedure shall be available to employees and their representatives without restraint, interference, coercion, discrimination or reprisal. No employee of the agency, whether acting in an official capacity for the agency or any other basis, shall interfere with another employee's exercise of their rights under this procedure. No employee of the agency, whether acting in an official capacity employee or any other basis, shall take or threaten to take, any act of reprisal against another staff member because they have exercised, or expressed an intention to exercise any of these rights under this procedure.
8. Group Grievances. Employees having a common complaint may file a group grievance. The grievance shall be filed at the lowest step of the procedure involving a common level of supervision. Employees must choose one spokesperson and one representative of their choice.
9. Appeal by External Applicant for Employment. An external applicant for employment who is not selected may appeal the selection decision if they believe they were discriminated against because of political opinion or affiliation, religious opinion or affiliation, gender, race, color, national origin, age, or physical disability.

Such appeals shall be made in writing and directed to the health officer within fifteen (15) workdays following notification of non-selection. The health officer shall render a written decision within five (5) workdays of receiving an appeal. If the applicant is not satisfied with the written decision of the health officer, he/she may make a written appeal to the Board of Health's Program, Policy, and Appeals Committee. All appeal-hearing procedures outlined previously would then apply.

#### **D. WHISTLEBLOWER POLICY**

Purpose: The purpose of this policy is to further define and supplement the Agency's obligations under the Whistleblowers Protection Act, MCL 15.361, et seq.

Authority: Branch-Hillsdale-St. Joseph Community Health Agency Board of Health. Administrative policies shall be subject to revision or termination by the Board of Health at its discretion. This policy replaces and supersedes any prior policy on this subject matter.

Application: This policy applies to Board of Health Members and all Branch-Hillsdale-St. Joseph Community Health Agency employees. This policy does not apply to a separate branch of government or co-employer that has its own policies covering the same matters covered in this policy.

Responsibility: The Administrative Services Director or designee shall be responsible for the administration and enforcement of this policy.

In support of this policy and in compliance with the Michigan Whistleblowers' Protection Act and certain federal statutes, it is the policy of the Branch-Hillsdale-St. Joseph Community Health Agency that no employee of the Agency will be discharged, threatened or otherwise discriminated against regarding compensation, terms, conditions, location or privileges of employment because that employee or a person acting on behalf of the employee reports or is about to report a violation or a suspected violation of federal, state or local laws or rules or regulations. Likewise, a violation of any state or federal law protecting an employee from retaliation for reporting violations or suspected violations of the law, is prohibited.

Any employee desiring to report a violation or suspected violation of law, may do so by reporting the same to their Division Director, the Health Officer, or the Administrative Services Director/or designee.

## **SECTION 9: EMERGENCY-WEATHER-DISASTER POLICIES**

### **A. BAD WEATHER POLICY**

The Branch-Hillsdale-St. Joseph Community Health Agency offices shall remain open to provide services to consumers unless one of the following occurs:



- Employee receives a text message alert from the agency stating an office is closed. This should occur by 7:30 a.m.
- It is announced on the following local radio stations: WTVB in Coldwater, WCSR in Hillsdale, WBET in Sturgis, or WLKM in Three Rivers that an office is closed.
- An employee who is uncertain of an office's status may contact their supervisor for clarification.

The Administrative Services Director is responsible for conferring with the Health Officer prior to 7 a.m. to determine whether an office shall be closed. When a determination is made to close an office, the Health Officer and Administrative Services Director, or their designee, will utilize the Staff text alert system. Staff are expected to reply to the text by texting "1" to indicate the message was received. The Emergency Call List will be used in the event of a failure within the texting system.

In the event an agency office is closed due to the weather, staff will be compensated at their normal pay rate unless they have already been granted approved leave time, either calling in sick or approved vacation time. Staff that have approved time off will be required to utilize their paid time off.

If an agency office is open, employees who are unable to report due to weather conditions may use annual vacation to be compensated. Employees must inform their immediate supervisor that they are unable to report due to weather conditions as soon as possible. Scheduled staff members are expected to use common sense and good judgment in determining their ability to report to work in bad weather.

## **B. BOMB THREAT PROCEDURE**

When a bomb threat call comes in, the person receiving the call should remain calm and should cause no undue alarm.

The person receiving the call should do the following:

1. Write down the time the call was received and make notations, if possible, while still listening carefully.
2. If another person is available, notify them by passing a note that you have a bomb threat on the phone.

The second person should then do the following:

- a) Notify local law enforcement authorities by calling 9-1-1.
  - b) Notify the person in charge: Health Officer, Administrative Services Director, or immediate supervisor
3. Keep the caller talking as long as possible. Do not hang up on the caller.
  4. Try to find out where the bomb is supposed to be located. Try to pinpoint the area and time it is set to go off.
  5. Try to find out something about the bomb, (size, type of explosives).
  6. Record the time that the caller hangs up.

7. Try to write down or communicate as many specifics and facts that you can immediately after the call. This includes the caller ID number on your phone, any distinguishing voice characteristics, conversation details, and any background noises heard.
8. If you are alone when the call is received, follow the procedure outlined in 2 above as soon as possible after the caller hangs up.
9. If evacuation becomes necessary, this will be a decision of the Health Officer, Agency Directors, or other Supervisory staff present. If not the Health Officer, contact him/her as soon as possible.

### **C. DR. STRONG POLICY**

Any employee who feels that he/she is being threatened or is in harm's way shall page on the overhead paging system: "Dr. Strong to (department or building area)." Employees hearing this page should immediately pick up the phone and dial 9-1-1. Employees hearing this page should **not** report to that specific location. Employees may choose to exit the building or shelter in place for safety. Once the threat is removed from the premises, return to the office gathering place (parking area, main lobby or conference room) for administration to confirm all employees are safe and accounted for.

### **D. EMERGENCY CONTACT PROCEDURES**

In the event of an emergency, or bio-terrorism event, the Agency's text alert system will be used. Employees are expected to text "1" back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. Documentation of employee contacts is made on the Emergency Contact List Documentation Log by the supervisor and forwarded to the Emergency Preparedness Coordinator. The log sheets are retained by the Emergency Preparedness Coordinator. Instructions will be given and employees are expected to follow them in the case of any emergency situation.

Any changes in an Employee's contact information or emergency contact information should be reported to the Administrative Services Assistant and Emergency Preparedness Coordinator.

### **E. FIRE ALARM EMERGENCY PLAN**

When the fire alarm/smoke detector is activated everyone, employees and visitors, will leave the building and go at least 100 feet from the building. Staff are to call 9-1-1.

Visitors with disabilities will be assisted by Agency staff or family member/caregiver. An employee working with a visitor at the time of the alarm is responsible for the visitor's evacuation. Visitors in the lobby should be assisted and accounted for by the staff. If there is an elevator located in the office, no one is authorized to use it.

No one will re-enter the building until they are notified to enter. All cars parked near the entrance should be moved as soon as possible.

**\*\*A Fire drill will be held once a year on a randomly selected day and time\*\***

## **F. LOCK DOWN POLICY**

The Branch-Hillsdale-St. Joseph Community Health Agency takes the safety and security of our staff and clients very seriously. Circumstances may present themselves whereby the Agency must secure its doors and verify the identity of all those who enter. These circumstances may be related to incidents that happen within the Agency or possibly influenced by incidents (such as a prison escape) from outside the Agency. As it is our aim to serve our clients whenever possible we have developed a series of policies that will detail the Agency's actions during such emergencies

### Lock Down Initiation

The decision to lock down a clinic or building will rest with the Health Officer, Agency Director(s), or Supervisor on site. Any employee who notices an incident or is aware of a threat to another employee or client, shall immediately make the information available to one of the above persons. Appropriate action will be taken and the doors to the building will be secured with staff posted to monitor the doors. If the decision is made by the Supervisor it shall be reported as soon as possible to the Health Officer or Administrative Services Director. These actions will be in effect until such time as the Health Officer or Administrative Services Director shall determine they are no longer appropriate.

Circumstances that may initiate a lock down may consist of:

- Domestic violence threat to a client or staff member
- Workplace violence issue or threat
- Civil unrest within the community including protests and picketing of the Agency
- Prison or Jail escapes (mainly Coldwater or Hillsdale)

### Lock Down Procedure (during business hours)

- Deal immediately with whatever issue has prompted the lock down and call the appropriate authorities.
- The staff member directing the lock down should remain calm as to dissuade panic among the staff or visitors.
- Secure all entry points into the buildings.
- Staff and visitors may be moved to an interior or more secure area of the building should the situation require it
- Post a staff member to monitor the entry points even if these points are not to be used to enter into the Agency office.

- All entry points to the Agency will be posted with a sign directing inquiries to a single entry point these signs will be available in the mail room of each office.
- If operations can continue, the person monitoring the designated entry point shall verify the identification and purpose of the person seeking admittance prior to their gaining entry.
- If we are unable to continue operations, a sign shall be posted at all entry points indicating that the Agency is closed and will re-open as soon as possible; we apologize for any inconvenience; please direct them to call the Agency phone number or consult our web site for further information.
- Regardless of which operational state we are in, Public Safety (Law Enforcement, Fire Department, and/or Emergency Medical Service) personnel will be admitted.

#### After Business Hours Lock Down

Our Agency is normally secured during our non-service hours; however, circumstances may present themselves which necessitate the Health Officer or Administrative Services Director to designate the building “locked down” until further notice. The Agency’s text alerting system will be used to notify employees as soon as practical. Employees are expected to text “1” back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. In the event that staff are already in route to work, or did not receive their text or call, they may find that one of the above lock down conditions exists. The Health Officer, Administrative Services Director, (their designee or Public Safety) should already be present and will direct the staff accordingly. It is important that staff maintain their Agency identification badge with them at all times so that they may be positively identified by whoever may be monitoring the entrance. If admitted to the building staff will be directed to a conference room where a briefing will take place to advise them of the situation

## G. DISASTER INITIAL RESPONSE PLAN

The Agency is part of the National Disaster Framework, as such, we may be called up to support a local jurisdiction emergency, natural disaster, outbreak, or other. All employees are requested to maintain personal preparedness in order to mobilize agency resource as soon as possible. The following steps are followed in the event of an Agency emergency response request:

#### Notification

- Employees will receive notification of situation from; Agency text message, Agency email, MiHAN alert, Phone; or other
- Advise your family members of situation and make any arrangements necessary to cover the time you may be absent from your home
- Report to the stated location for assignment to your designated location

#### Assignment

- Report to the Incident Commander or their designee to sign in for duty
- Receive assignment and Job Action Guidelines for that assignment
- Receive the appropriate Identification badge, vest, or other such to designate your duty or position
- Read and understand the guidelines; ask any questions prior to reporting to your station
- Upon arrival at your station identify yourself to your supervisor; any further questions regarding your assignment may be answered at this time; be sure to understand the chain of command structure related to your assignment
- Upon reporting to your station, inventory and assess the condition of any equipment you will be responsible for operating, maintaining, or using during the incident. If you require further equipment or items that are missing from inventory, report this immediately to your supervisor for re-stocking or re-supply.
- Assignment of duty may be in an area of job responsibility outside of your normal daily duties. If you feel the duty is beyond your abilities, notify your supervisor for additional training or reassignment.

## H. OFFICE CLOSURE PROCEDURE

In the event of circumstances, such as mechanical failures or loss of utilities, that may warrant closure of any Agency office(s), the Agency's text alerting system will be used to notify employees as soon as practical. Employees are expected to text "1" back to the agency to confirm message was received. The Emergency Call Down list will be used in the event of a failure in the texting system. Office closure is announced on the Coldwater, Hillsdale, Sturgis, and/or Three Rivers local radio. Employees assigned to that office will be notified if they are to be temporarily reassigned to another Agency office location. All other agency offices shall be notified of the situation and will continue normal operations.

## I. ROBBERY POLICY

When a robbery threat is evident, remain calm and do the following:

1. Follow the instructions of the robber and do not try to intervene.
2. Give them whatever they demand.
3. Stay calm, and listen carefully and try to remember everything about the individual for future use.
4. Call 9-1-1 as soon as possible.

## J. TORNADO EMERGENCY PLAN

In the event of a **Tornado Watch** the weather radio or local radio station will be monitored and regular operations will be maintained until a warning is issued.

In the event of a **Tornado Warning** the entire staff will evacuate to the inner corridor or the restrooms of the lowest level, avoiding the West and South walls.

- Close office windows and doors.
- Stay away from areas with windows and glass doors to avoid flying glass.
- Stay away from corners of rooms and small spaces to avoid debris.
- All persons will remain there until the warning is over.
- Visitors with disabilities will be assisted by Agency staff or family member/caregiver. An employee working with a visitor at the time of the warning is responsible for the visitor's evacuation to the shelter area. Visitors in the lobby should be assisted and accounted for by the clinic administrative staff. Visitors can not be forced to remain at the Agency's office, but they should be advised of the risk if they leave the facility.

The Clinic Administrative Assistant or EH Administrative Assistant will collect the sign-in/sign-out log and bring it to the evacuation location where employees will be accounted for. The sign-in/sign-out sheet will be evaluated to determine which staff are out working in the field.

Field staff are encouraged to seek shelter in a nearby home or building. If no structure is available, find the lowest lying area to seek cover.

**\*\*A Tornado drill will be held once a year on a randomly selected day and time\*\***

#### **K. UTILITY SHUT OFF PROCEDURES**

Any employee who is notified that any area utility is going to shut down their services, at any time of the Agency's work day, must contact the Administrative Services Director . Information on the utility service, caller, and contact phone number should be obtained for the Administrative Services Director to contact. In the absence of the Administrative Services Director, contact the Health Officer. We do not want services interrupted during business hours unless it is an emergency or the utility company cannot fix the problem after Agency hours.

#### **L. BURGLARY OR VANDALISM TO THE AGENCY**

It is possible that an early arriving employee shall discover that a window is broken, door ajar, or other condition which may mean that building has been entered or is unsecured. This staff member shall report this immediately to 9-1-1 for action by Public Safety officials. Under no circumstances should a staff member or client be allowed to enter the building until it is cleared and secured by Public Safety officials.

If this condition is found after entering the building the staff member should immediately exit the building and call 9-1-1. The staff member should then notify the Health Officer or Administrative Services Director. Until the building has been cleared by Public Safety no staff or client should be allowed to enter.

# SECTION 10: INFORMATION TECHNOLOGY POLICIES

## A. COMPUTER USAGE & INTERNET POLICY

**1. PURPOSE:** To ensure that the use of email and internet activities do not negatively impact the confidentiality, availability, integrity, and reputation of Branch-Hillsdale-St. Joseph Community Health Agency (BHSJ) and their assets and to ensure compliance with applicable federal and state laws. Any wired or wireless connecting to BHSJ network falls under this policy.

**2. PHILOSOPHY:** An authorized user's access to the Internet and/or email services for limited personal use is a privilege that, if not properly monitored and controlled, could result in harm to the organization or violations of certain federal and state laws. The primary use of these services is for business and clinical purposes and thus need be appropriately protected.

**3. APPLICABILITY:** This standard applies to all BHSJ Covered Entities.

### 4. DEFINITIONS:

4.1. *Protected Health Information (PHI):* Health information, including demographic information collected from an individual and created or received by a health provider, health plan, employer or health care clearinghouse that relates to the past, present, or future physical or mental health or condition of any individual; the provision of health care to an individual; or the past, present, or future payment for the provision of health care to an individual that identifies an individual or there is a reasonable basis to believe the information can be used to identify the individual and that is transmitted or maintained by electronic media or any other form or medium. PHI does not include individually identifiable health information in education records covered and protected by the Family Educational Right and Privacy Act and employment records held by a covered entity in its role as an employer.

4.2. *Sensitive Information or Data:* Data that should be kept confidential. Access to these data shall require authorization and legitimate need-to-know. It includes Protected Health Information, financial information, personnel data, trade secrets, and any information that is deemed confidential or that would negatively affect BHSJ if inappropriately handled.

### 5. POLICIES:

5.1. All email messages, documents, correspondence, and data obtained through BHSJ or BHSJ network resources are considered BHSJ property.

5.2. Users shall have no expectation of privacy on BHSJ computers, in email or internet use.

5.3. BHSJ may monitor messages and internet use without prior notice.

- 5.4. Users are responsible for reporting any suspected or confirmed violations of this policy to their supervisor or either the BHSJ IT staff.
- 5.5. Users shall not misuse their Internet privileges, i.e., spending excessive time on the Internet for non-work-related business or accessing inappropriate sites.
- 5.6. Users need to refrain from streaming music or radio due to excessive bandwidth on business or personal devices, connected wired or wireless. Refrain from use of sounds and visuals which might be disruptive to others.
- 5.7. Users shall delete chain and junk email messages without forwarding or replying to them. Electronic chain letters and other forms of non-business related mass mailings are prohibited.
- 5.8. Personnel shall not use BHSJ resources to view, record, or transmit materials which violate BHSJ policies. Inappropriate messages, pictures, and/or other visual images/materials include, but are not limited to:
- 5.8.1. **Fraudulent messages** - Messages sent under an anonymous or assumed name with the intent to obscure the origin of the message.
  - 5.8.2. **Harassment messages** - Messages that harass an individual or group for any reason, including race, sex, religious beliefs, national origin, physical attributes, or sexual preference.
  - 5.8.3. **Obscene messages** - Messages that contain obscene or inflammatory remarks.
  - 5.8.4. **Pornographic materials** - This includes, but is not limited to pictures, audio/video files, literature, or newsgroups.
- 5.9. Users shall not engage in spamming activities. Electronic chain letters and other forms of non-business-related mass mailings are prohibited.
- 5.10. Users shall not photograph, post, or transmit patient images or information, electronically or otherwise, unless doing so is in accordance with an approved use or disclosure, and approved methods for doing so are utilized.
- 5.11. Users shall not share sensitive, restricted, or protected health information (PHI) to any cloud provider that has not been approved by the Information Technology Manager (including but not limited to Google Apps, DropBox.com, GoogleDocs, iCloud, etc.).
- 5.12. Personal email accounts shall not be used for official BHSJ business.
- 5.13. BHSJ reserves the right to block access to non-business-related material.



5.14. Email transmission of PHI, if necessary, shall be conducted with the highest level of security applied and only in situations where the email is necessary for the treatment of the patient, payment, and health care operations.

5.14.1. For users of the BHSJ email system only: To send email transmissions over the Internet (outside the BHSJ networks), PHI and other sensitive information shall be encrypted. Email shall not be transmitted over the Internet from any other email system unless/until an encryption method is approved for that email system.

5.15. Users shall comply with all laws related to copyright, intellectual, and personal property.

5.16. Users shall check their email regularly and delete unneeded email.

5.17. Users shall not knowingly download executable files from the Internet without approval from the IT staff.

5.18. Users shall not knowingly enable anyone to gain unauthorized access or control of any device, application, or system to the data networks

5.19. For the BHSJ network, the use of any software or service that hides the identity of the user or the location of the user while using the Internet is prohibited (including but not limited to proxy bypass or anonymization networks such as Tor).

5.20. Users shall not utilize BHSJ passwords on any non-corporate systems (i.e., banking, personal email, etc.).

5.21. Users shall not circumvent BHSJ technical security controls.

5.22. Users shall not transfer restricted or sensitive information to an unencrypted or unapproved device. Any removable storage media assigned by the Agency to individuals, is the property of the Branch-Hillsdale-St. Joseph Community Health Agency. Removable storage media belonging to the Agency should never be used with other devices or equipment that is not owned by the Agency. Likewise, any removable storage media not belonging to the Agency should not be used with devices or equipment that are owned by the agency.

5.22.1. Users shall notify IT staff immediately in the event of a removable storage media device is lost or stolen, or if the computer is damaged.

5.23. Users shall log off application, workstations, laptops, and devices after use.

5.24. Users shall not store restricted or sensitive information on non-BHSJ equipment such as personally-owned devices unless properly authorized to do so.

5.25. Users shall not provide personal or official BHSJ information solicited by unknown individuals or suspected phishing email or websites.

5.26. Users shall follow the same security policies at any alternate workplaces as those required on the BHSJ networks.

6. **CONTACTS:** For questions regarding the requirements, implementation, and enforcement of this standard, contact the Information Technology Staff.

7. **ENFORCEMENT:** Any user found to have violated this policy may be subject to disciplinary action, up to and including termination of employment or assignment, depending on the severity of the infraction. In addition, BHSJ may report the matter to civil and criminal authorities as may be required by law.

## **B. SOCIAL MEDIA POLICY**

This policy covers the use of social media and social networks in the workplace by employees, and by employees outside the workplace. This Policy works in conjunction with, and does not in any way substitute or replace, the Agency's Internet, Electronic Communications, Technology, Harassment and Discrimination Policies.

“Social Media” covers all web-based applications that permit the sharing and collaboration of information via internet communities, social-networking sites, video-sharing sites, wikis, blogs and micro-blogs and others. The Agency has drafted the following policies and procedures to help employees understand the unique issues raised by this evolving communication tool.

- 1) The Agency is committed to providing an environment that encourages the use of computers and electronic information as essential tools to support the Agency's business. The Agency provides a computer system, with internet access, to its employees to enable them to communicate with each other and with the Agency's suppliers and customers in an efficient and cost-effective manner. The electronic communications systems and equipment that is the subject of this policy is owned or leased by the Agency and is provided to employees for their use in connection with their work. It is the responsibility of each employee to ensure that this technology, including the access of social media websites, is used in accordance with these policies.
- 2) This policy covers employees who participate in personal social media or other internet activities; it applies regardless of whether the conduct occurs during working or non-working time, and regardless of whether Agency equipment is used.
- 3) Employees should primarily use the Agency's electronic communications systems and equipment for business-related purposes. While occasional personal use of social media websites is permitted, while the employee is on lunch or breaks, such use should be limited to times when the employee is not required to be performing any

- duties for the Agency, when the use will not conflict with the use of the systems or equipment by any employee who desires to use it for business purposes, and may not in any event be used in a manner contrary to any of the provisions of this Social Media Policy or any other policies that cover electronic communications or workplace technology.
- 4) Employees may not use social media in a manner that compromises the confidentiality of the Agency's confidential or proprietary information, trade secrets or other sensitive information, including PHI.
  - 5) Employees may not use social media in connection with or to support any business ventures, other than those of the Agency, during Agency work hours and/or with Agency equipment.
  - 6) Employees must refrain from any online activities that could reasonably place the Agency in a negative light or negatively impact its reputation during Agency work hours and/or with Agency equipment.
  - 7) Employees may not use or incorporate the Agency's name, logo, imagery, or derivatives thereof in their e-mail addresses, screen names, home pages, screen imagery or otherwise, absent the prior written approval of management.
  - 8) If an Agency employee administers a social media profile that relates to an Agency department, the Agency owns that social media profile. The employee must provide the login and password information to the Administrative Services Director and the IT department.
  - 9) Offensive, demeaning or disruptive messages are prohibited. This includes, but is not limited to, messages that are inconsistent with the Agency's policy concerning equal employment opportunity and its policy prohibiting sexual and other unlawful harassment. Under no circumstances may the Agency's systems or equipment be used to transmit foul, indecent, scandalous or improper information, via social media or otherwise. Moreover, the use of the Agency's electronic communications systems and equipment in support of political, religious or other controversial causes is an inappropriate use of the system. Additionally, offensive racial or sexual comments are expressly prohibited.
  - 10) Employees should assume that regardless of any privacy settings on various social media platforms, social media is not private. Information becomes public the moment it is published on the internet. Employees should assume that co-workers and members of the Agency's management will see anything and everything posted online, and should act accordingly.
  - 11) Employees should not expect that anything that is sent or received using the Agency's electronic communication systems and equipment is the employee's private property. Employees should not have any expectation of privacy with respect to those communications, whether communicated via social media sites or otherwise. The Agency may, from time-to-time, as it sees fit, monitor, review, intercept or gain

- access to communications employees initiate or receive on the Agency's electronic communications systems and equipment. Employees' use of the Agency's systems will constitute consent to such monitoring, reviewing, interception or access. The Agency may, but has no requirement to, provide notice, either before or after any review of communications.
- 12) Periodically, the Agency may obtain photographs, videos or other likenesses of its employees at Agency-related events, such as outings, holiday parties, and charitable events. If an employee does not want his or her photograph, video or other likeness recorded at such an event posted on the Agency's website, or any social networking site, the employee must inform the Administrative Services Department in writing.
  - 13) Employees should refrain from making social media postings that could be considered as creating a hostile work environment, as harassing, or otherwise inappropriate or harmful to the agency. Concerns about job performance or other potential complaints against co-workers or supervisors must be handled through the appropriate channels and remain consistent with the Agency's policies.
  - 14) As with all of its policies, the interpretation of the Social Media Policy is within the sole discretion of management and the Agency reserves the right to alter, amend, modify, revoke, suspend or terminate all or any part of this Social Media Policy, at any time, in its sole discretion, with notice to all employees via their Division Directors. Moreover, this policy in no way affects or alters an employee's at-will employment status.
  - 15) If, at any time, an employee is uncertain about how to apply these policies and procedures or has any question about his or her participation in social media activities, the employee should contact the Administrative Services Director. Each employee bears his or her own personal responsibility to follow this policy and use good judgment with his or her social media activities. If an employee has any doubt whether online activities violate this policy, he or she should ask their Division Director before engaging in the conduct.
  - 16) Employees have an affirmative duty to report to a supervisor, or director, any conduct that violates this Social Media Policy. In such circumstances, an employee should follow the same reporting procedures set forth in the Agency's harassment policy.
  - 17) Any employee who violates this Social Media Policy shall be subject to discipline, as set forth in the agency's discipline policies..

## **SECTION 11: INFORMATION REQUESTS-HIPAA-CONFIDENTIALITY**

### **A. FREEDOM OF INFORMATION REQUEST PROCEDURE**

Any employee or department who receives a letter requesting information on medical records

or environmental issues, must forward this request on to the Administrative Services Director who in turns okays the information to be given out or denied to that particular client. A copy is given back to the employee and one copy kept in central file for future referencing.

## **B. MEDICAL RELEASE PROCEDURE**

Any questions regarding who a Medical Release form goes to, should always be directed to the Administrative Services Director. He/she will then send it on to have copies made and sent to the proper place and a copy of the release form will be made and put in to the clients file for future reference.

## **C. SUBPOENA PROCEDURE**

Any subpoena sent to any employee of the Agency must be presented to the Administrative Services Director so that he/she may go over the document and make sure that all rules are followed in complying with the subpoena. It will be in turn given back to the employee and a copy kept in central file for future referencing.

## **D. CONFIDENTIALITY / SANCTION POLICY**

### **Purpose**

HIPAA has required the BHSJCHA to create privacy and security policies in order to fulfill our duty to preserve the confidentiality and integrity of client Protected Health Information (PHI). This policy applies to all Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA) employees (regular or temporary), contractors, volunteers, students or other observers, and any others who have access to the BHSJCHA's Protected Health Information.

The purpose of this Confidentiality/Sanction policy is to ensure that employees have the necessary client health information to provide the highest quality care possible while protecting the confidentiality of that information to the highest degree, so that clients do not fear to provide information to our agency.

The BHSJCHA will not tolerate violations of these policies and standards, and such violations may constitute grounds for disciplinary action up to and including termination, professional discipline, and criminal prosecution.

### **Assumptions**

Information will be collected from clients only for the purposes of providing services and for supporting the delivery, payment, integrity, and quality of those services.

Employees will use their best efforts to ensure the accuracy, timeliness, and completeness of data collected from clients. Entries in records will not be altered or destroyed, only amended.

Employees will treat all written, electronic, and verbal information about clients including financial, demographic, and lifestyle information as sensitive and confidential. Employees will recognize that some medical information is particularly sensitive, such as HIV/AIDS, mental health, developmental disability, alcohol and drug abuse, sexually transmitted disease, and communicable disease information. Disclosure of such information could severely harm clients, by causing loss of employment opportunities and insurance coverage, as well as the pain of social stigma. BHSJCHA employees will treat such information with additional confidentiality protections.

## Security

Employees will make every effort to maintain confidentiality of written and electronic records by ensuring that only authorized staff will have access to this information during the workday. Protected Health Information will not be left unattended in areas where visitors or other clients may see it. Charts will be placed face down on counter areas and facing the wall in bins so names are not visible, and computer screens will be turned so clients cannot see them. Schedules should not be located where clients or unauthorized persons may view them. Sign in sheets can be used, but should contain names only. All confidential records will be stored in locked areas when unattended. Records will be destroyed by shredding, in accordance with BHSJCHA record retention rules. Any confidential information that is not a part of a permanent record (and is no longer needed) will be shredded, not thrown away in the regular trash.

Precautions will also be taken with electronic devices like computers, laptops, tablets, smart phones and flash drives. Devices will be password protected and locked when not in use, and security measures in place to protect from unauthorized viewing and theft.

If records are taken off site (with Supervisor or Director permission), special care must be taken to know the whereabouts of the records at all times. Staff must take precautions to prevent the access and viewing of these records by unauthorized persons. Paper records should be stored in a locked case or box for privacy and transported in the trunk of a vehicle if possible. Computers being taken off the premises for work should be off or locked when not in actual use. If computers are traveling in a vehicle, ideally, they should also be transported in the trunk. Both paper records in the locked case and computers must be removed from the car and taken with the employee when the employee leaves the car. A computer or paper records that are taken home (with Supervisor or Director permission) need to be kept in a locked home and not left in a vehicle overnight.

## Privacy

Every effort should be made to ensure that confidential conversations remain private. Employees must use their best judgment to reduce the risk of unauthorized disclosures by closing doors or reception windows when on the phone or talking to a client, lowering voices, and meeting with clients in clinic rooms rather than in the halls or in waiting rooms.

Employees must also remember that the fact that a client chooses to obtain BHSJCHA services is in itself confidential information. We see many clients out in public during working hours and in our off-work hours. Employees should not acknowledge verbally in public awareness that a client may obtain services at the BHSJCHA. A client has the right to announce that they come to the BHSJCHA for services if they choose. We do not have a right to discuss their visit to the BHSJCHA without their permission.

### Minimum Necessary

The BHSJCHA will make all reasonable efforts not to use or disclose more than the minimum amount of Protected Health Information necessary to accomplish the intended purpose. See the Minimum Necessary Policy for further information.

### Receiving Confidential Information

Incoming mail is sorted daily and distributed. To protect privacy, confidential information that is received will be placed in envelopes or stapled closed prior to placing in the individual mailboxes.

Incoming confidential faxes will be received and stored in a secure area where clients have no access. They will be separated for delivery to individuals so confidentiality is maintained.

Incoming confidential information delivered by courier services must be distributed to the appropriate staff in an envelope to protect privacy, and stored in a secure area until it is reviewed.

### Uses and Disclosures of Protected Health Information

The HIPAA Privacy Act allows the BHSJCHA to use and disclose Protected Health Information for purposes of treatment, payment and health care operations without authorization. Even without specific client consent, we are required to limit such uses or disclosures to the minimal amount of PHI that is reasonably required to provide these services.

Disclosures also permitted without client authorization include the following:

- Those required by law or for law enforcement purposes
- For public health activities, including communicable disease follow-up
- For reporting regarding victims of abuse, neglect, or domestic violence
- For health oversight activities

Clients must give authorization to disclose their Protected Health Information for specific purposes, which are generally other than treatment, payment or health care operations, or to disclose their confidential information to a third party specified by a client. Client authorization is also required to disclose psychotherapy notes to another entity.

Psychotherapy notes are those notes of a health professional used to analyze contents of a

conversation during private, joint, or group counseling session. Psychotherapy notes do not include any information that is kept in a patient medical record. For further clarification of psychotherapy notes please consult [HHS.gov HIPAA for professionals special topics](https://www.hhs.gov/hipaa/for-professionals/special-topics) .

Disclosure of PHI is on a “need to know” basis, in that only the information that is necessary to accomplish the purpose is disclosed. Documentation of what PHI is disclosed, as well as when and to whom it is disclosed is recorded in the client’s medical record.

Further detail about the uses and disclosures of Protected Health Information can be found in the HIPAA Manual where specific policies are located including Release of Information, E-mail, Fax, and Texting. All BHSJCHA employees are required to be familiar with these policies. Any questions about the uses and disclosures of Protected Health Information should be directed to a Supervisor or Director.

### Sanctions

Any employee of the BHSJCHA, who believes another employee has breached the facility’s security or privacy policies, or otherwise breached the integrity or confidentiality of client or other sensitive information, should immediately report such a breach to a Supervisor or Director.

The Health Officer and Directors will convene a committee to conduct a thorough and confidential investigation into the allegations. The BHSJCHA will not retaliate against or permit reprisals against a complainant. Allegations not made in good faith, however, may result in discharge or other discipline.

Disciplinary action will follow the policy outlined in the BHSJCHA Personnel Policies. The degree of discipline is a discretionary decision which management will make based on the nature of the offense, the employee’s history, and other facts and circumstances deemed relevant. Disciplinary actions may include:

- Verbal warning
- Written warning
- Suspension
- Termination of employment

The BHSJCHA will follow the guidelines in the Personnel Policy manual to determine if a breach has occurred, the severity of a breach and the resulting sanctions recommended for the person involved in a breach.

Violation of the facility’s security or privacy policies and standards may constitute a criminal offense under HIPAA, other federal laws such as the Federal Computer Fraud and Abuse Act of 1986, 18 U.S.C.1030, or state laws. Any employee who violates, or is reasonably suspected of having violated, such a law may expect that the BHSJCHA will provide



information concerning the violation to appropriate law enforcement personnel and will cooperate with any law enforcement investigation or prosecution.

Further, violations of the BHSJCHA security or privacy policies and standards may constitute violations of professional ethics and be grounds for professional discipline. Any individual subject to professional ethics guidelines and/or professional discipline should expect the BHSJCHA to report such violations to appropriate licensure/accreditation agencies and to cooperate with any professional investigation or disciplinary proceedings.

All employees (regular or temporary), contractors, volunteers, students, or other observers with the BHSJCHA must follow this policy and are required to sign a Confidentiality Statement. Violation of this policy is grounds for disciplinary action, up to and including termination of employment. According to HIPAA rules, a person who knowingly obtains, misuses, or discloses Protected Health Information may incur criminal penalties that include a fine of not more than \$50,000 and/or imprisonment of not more than 1 year. If the offense is “under false pretenses,” a person may incur a fine of not more than \$100,000 and/or imprisonment of not more than 5 years. If the offense is with intent to sell, transfer, or use Protected Health Information for commercial advantage, personal gain, or malicious harm, a fine of not more than \$250,000 and/or imprisonment of not more than 10 years may occur.

This Confidentiality/Sanction Policy is intended as a guide for the efficient and professional performance of employees’ duties to protect the integrity and confidentiality of Protected Health Information. All employees, contractors, volunteers, students, and other observers with the BHSJCHA are expected to comply and cooperate with the facility’s administration of this policy.

## **SECTION 12: SUBSTANCE ABUSE POLICY**

The Branch-Hillsdale-St. Joseph Community Health Agency (the Employer) takes seriously the problem of drug and alcohol abuse. We are committed to provide a substance abuse free work place for our patients, clients, and employees. This policy applies to all employees of the Agency, without exception, including part-time, temporary, and on call employees, and volunteers.

### **POLICY:**

1. No employee is allowed to consume any alcoholic beverage, marijuana product, or illegal/unauthorized drugs while performing his/her job duties for this Agency.
2. No employee may possess, sell or give to another any alcohol, marijuana, or drug, whether authorized or unauthorized, during assigned work time or while performing any services for the employer. This section shall not apply to employees who are authorized by law or job description to prescribe or dispense medication.
3. An employee may consume or possess authorized prescription, or over-the-counter, medications in the manner prescribed by the employee’s physician or directed by the manufacturer.

5. The Employer will not tolerate employees who report for duty while impaired or under the influence of alcoholic beverages or unauthorized drugs.
6. All employees should report evidence of alcohol or drug abuse to a supervisor or a personnel representative immediately. In cases where the use of alcohol or drugs pose an imminent threat to the safety of persons or property, an employee must report the violation. Failure to do so could result in disciplinary action for the non-reporting employee.

#### DEFINITIONS:

1. Unauthorized Drug- Any drug that cannot be obtained legally or has been illegally obtained, including prescription drugs obtained without a prescription, prescribed or over the counter drugs used other than as properly instructed, and drugs sold or represented as being illegal. This definition includes, but is not limited to Amphetamines, Marijuana or Cannabinoids Cocaine, Opiates, Phencyclidine, or any of their derivatives or metabolites. The agency considers marijuana and cannabinoid products as unauthorized drugs because they are considered illegal under federal law.
2. Authorized Drug – Prescribed drugs that are used as prescribed by a medical professional or over the counter drugs used as intended by the manufacturer.
- 3 Under the Influence – For the purpose of this Policy, that the employee is either visibly affected by alcohol or an unauthorized drug, or a testing device or medical test or examination demonstrates any detectable amount of an unauthorized drug, alcohol or a metabolite of either, in the employee’s blood, breath, urine or body.

#### VIOLATION OF THE POLICY:

1. Employees who violate the Substance Abuse Policy will be subject to disciplinary action, up to and including termination.
2. After a positive drug test, or upon reasonable suspicion that an employee has violated this policy, a pre-disciplinary hearing will be scheduled, in accordance with the Employer’s Personnel Policies.
3. Any employee who suffers from drug or alcohol abuse may request employer assistance, before the occurrence of any misconduct or the commencement of disciplinary action. The employee may be eligible for referral to the Employee Assistance Program (EAP) or for a medical leave of absence. Employees with a problem are encouraged to contact the Human Resources Representative for details. Such requests are considered confidential. An employee referred to the EAP is not relieved from job expectation requirements. However, seeking assistance after disciplinary action has begun or is imminent will not preclude disciplinary action, up to and including termination.

## DRUG TESTING:

As a part of our policy to ensure a substance abuse free workplace, employees may be asked to submit to a medical examination and/or tested for the presence of alcohol, marijuana, and/or drugs. The Employer reserves the right, at the employer's discretion, to examine and test for drugs, marijuana, and alcohol. Some such situations where testing may be requested may include, but not be limited, to the following circumstances.

1. All employees who are offered employment;
2. Where there are reasonable grounds for believing an employee is under the influence of alcohol, marijuana, or drugs;
3. As part of an investigation of any accident in the workplace in which there are reasonable grounds to suspect alcohol, marijuana and/or drugs contributed to the accident;
4. As a follow-up to a rehabilitation program;
5. As necessary for the safety of employees, patients, clients or the public at large, where allowed by statute;
6. When an employee returns to duty after an absence other than from accrued time off such as vacation or sick leave.

It is a condition of your continued employment that you comply with this Substance Abuse Policy.

## Appendix A

### **Michigan Department of Health and Human Services Division of Victim Services Methods of Administration for Ensuring Division of Victim Services Subrecipients Comply with Applicable Federal Civil Rights Laws**

The Michigan Department of Health and Human Services (MDHHS), Division of Victim Services (DVS), in cooperation with the Office for Civil Rights, Office of Justice Programs, U.S. Department of Justice (OCR), has developed a Method of Administration for ensuring that DVS subrecipient organizations who receive grant funds through DVS from the U.S. Department of Justice (Victims of Crime Act (VOCA) and Violence Against Women Act (VAWA)) and from U.S. Department of Health and Human Services (Family Violence Prevention and Services Act (FVPSA)) comply with applicable federal civil rights laws.

#### **I. Policy for Addressing Discrimination Complaints**

DVS has developed the written Program Discrimination Complaint Policies and Procedures and Employment Discrimination Complaint Policies and Procedures, comprehensive policies and procedures for receiving complaints from individuals who are receiving funded services at or are employees of a DVS subrecipient receiving funding grant funds from VOCA, VAWA, and FVPSA. DVS maintains an online, public copy of these policies, as well as a copy of the Methods of Administration and a downloadable Federal Civil Rights Complaint form that may be manually completed and forwarded to the MDHHS Equal Employment Opportunity (EEO) Officer, who serves as the Civil Rights Complaint Coordinator. The EEO Officer for the MDHHS is designated in the policy as the coordinating office for the civil rights compliance process. The EEO Officer must fully comply with Program Discrimination Complaint Policies and Procedures and the Employment Discrimination Complaint Policies and Procedures, pertaining to handling of complaints, and which establishes an orderly, efficient, and effective procedure for receiving, documenting, processing, and resolving complaints filed.

Civil Rights Compliant Coordinator  
Equal Employment Opportunity Officer  
Michigan Department of Health and Human Services  
235 South Grand Avenue, Suite 708  
P.O. Box 30037  
Lansing, MI 48909  
Phone: (517) 335-4722

Discrimination complaints should be forwarded to the EEO Officer, who shall also refer discrimination complainants in grant-funded services to the OJP's OCR. The EEO Officer will be available to assist individuals in completing the Program Discrimination Complaint Form and shall further forward complaints to the appropriate state or federal agency as appropriate. The EEO Officer will provide individuals with information about Employment Discrimination complaints.

The EEO Officer shall follow the program or employment discrimination complaint policies and procedures to respond to complaints. The EEO Officer shall send the complainant a letter acknowledging receipt of the complaint. The letter to the complainant will also notify the complainant from DOJ-funded (VAWA or VOCA) programs that he or she may also file a complaint with the OJP's OCR by submitting a written complaint to:

Office for Civil Rights,  
Office of Justice Programs, U.S. Department of Justice  
810 7th Street, N.W.  
Washington, DC 20531  
Phone: (202) 307-0690  
TTY: (202) 307-2027  
Fax: (202) 354-4380  
<https://www.ojp.gov/program/civil-rights/filing-civil-rights-complaint>

## **II. Notification to Subrecipients of Civil Rights Requirements**

Applicants for the VOCA, VAWA, FVPSA grant programs will be notified of their civil rights non-discrimination obligations and of prohibited discrimination. The grant agreement and attachments will include links to required federal and state award special conditions.

Subrecipients will annually certify their compliance in the DVS Annual Certifications Checklist, which includes federal civil rights obligations, including dissemination of information to project staff.

The Program Discrimination Complaint Policies and Procedures and Employment Discrimination Complaint Policies and Procedures are available on the grantee section of the Division of Victim Services website.

## **III. Protocol for Monitoring Subrecipient Compliance with Civil Rights-Related Award Requirements**

Subrecipients will be required to complete the Annual Certifications Checklist, which will include federal civil rights obligations. In the Annual Certifications Checklist, subrecipients will also certify that they have notified or will notify all employees, clients, customers, and program participants that discrimination is prohibited.

Monitoring for the joint VOCA/VAWA/FVPSA-funded programs and VAWA-only programs will include standards reviews, and contract reviews which will confirm that subrecipients have the applicable policies and procedures in place to ensure compliance with federal civil rights laws and establish a process for employee and beneficiary complaints. These organizations' policies will be reviewed twice during a five-year period.

Monitoring for the VOCA-only programs will include contract reviews which will confirm that subrecipients have the applicable policies and procedures in place to ensure compliance with federal civil rights laws and establish a process for employee and beneficiary complaints. These organizations' policies will be reviewed twice during a during five-year period.

Subrecipients will be informed that all documentation should be made available to DVS upon request.

**IV. Methodology for Training Subrecipients on Civil Rights-Related Award Requirements**

At minimum, DVS will refer subrecipients to OJP OCR’s Civil Rights Trainings and require that the subrecipient’s Civil Rights Contact complete the training at least once in the grant period. The purpose of the training is to inform subrecipients on their responsibility for upholding the civil rights laws and for observing non-discrimination obligations. All subrecipients are required to certify in the Annual Certifications Checklist that they have received federal civil rights training.

**BRANCH-HILLSDALE-ST. JOSEPH COMMUNITY HEALTH AGENCY**  
**BY-LAWS for Board of Health**

**ARTICLE I. NAME**

The Boards of Commissioners of the Counties of Branch, Hillsdale and St. Joseph under Michigan's Public Health Code, Act 368, P.A. 1978, MCL 333.2415, have established a District Health Department, which is hereinafter called the Community Health Agency.

**ARTICLE II. OBJECTIVES**

**Section 1.** These by-laws are subject to the Intergovernmental Agreement between Branch, Hillsdale and St. Joseph counties which governs in the case of inconsistencies.

**Section 2.** The primary purpose of this organization is to provide the necessary policies and administrative controls for Branch, Hillsdale and St. Joseph Counties to strengthen and enforce health regulations, and to improve the quality of public health services to the people residing in this health jurisdiction.

**ARTICLE III. MEMBERS**

The governing body of the Community Health Agency shall be the Board of Health, hereinafter called the Board. The Board shall be composed of representatives from the respective counties' Boards of Commissioners, who are current county commissioners, and in accordance with Michigan's Public Health Code, Act 368, P.A. of 1978, MCL 333.2415.

**ARTICLE IV. OFFICERS**

**Section 1.** The election of a Chairperson and Vice Chairperson and appointment of committees for the calendar year will be held at the first regularly scheduled meeting in January. The Chairperson and Vice Chairperson shall not be from the same county.

**Section 2.** Following the elections of the Chairperson and Vice Chairperson, a Board member may be designated to attend the annual meeting of the Michigan Association of Local Public Health (MALPH). The Health Officer shall be designated as the primary delegate to represent the Community Health Agency at the MALPH meetings.

**Section 3.** Current officers and committee members shall remain in place until newly elected. In the event that the current Chairperson resigns from the Board, resigns or is

removed as a county commissioner from their respective county or no longer meets the requirements to serve on the Board, the Vice Chairperson shall assume the Chairperson's duties. The Board of Health will then at the next regular meeting take nominations for the Vice Chairperson position and elect a new Vice Chairperson. As these positions are elected on a rotation between the counties the Vice Chair position will be elected from the commissioners from the county in the next rotation.

Section 4. In the Event that the Chair and the Vice-Chair from the prior year do not return to the Board of Health for the organizational meeting, the Health Officer will call the organizational meeting for the Board of Health to order and conduct business through the election of a new Chairperson.

## **ARTICLE V. MEETINGS**

**Section 1.** The Board will meet on the fourth Thursday of each month at 9:00 AM unless otherwise determined by the Board. In the event that the Board meets less than once per month, claims may be negotiated, resolved or paid prior to the next Board meeting by the Health Officer and Chairperson of the Board of Health, who shall report the action to the Board at its next regular meeting as outlined in Michigan's Public Health Code, Act 368, P.A. 1978, MCL 333.2415.

**Section 2.** The agenda for each Board meeting shall be set by the Health Officer in consultation with the Chairperson of the Board. An individual wishing to suggest a topic for discussion at a Board meeting shall submit a written request for consideration to the Chairperson of the Board at least ten (10) days prior to the meeting. The request shall include the subject matter, estimate time needed, individual(s) to appear and contact information of the requestor.

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

**Section 4.** The Board shall abide by requirements of Michigan's Open Meetings Act.

**Section 5.** Special meetings of the Board of Health or its Committees may be held at any time upon call of the Board Chairperson by providing just purpose and giving at least 18 hours' notice.

**Section 6.** Voting for the expenditure of funds, the adoption of a resolution or ordinance shall be by a roll-call vote. All other votes shall be by voice vote.

**Section 7.** Meetings will be conducted according to the latest edition of Roberts' Rules of Order.



## **ARTICLE VI. QUORUM**

Four (4) members of the Board shall constitute a quorum for the transaction of business.

## **ARTICLE VII. COMMITTEES**

**Section 1.** The Finance Committee and the Program, Policy and Appeals Committee shall be two (2) standing committees established by the Board. The Board may, from time to time, establish special committees and/or additional standing committees for other matters of concern to the Community Health Agency.

**Section 2.** The Board Chairperson, with the approval of the Board, shall appoint a representative from each county to the Finance Committee and to the Program, Policy and Appeals Committee. Appointments to committees shall be made annually.

## **ARTICLE VIII. CONFLICT OF INTEREST**

No Board of Health member will vote or otherwise participate in a decision by the Board of Health if they have a direct personal interest, wherein they may financially or materially gain from the action of the Board of Health.

## **ARTICLE IX. AMENDMENTS**

These by-laws may be amended at any regular meeting by a majority vote of the Board. A proposed amendment shall be submitted in writing to all members at least ten (10) days prior to the meeting. Any amendment thereto shall become effective immediately upon its adoption.

Reviewed and amended by the Board of Health on the 25<sup>th</sup> day of January 2024.



**BRANCH-HILLSDALE-ST. JOSEPH  
COMMUNITY HEALTH AGENCY**

**2025 CERTIFICATE OF RECOGNITION  
FOR YEARS OF DEDICATED SERVICE**

**Joshua Englehart 5 Years  
Annalisa Rice 5 Years  
Lisa Palmer 5 Years**

**Joseph Frazier 20 Years**

**Theresa Fisher 25 Years**

**Rebecca Burns 30 Years**

**Lee Zimmerman 35 Years**



2425 E. Grand River Ave.,  
Suite 1, Lansing, MI 48912  
☎ 517.323.7500  
📠 517.323.6346

January 16, 2025

Board of Public Health  
Branch-Hillsdale-St. Joseph Community Health Agency  
Coldwater, Michigan

We are engaged to audit the financial statements of the governmental activities and the major fund of the Branch-Hillsdale-St. Joseph Community Health Agency for the year ended September 30, 2024. Professional standards require that we provide you with the following information related to our audit. We would also appreciate the opportunity to meet with you to discuss this information further since a two-way dialogue can provide valuable information for the audit process.

Our Responsibilities under U.S. Generally Accepted Auditing Standards, *Government Auditing Standards*, and the Uniform Guidance

As stated in our engagement letter dated December 19, 2022, our responsibility, as described by professional standards, is to express an opinion about whether the financial statements prepared by management with your oversight are fairly presented, in all material respects, in conformity with U.S. generally accepted accounting principles. Our audit of the financial statements does not relieve you or management of your responsibilities.

In planning and performing our audit, we will consider Branch-Hillsdale-St. Joseph Community Health Agency's internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to provide assurance on the internal control over financial reporting. We will also consider internal control over compliance with requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance and to test and report on internal control over compliance in accordance with the Uniform Guidance.

As part of obtaining reasonable assurance about whether Branch-Hillsdale-St. Joseph Community Health Agency's financial statements are free from material misstatement, we will perform tests of its compliance with certain provisions of laws, regulations, contracts, and grants. However, providing an opinion on compliance with those provisions is not an objective of our audit. Also in accordance with the Uniform Guidance, we will examine, on a test basis, evidence about Branch-Hillsdale-St. Joseph Community Health Agency's compliance with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Compliance Supplement applicable to each of its major federal programs for the purpose of expressing an opinion on Branch-Hillsdale-St. Joseph Community Health Agency's compliance with those requirements. While our audit will provide a reasonable basis for our opinion, it will not provide a legal determination on Branch-Hillsdale-St. Joseph Community Health Agency's compliance with those requirements.

Our responsibility is to plan and perform the audit to obtain reasonable, but not absolute, assurance that the financial statements are free from material misstatement. As part of our audit, we will consider the internal control of Branch-Hillsdale-St. Joseph Community Health Agency. Such considerations will be solely for the purpose of determining our audit procedures and not to provide any assurance concerning such internal control.

We are responsible for communicating significant matters related to the audit that are, in our professional judgment, relevant to your responsibilities in overseeing the financial reporting process. However, we are not required to design procedures specifically to identify such matters.

Generally accepted accounting principles provide for certain required supplementary information (RSI) to supplement the basic financial statements. Our responsibility with respect to management's discussion and analysis, budgetary comparison schedule, schedule of changes in the net pension liability and related ratios, and schedule of employer contributions, which supplement the basic financial statements, is to apply certain limited procedures in accordance with generally accepted auditing standards. However, the RSI will not be audited and, because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance, we will not express an opinion or provide any assurance on the RSI.

We have been engaged to report on the schedule of support services and schedule of expenditures of federal awards, which accompany the financial statements but are not RSI. Our responsibility for this supplementary information, as described by professional standards, is to evaluate the presentation of the supplementary information in relation to the financial statements as a whole and to report on whether the supplementary information is fairly stated, in all material respects, in relation to the financial statements as a whole.

#### Planned Scope, Timing of the Audit, and Other

An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements; therefore, our audit will involve judgment about the number of transactions to be examined and the areas to be tested.

Our audit will include obtaining an understanding of the entity and its environment, including internal control, sufficient to assess the risks of material misstatement of the financial statements and to design the nature, timing, and extent of further audit procedures. Material misstatements may result from (1) errors, (2) fraudulent financial reporting, (3) misappropriation of assets, or (4) violations of laws or governmental regulations that are attributable to the entity or to acts by management or employees acting on behalf of the entity. We will generally communicate our significant findings at the conclusion of the audit. However, some matters could be communicated sooner, particularly if significant difficulties are encountered during the audit where assistance is needed to overcome the difficulties or if the difficulties may lead to a modified opinion. We will also communicate any internal control related matters that are required to be communicated under professional standards.

We have identified the following significant risk(s) of material misstatement as part of our auditing planning:

According to GAAS, significant risks include management override of controls, and GAAS presumes that revenue recognition is a significant risk. Accordingly, we have considered these as significant risks.

We expect to begin our audit procedures in January 2025 and issue our report on or before March 31, 2025. Aaron M. Stevens, CPA is the engagement partner and is responsible for supervising the engagement and signing the report or authorizing another individual to sign it.

This information is intended solely for the use of the Board of Directors and management of the Branch-Hillsdale-St. Joseph Community Health Agency and is not intended to be, and should not be, used by anyone other than these specified parties.

Very truly yours,

*Maney Costeiran PC*

# PUBLIC COMMENT

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