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**BOARD OF HEALTH Meeting**  
**Agenda for March 27, 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. Approval of the Minutes from February 27, 2025\*
2. Open Meetings Act Presentation – Andrew Brege
3. Public Comment
4. Health Officer’s Report – pg 6
5. Medical Director’s Report – pg 19
6. Departmental Reports
  - a. Area Agency on Aging – pg 21
  - b. Personal Health & Disease Prevention – pg 22
  - c. Health Education & Promotion – pg 28
  - d. Environmental Health – pg 31
7. Financial Reports
  - a. Approve Payments\* - pg 41
  - b. Review Financials\* - pg44
8. Committee Reports
  - a. Finance Committee – Approval of the March 17, 2025 meeting minutes – pg 48
  - b. Program, Policies, and Appeals – Did not meet
9. Unfinished Business
  - a. Updated wallet cards
10. New Business
  - a. Three Rivers Interior Paint Project\* - pg 49
  - b. Strategic Plan Update – pg 50
11. Public Comment
12. Commissioner Comments
13. Adjournment - Next meeting: April 24, 2025

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

#### Upcoming Meeting Dates:

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

#### Upcoming Board Education Topics:

- April 24, 2025 – Audit Presentation (during the meeting)
- May 22, 2025 – Finance
- September 25, 2025 – KOHA
- November 13, 2025 – to be determined

## February 27, 2025 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Vice-Chair, Brent Leininger at 9:00 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, Rick Shaffer, and Kevin Collins. Tim Stoll was absent.

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

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

Mr. Shaffer moved to approve the minutes from the January 23, 2025 meeting with support from Mr. Collins. 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: Board of Health Bylaws, Personnel Policy Updates, Environmental Health Electronic Applications Portal, Staffing Update, AAA IIIc No Wrong Door Grant Staffing, Respiratory Virus Season, Public Health Concerns, Coldwater Office, Hillsdale Office, Three Rivers Office, and Sturgis Office.

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

### Departmental Reports:

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

### Financial Reports/Expenditures

- Mr. Hoffmaster moved to approve the expenditures for January with support from Mr. Collins. The motion passed unopposed.
- Mr. Shaffer moved to place the financials for January on file with support from Mr. Hoffmaster. The motion passed unopposed.

### Committee Reports:

- Finance Committee – Mr. Hoffmaster moved to approve the minutes from the February 14, 2025 Board of Health Finance Committee meeting with support from Mr. Houtz. The motion passed unopposed.
- Program, Policy, & Appeals Committee – Did not meet.

Unfinished Business:

- Mr. Hoffmaster moved to approve the Board of Health Bylaws with support from Mr. Houtz. The motion passed unopposed.

New Business:

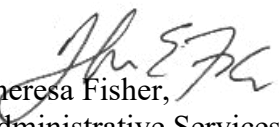
- Mr. Houtz moved to accept the quote for the purchase of new phones from Telnet for a total cost of \$18,622.50. The motion received support from Mr. Hoffmaster and passed unopposed.
- Mr. Hoffmaster moved to accept the quote from Michigan Security and Lock for the additional electronic door locks in Hillsdale for a total cost of \$6,549 with support from Mr. Houtz. The motion passed unopposed.
- Mr. Hoffmaster moved to approve the agency to hire an additional full-time employee for the No Wrong Door grant, with support from Mr. Shaffer. The motion passed unopposed.
- The AAA IIIc annual conflict of interest statement was provided to all board members was discussed and provided to board members for signature.
- Mr. Shaffer moved to approve the updated Personnel Policy Manual as presented, with support from Mr. Houtz. The motion passed unopposed.

Public Comment: No public comments were given.

With no further business, Mr. Hoffmaster moved to adjourn the meeting with support from Mr. Shaffer. The motion passed unopposed and the meeting was adjourned at 10:08 AM.

Board of Health education took place after the meeting. The board heard a presentation about the services provided by the agency.

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 March 27, 2025**  
**Prepared by: Rebecca A. Burns, M.P.H., R.S.**

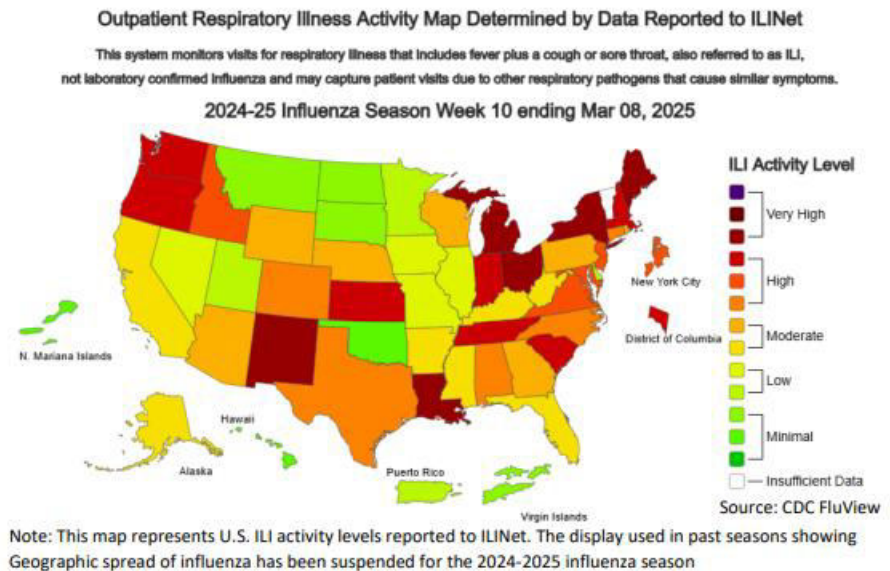
**Agency Updates**

**County Health Rankings:** The annual County Health Rankings have been released by the University of Wisconsin Population Health Institute supported by a grant from the Robert Wood Johnson Foundation. Kris updated each county’s data sheet which are included in my report. The data supporting the report comes from the years 2020-2022. Some of the areas of concern include “Years of Life Lost Before Age 75”, “Physical Inactivity”, “Excessive Drinking”, and “Injury Deaths”. Improvement was seen in “Sexually Transmitted Infections” in Branch and St. Joseph county, “Child Poverty”, and “Teen Births”. This may be the final year of County Health Rankings report as the Robert Wood Johnson Foundation has signaled they will not be able to financially support the work.

**Emergency Preparedness:** The agency participated in the statewide tornado drill on Wednesday, March 19<sup>th</sup> by holding our own tornado drill in all of our offices. Each time we do these our Emergency Preparedness Coordinator, Nate Francis, prepares an after-action summary that we use to identify weaknesses and make improvements. Nate has also been working on updating our Memorandum of Understanding documents for use of locations in each county in an emergency for mass distribution of medication or vaccination. The MOU’s haven’t been updated in many years.

**Staffing Update:** The agency is still seeking to fill a nursing position in Personal Health & Disease Prevention to staff the mobile unit and a breastfeeding peer position in Coldwater. We are also accepting applications for the new outreach specialist position in Area Agency on Aging created as a result of the No Wrong Door Grant.

**Respiratory Virus Season:** Michigan’s influenza activity is starting to decline. The current map is included for your review. MDHHS has confirmed 6 pediatric flu deaths in Michigan and there have been 134 influenza-associated pediatric death nationally this flu season. It is still not too late to receive vaccinations that prevent or lesson 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:**

*Blood Lead Universal Testing Rules:* We are continuing to wait for JCAR to publish the expected rules.

*Highly Pathogenic Avian Influenza “Bird Flu”:* This continues as a concern.

*Measles:* The agency is currently reviewing our Measles Response Plan and has been participating in statewide meetings with MDHHS on measles now that we have our first confirmed case of measles in Michigan for 2025. That one case of measles in Oakland resulted in 56 contacts that the local health department is following. This gives a snapshot into how one case would rapidly increase workload, just imagine how multiple cases would impact our team.

*Fluoride in Drinking Water:* Attached to my report today is a joint statement on fluoridation of public drinking water from MDHHS and EGLE that I want to share for awareness. Growing strong healthy teeth is so important that my children’s pediatrician prescribed a fluoride tablet for them when they were young as our home is supplied with a private well.

**Coldwater Office:** The work to upgrade the HVAC in Coldwater begins on Monday, March 24<sup>th</sup>. The request for bids is out for the project to replace the counters and sinks in the restrooms and the counter in the front desk area of the clinic.

**Hillsdale Office:** The FOB project approved last month should be completed by the time of the Board meeting. The contractor that worked with us on the Three Rivers exterior update has visited our Hillsdale location to help us develop a specification sheet so that we can take bids for the exterior work needed at that location. He found several issues that need to be addressed right away; those include, hail damage to the roof, roof shingles that are not attached, improperly attached drip edge, improperly installed side doors which left a gap that the contractor caulked between the door and exterior brick that has failed allowing water behind the brick, etc. He is preparing the specifications for us and we will put that out for bids.

**Sturgis:** Nothing at this time.

**Three Rivers Office:** The Finance Committee reviewed bids for the painting in Three Rivers and have suggested the full board approve the bid submitted by STP Painting. I have contacted references provided by STP Painting and have received all positive reviews on the work the company has performed. If awarded, they can start in April. I have started meeting with carpet contractors for replacing the carpet and expect to have bids for the April Finance Committee meeting.

# County Health Rankings – Branch County 2025

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

	BRANCH COUNTY	ERROR MARGIN	MI	US
<b>HEALTH OUTCOMES</b>				
<i>Length of Life</i>				
<b>Premature Death</b> —Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2020-2022)	<b>8,400</b>	7,400-9,400	8,800	8,400
<i>Quality of Life</i>				
<b>Poor or Fair Health</b> **-% of adults reporting fair or poor health. (age-adjusted) (2022)	<b>19%</b>	16-21%	16%	17%
<b>Poor Physical Health Days</b> **—Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>4.7</b>	3.8-5.7	4.0	3.9
<b>Poor Mental Health Days</b> **—Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>5.9</b>	4.8-7.0	5.6	5.1
<b>Low Birth Weight</b> —% of live births with low birth weight (< 2500 grams). (2017-2023)	<b>7%</b>	7-8%	9%	8%
<b>HEALTH FACTORS</b>				
<i>Health Behaviors</i>				
<b>Adult Smoking</b> **-% of adults who are current smokers. (2022)	<b>20%</b>	17-22%	16%	13%
<b>Adult Obesity</b> —% of adults that report a BMI >=30. (2022)	<b>40%</b>	32-47%	35%	34%
<b>Food Environment Index</b> -Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019,2022)	<b>7.5</b>		7.1	7.4
<b>Physical Inactivity</b> -% of adults aged 20 and over reporting no leisure-time physical activity. (2022)	<b>27%</b>	22-31%	23%	23%
<b>Access to Exercise Opportunities</b> -% of population with adequate access to locations for physical activity. (2024,2022,2020)	<b>61%</b>		86%	84%
<b>Excessive Drinking</b> **-% of adults reporting binge or heaving drinking. (2022)	<b>20%</b>	16-25%	20%	19%
<b>Alcohol-impaired Driving Deaths</b> —% of driving deaths with alcohol involvement. (2018-2022)	<b>18%</b>	9-29%	29%	26%
<b>Sexually Transmitted Infections</b> —No. of newly diagnosed Chlamydia cases per 100,000 population. (2022)	<b>249.3</b>		428.3	495.0
<b>Teen Births</b> —No. of births per 1,000 female population, ages 15-19 years. (2017-23)	<b>24</b>	20-27%	14	16
<i>Clinical Care</i>				
<b>Uninsured</b> -% of population under age 65 without health insurance. (2021)	<b>8%</b>	7-10%	6%	10%
<b>Primary Care Physicians</b> —Ratio of population to primary care physicians. (2021)	<b>2,810:1</b>		1,280:1	1,330:1
<b>Dentists</b> -Ratio of population to dentists. (2022)	<b>2,120:1</b>		1,250:1	1,360:1
<b>Mental Health Providers</b> - Ratio of population to mental health providers. (2024)	<b>560:1</b>		280:1	300:1
<b>Preventable Hospital Stays</b> —Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2022)	<b>3,647</b>		3,236	2,666
<b>Mammography Screening</b> —% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2022)	<b>45%</b>		47%	44%
<b>Flu vaccinations</b> —% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2022)	<b>45%</b>		46%	48%
<i>Social &amp; Economic Factors</i>				
<b>High School completion</b> -% of adults ages 25 and over with a high school diploma or equivalent. (2019-23)	<b>89%</b>	87-90%	92%	89%
<b>Some College</b> —% of adults aged 25-44 years with some post-secondary education. (2019-23)	<b>50%</b>	46-55%	68%	68%
<b>Unemployment</b> —% of population age 16 and older unemployed but seeking work. (2023)	<b>3.9%</b>		3.9%	3.6%
<b>Children in Poverty</b> -% of children under age 18 in poverty. (2018-22)	<b>20%</b>	15-26%	18%	16%
<b>Income Inequality</b> — ratio of household income at the 80th percentile to income at the 20th percentile. (2019-23)	<b>3.9</b>		4.6	4.9
<b>Children in Single-parent Households</b> —% of children that live in a household headed by single parent. (2018-22)	<b>NR</b>			
<b>Social Associations</b> —No. of membership associations per 10,000 population. (2022)	<b>9.0</b>		9.5	9.1
<b>Injury Deaths</b> —No. of deaths due to injury per 100,000 population. (2018-22)	<b>82</b>	70-94	86	84
<i>Physical Environment</i>				
<b>Air Pollution-particulate matter</b> -Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2020)	<b>8.0</b>		6.7	7.3
<b>Drinking Water Violations</b> -Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2022)	<b>No</b>			
<b>Severe Housing Problems</b> —% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2017-2021)	<b>11%</b>	10-13%	13%	17%
<b>Driving Alone to Work</b> -% of the workforce that drives alone to work. (2019-23)	<b>79%</b>	76-82%	76%	70%
<b>Long Commute-driving alone</b> —Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2019-23)	<b>26%</b>	23-28%	33%	37%

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



## Additional Indicators – Branch County

	BRANCH COUNTY	MI
<b>Demographics</b>		
Population <small>(2019)</small>	45,215	10,037,261
% Below 18 Years of Age <small>(2022)</small>	23.3%	21.0%
% 65 and Older <small>(2022)</small>	19.9%	19.2%
% Non-Hispanic African American <small>(2022)</small>	2.5%	13.7%
% American Indian & Alaskan Native <small>(2022)</small>	0.6%	0.8%
% Asian <small>(2019)</small>	0.7%	3.6%
% Native Hawaiian/Other Pacific Islander <small>(2022)</small>	0.1%	0%
% Hispanic <small>(2022)</small>	7.0%	6.0%
% Non-Hispanic White <small>(2022)</small>	87.8%	73.7%
% not proficient in English <small>(2018-22)</small>	3.0%	1.0%
% Females <small>(2022)</small>	47.8%	50.4%
% Rural <small>(2020)</small>	69.4%	26.5%
<b>Health Outcomes</b>		
Life Expectancy <small>(2020-2022)</small>	76.1	76.2
Premature Age-Adjusted Mortality <small>(2020-2022)</small>	430	430
Child Mortality <small>(2019-2022)</small>	50	50
Infant Mortality <small>(2016-2022)</small>	8	6
Frequent Physical Distress <small>(2022)</small>	14%	12%
Frequent Mental Distress <small>(2022)</small>	19%	18%
Diabetes Prevalence <small>(2022)</small>	10%	10%
HIV Prevalence Rate <small>(2022)</small>	91	206
<b>Health Behaviors</b>		
Food Insecurity <small>(2022)</small>	15%	14%
Limited Access to Healthy Foods <small>(2019)</small>	6%	6%
Drug Overdose Deaths <small>(2020-2022)</small>	12	29
Insufficient Sleep** <small>(2022)</small>	36%	36%
<b>Health Care</b>		
Uninsured Adults <small>(2022)</small>	10%	7%
Uninsured Children <small>(2022)</small>	5%	3%
Other Primary Care Providers <small>(2024)</small>	1,260:1	670:1
<b>Social &amp; Economic Factors</b>		
Disconnected Youth <small>(2019-2023)</small>	9%	7%
Reading – Average Grade Performance <small>(2019)</small>	2.8	3.0
Math – Average Grade Performance <small>(2019)</small>	2.8	2.8
Median Household Income <small>(2023)</small>	\$57,600	\$69,100
Children Eligible for Free Lunch <small>(2022-2023)</small>	61%	53%
Residential Segregation–black/white <small>(2019-2023)</small>	53	73
Child Care Centers per 1,000 Children <small>(2010-2022)</small>	6	9
Homicides <small>(2016-2022)</small>		7
Suicide Rate <small>(2018-2022)</small>	17	14
Firearm Fatalities <small>(2018-2022)</small>	11	14
Motor Vehicle Crash Deaths <small>(2016-2022)</small>	18	11

- **Health Factors** are based on weighted scores of four types of factors: Health Behaviors, Clinical Care, Social & Economic and Physical Environment measures. Health Outcomes measures are used to understand the current health status of the population, while Health Factors are used to predict its future health needs.

## What are the Public Health Cost Savings Associated with Prevention

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

- Every **\$1 spent on immunization saves \$11.00 in medical costs**. The CDC estimates that vaccination of children born between 1994 and 2023 in the U.S. save **nearly \$2.7 trillion in total societal costs** (that includes \$540 billion in direct costs).
- On average, a **\$52** child safety seat prevents **\$2,200** in medical spending. **This is a return of \$42 for every \$1 invested**. (Child Safety Network and PIRE)
- Communities served by **fluoridated water save an average of \$32 per person a year** by avoiding treatment for cavities. Communities of 1,000 or more see an **average estimated return on investment of \$20 for every \$1 spent on water fluoridation**. (CDC)
- Every **\$1 spent on Sexually Transmitted Disease Screening** results in a **\$5.23 savings** in direct lifetime medical costs based on the CDC's 2021 analysis of 2018's incidence and prevalence report.
- **Neonatal health care costs related to smoking** are equivalent to **\$704 for each maternal smoker**. Randomized controlled trials indicate that a smoking cessation program for pregnant women can save as much as **\$6 for each \$1 spent** (CDC).
- The National WIC Association has shown that every **\$1 spent on WIC** results in a savings of **\$2.48 in healthcare cost savings**, primarily attributed to reduced incidence of preterm birth.
- Investment of **\$10** per person, per year in proven community-based programs that help people increase their physical activity, eat better, and avoid smoking and other tobacco use could save the country more than **\$16 billion** annually within five years. This is a return of **\$5.60** for every **\$1** invested. (Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities, Trust for America's Health.)

## What Does the Data Mean for My County?

The *Rankings* are based on a model of population health that emphasizes many factors that, if improved, can help make communities healthier places to live, learn, work and play.

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

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

# County Health Rankings – Hillsdale County 2025

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

	HILLSDALE COUNTY	ERROR MARGIN	MI	US
<b>HEALTH OUTCOMES</b>				
<i>Length of Life</i>				
<b>Premature Death</b> —Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2020-22)	<b>8,800</b>	7,800-9,800	8,800	8,400
<i>Quality of Life</i>				
<b>Poor or Fair Health</b> **-% of adults reporting fair or poor health. (age-adjusted) (2022)	<b>18%</b>	16-20%	16%	17%
<b>Poor Physical Health Days</b> **—Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>4.6</b>	3.8-5.6	4.0	3.9
<b>Poor Mental Health Days</b> **—Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>5.7</b>	4.7-6.8	5.6	5.1
<b>Low Birth Weight</b> —% of live births with low birth weight (< 2500 grams). (2017-2023)	<b>8%</b>	7-9%	9%	8%
<b>HEALTH FACTORS</b>				
<i>Health Behaviors</i>				
<b>Adult Smoking</b> **-% of adults who are current smokers. (2022)	<b>20%</b>	18-23%	16%	13%
<b>Adult Obesity</b> —% of adults that report a BMI >=30. (2022)	<b>37%</b>	30-44%	35%	34%
<b>Food Environment Index</b> —Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019,2022)	<b>7.8</b>		7.1	7.4
<b>Physical Inactivity</b> —% of adults aged 20 and over reporting no leisure-time physical activity. (2022)	<b>26%</b>	22-30%	23%	23%
<b>Access to Exercise Opportunities</b> —% of population with adequate access to locations for physical activity. (2020,2022,2024)	<b>61%</b>		86%	84%
<b>Excessive Drinking</b> **-% of adults reporting binge or heaving drinking. (2022)	<b>21%</b>	17-25%	20%	19%
<b>Alcohol-impaired Driving Deaths</b> —% of driving deaths with alcohol involvement. (2018-22)	<b>22%</b>	14-32%	29%	26%
<b>Sexually Transmitted Infections</b> —No. of newly diagnosed Chlamydia cases per 100,000 population. (2022)	<b>240.4</b>		428.3	495.0
<b>Teen Births</b> —No. of births per 1,000 female population, ages 15-19 years. (2017-23)	<b>16</b>	15-19%	14	16
<i>Clinical Care</i>				
<b>Uninsured</b> —% of population under age 65 without health insurance. (2022)	<b>7%</b>	6-8%	6%	10%
<b>Primary Care Physicians</b> —Ratio of population to primary care physicians. (2021)	<b>5,060:1</b>		1,280:1	1,330:1
<b>Dentists</b> —Ratio of population to dentists. (2022)	<b>2,690:1</b>		1,250:1	1,360:1
<b>Mental Health Providers</b> —Ratio of population to mental health providers. (2024)	<b>570:1</b>		280:1	300:1
<b>Preventable Hospital Stays</b> —Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2022)	<b>2,733</b>		3,236	2,666
<b>Mammography Screening</b> —% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2022)	<b>42%</b>		47%	44%
<b>Flu vaccinations</b> —% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2022)	<b>40%</b>		46%	48%
<i>Social &amp; Economic Factors</i>				
<b>High School completion</b> —% of adults ages 25 and over with a high school diploma or equivalent. (2019-2023)	<b>90%</b>	89-92%	92%	89%
<b>Some College</b> —% of adults aged 25-44 years with some post-secondary education. (2019-2023)	<b>56%</b>	52-61%	68%	68%
<b>Unemployment</b> —% of population age 16 and older unemployed but seeking work. (2023)	<b>4.2%</b>		3.9%	3.6%
<b>Children in Poverty</b> —% of children under age 18 in poverty. (2019-2023)	<b>19%</b>	13-25%	18%	16%
<b>Income Inequality</b> —ratio of household income at the 80th percentile to income at the 20th percentile. (2019-2023)	<b>4.0</b>		4.6	4.9
<b>Children in Single-parent Households</b> —% of children that live in a household headed by single parent. (2018-2022)	<b>NR</b>			
<b>Social Associations</b> —No. of membership associations per 10,000 population. (2022)	<b>10.9</b>		9.5	9.1
<b>Injury Deaths</b> —No. of deaths due to injury per 100,000 population. (2018-2022)	<b>88</b>	76-100	86	84
<i>Physical Environment</i>				
<b>Air Pollution-particulate matter</b> —Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2020)	<b>8.0</b>		6.7	7.3
<b>Drinking Water Violations</b> —Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2023)	<b>No</b>			
<b>Severe Housing Problems</b> —% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2017-2021)	<b>12%</b>	11-14%	13%	17%
<b>Driving Alone to Work</b> —% of the workforce that drives alone to work. (2019-2023)	<b>77%</b>	75-79%	76%	70%
<b>Long Commute-driving alone</b> —Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2019-2023)	<b>36%</b>	33-39%	33%	17%

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

## Additional Indicators – Hillsdale County

	HILLSDALE COUNTY	MI
<b>Demographics</b>		
Population (2023)	45,587	10,037,261
% Below 18 Years of Age (2023)	21.5%	21.0%
% 65 and Older (2023)	22.0%	19.2%
% Non-Hispanic African American (2023)	0.7%	13.7%
% American Indian & Alaskan Native (2023)	0.6%	0.8%
% Asian (2023)	0.5%	3.6%
% Native Hawaiian/Other Pacific Islander (2023)	0.0%	0.0%
% Hispanic (2023)	2.9%	6.0%
% Non-Hispanic White (2023)	93.8%	73.7%
% not proficient in English (2019-2023)	0.0%	1.0%
% Females (2023)	49.9%	50.4%
% Rural (2020)	76.7%	26.5%
<b>Health Outcomes</b>		
Life Expectancy (2020-2022)	75.3	76.2
Premature Age-Adjusted Mortality (2020-2022)	450	430
Child Mortality (2019-2022)	50	50
Infant Mortality (2016-2022)	6	6
Frequent Physical Distress (2022)	14%	12%
Frequent Mental Distress (2022)	19%	18%
Diabetes Prevalence (2022)	10%	10%
HIV Prevalence Rate (2022)	57	206
<b>Health Behaviors</b>		
Food Insecurity (2022)	16%	14%
Limited Access to Healthy Foods (2019)	2%	6%
Drug Overdose Deaths (2020-2022)	20	29
Insufficient Sleep** (2022)	35%	36%
<b>Health Care</b>		
Uninsured Adults (2022)	8%	7%
Uninsured Children (2022)	4%	3%
Other Primary Care Providers (2024)	1,520:1	670:1
<b>Social &amp; Economic Factors</b>		
Disconnected Youth (2019-2023)	11%	7%
Reading – Average Grade Performance (2019)	2.8	3.0
Math – Average Grade Performance (2018)	2.7	2.8
Median Household Income (2023)	\$58,700	\$69,100
Children Eligible for Free Lunch (2022-2023)	60%	53%
Residential Segregation—black/white (2019-2023)	47	73
Child Care Centers per 1,000 Children (2010-2022)	7	9
Homicides (2015-2021)	7	7
Suicide Rate (2018-2022)	23	14
Firearm Fatalities (2018-2022)	19	14
Motor Vehicle Crash Deaths (2016-2022)	19	11

- **Health Outcomes** are based on an equal weighing one mortality measure and four morbidity measures.
- **Health Factors** are based on weighted scores of four types of factors: Health Behaviors, Clinical Care, Social & Economic and Physical Environment measures. Health Outcomes measures are used to understand the current health status of the population, while Health Factors are used to predict its future health needs.

## What are the Public Health Cost Savings Associated with Prevention

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

- Every **\$1 spent on immunization saves \$11.00 in medical costs**. The CDC estimates that vaccination of children born between 1994 and 2023 in the U.S. save **nearly \$2.7 trillion in total societal costs** (that includes \$540 billion in direct costs).
- On average, a **\$52** child safety seat prevents **\$2,200** in medical spending. **This is a return of \$42 for every \$1 invested**. (Child Safety Network and PIRE)
- Communities served by **fluoridated water save an average of \$32 per person a year** by avoiding treatment for cavities. Communities of 1,000 or more see an **average estimated return on investment of \$20 for every \$1 spent on water fluoridation**. (CDC)
- Every **\$1 spent on Sexually Transmitted Disease Screening** results in a **\$5.23 savings** in direct lifetime medical costs based on the CDC's 2021 analysis of 2018's incidence and prevalence report.
- **Neonatal health care costs related to smoking** are equivalent to **\$704 for each maternal smoker**. Randomized controlled trials indicate that a smoking cessation program for pregnant women can save as much as **\$6 for each \$1 spent** (CDC).
- The National WIC Association has shown that every **\$1 spent on WIC** results in a savings of **\$2.48 in healthcare cost savings**, primarily attributed to reduced incidence of preterm birth.
- Investment of **\$10** per person, per year in proven community-based programs that help people increase their physical activity, eat better, and avoid smoking and other tobacco use could save the country more than **\$16 billion** annually within five years. This is a return of **\$5.60** for every **\$1** invested. (Prevention for a Healthier America: Investments in Disease Prevention Yield Significant Savings, Stronger Communities, Trust for America's Health.)

## What Does the Data Mean for My County?

The *Rankings* are based on a model of population health that emphasizes many factors that, if improved, can help make communities healthier places to live, learn, work and play.

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

# County Health Rankings – St. Joseph County 2025

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

	ST. JOSEPH COUNTY	ERROR MARGIN	MI	US
<b>HEALTH OUTCOMES</b>				
<i>Length of Life</i>				
<b>Premature Death</b> —Years of Potential Life Lost before age 75 per 100,000 population (age-adjusted). (2020-2022)	<b>10,100</b>	9,200-11,000	8,800	8,400
<i>Quality of Life</i>				
<b>Poor or Fair Health</b> **-% of adults reporting fair or poor health. (age-adjusted) (2022)	<b>21%</b>	19-24%	16%	17%
<b>Poor Physical Health Days</b> **—Average no. of physically unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>4.5</b>	3.6-5.4	4.0	3.9
<b>Poor Mental Health Days</b> **—Average no. of mentally unhealthy days reported in past 30 days (age-adjusted). (2022)	<b>5.9</b>	4.9-7.0	5.6	5.1
<b>Low Birth Weight</b> —% of live births with low birth weight (< 2500 grams). (2017-2023)	<b>7%</b>	6-8%	9%	8%
<b>HEALTH FACTORS</b>				
<i>Health Behaviors</i>				
<b>Adult Smoking</b> **-% of adults who are current smokers. (2022)	<b>22%</b>	19-24%	16%	13%
<b>Adult Obesity</b> —% of adults that report a BMI >=30. (2022)	<b>37%</b>	30-45%	35%	34%
<b>Food Environment Index</b> —Index of factors that contribute to a health food environment, 0 (worst) to 10 (best). (2019,2022)	<b>7.6</b>		7.1	7.4
<b>Physical Inactivity</b> —% of adults aged 20 and over reporting no leisure-time physical activity. (2022)	<b>30%</b>	25-34%	23%	23%
<b>Access to Exercise Opportunities</b> —% of population with adequate access to locations for physical activity. (2020,2022,2024)	<b>62%</b>		86%	84%
<b>Excessive Drinking</b> **-% of adults reporting binge or heaving drinking. (2022)	<b>20%</b>	16-24%	20%	19%
<b>Alcohol-impaired Driving Deaths</b> —% of driving deaths with alcohol involvement. (2018-22)	<b>29%</b>	25-35%	30%	10%
<b>Sexually Transmitted Infections</b> —No. of newly diagnosed Chlamydia cases per 100,000 population. (2022)	<b>277.6</b>		428.3	495.0
<b>Teen Births</b> —No. of births per 1,000 female population, ages 15-19 years. (2017-23)	<b>22</b>	20-25%	14	16
<i>Clinical Care</i>				
<b>Uninsured</b> —% of population under age 65 without health insurance. (2022)	<b>8%</b>	6-9%	6%	10%
<b>Primary Care Physicians</b> —Ratio of population to primary care physicians. (2021)	<b>3,570:1</b>		1,280:1	1,330:1
<b>Dentists</b> —Ratio of population to dentists. (2022)	<b>3,040:1</b>		1,250:1	1,360:1
<b>Mental Health Providers</b> —Ratio of population to mental health providers. (2024)	<b>480:1</b>		280:1	300:1
<b>Preventable Hospital Stays</b> —Rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. (2022)	<b>2,745</b>		3,236	2,666
<b>Mammography Screening</b> —% of female Medicare enrollees, ages 65-74 that received an annual mammography screening. (2022)	<b>42%</b>		47%	44%
<b>Flu vaccinations</b> —% of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination. (2022)	<b>45%</b>		46%	48%
<i>Social &amp; Economic Factors</i>				
<b>High School completion</b> —% of adults ages 25 and over with a high school diploma or equivalent. (2019-2023)	<b>86%</b>	85-88%	92%	89%
<b>Some College</b> —% of adults aged 25-44 years with some post-secondary education. (2019-2023)	<b>49%</b>	46-53%	68%	68%
<b>Unemployment</b> —% of population age 16 and older unemployed but seeking work. (2023)	<b>4.4%</b>		3.9%	3.6%
<b>Children in Poverty</b> —% of children under age 18 in poverty. (2019-2023)	<b>14%</b>	9-20%	18%	16%
<b>Income Inequality</b> —ratio of household income at the 80th percentile to income at the 20th percentile. (2019-2023)	<b>4.0</b>		4.6	4.9
<b>Children in Single-parent Households</b> —% of children that live in a household headed by single parent. (2018-22)	<b>NR</b>			
<b>Social Associations</b> —No. of membership associations per 10,000 population. (2022)	<b>13.1</b>		9.5	9.1
<b>Injury Deaths</b> —No. of deaths due to injury per 100,000 population. (2018-2022)	<b>102</b>	91-114	86	84
<i>Physical Environment</i>				
<b>Air Pollution-particulate matter</b> —Average daily density of fine particulate matter in micrograms per cubic meter (PM2.5). (2020)	<b>8.4</b>		6.7	7.3
<b>Drinking Water Violations</b> —Indicator of the presence of health-related drinking violations. Yes indicates the presence of a violation, No indicates no violation. (2023)	<b>No</b>			
<b>Severe Housing Problems</b> —% of households with at least 1 of 4 housing problems: overcrowding, high housing costs, or lack of kitchen or plumbing facilities. (2017-2021)	<b>11%</b>	10-12%	13%	17%
<b>Driving Alone to Work</b> —% of the workforce that drives alone to work. (2019-2023)	<b>74%</b>	72-76%	76%	70%
<b>Long Commute-driving alone</b> —Among workers who commute in their car alone, the % that commutes more than 30 minutes. (2019-2023)	<b>28%</b>	26-31%	33%	37%

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## Additional Indicators – St. Joseph County

	ST. JOSEPH COUNTY	MI
<b>Demographics</b>		
Population (2023)	60,878	10,037,261
% Below 18 Years of Age (2023)	23.8%	21.0%
% 65 and Older (2023)	19.5%	19.2%
% Non-Hispanic African American (2023)	2.4%	13.7%
% American Indian & Alaskan Native (2023)	0.7%	0.8%
% Asian (2023)	0.7%	3.6%
% Native Hawaiian/Other Pacific Islander (2023)	0.0%	0.0%
% Hispanic (2023)	9.6%	6.0%
% Non-Hispanic White (2023)	84.5%	73.7%
% not proficient in English (2019-23)	2.0%	1.0%
% Females (2023)	49.6%	50.4%
% Rural (2020)	63.7%	26.5%
<b>Health Outcomes</b>		
Life Expectancy (2020-2022)	74.9	76.2
Premature Age-Adjusted Mortality (2020-2022)	493	430
Child Mortality (2019-2022)	70	50
Infant Mortality (2016-2022)	7	6
Frequent Physical Distress (2022)	15%	12%
Frequent Mental Distress (2022)	21%	18%
Diabetes Prevalence (2022)	11%	10%
HIV Prevalence Rate (2022)	77	206
<b>Health Behaviors</b>		
Food Insecurity (2021)	12%	12%
Limited Access to Healthy Foods (2019)	6%	6%
Drug Overdose Deaths (2019-2021)	14	27
Insufficient Sleep** (2020)	34%	36%
<b>Health Care</b>		
Uninsured Adults (2022)	9%	7%
Uninsured Children (2022)	4%	3%
Other Primary Care Providers (2024)	1,090:1	670:1
<b>Social &amp; Economic Factors</b>		
Disconnected Youth (2019-2023)	7%	7%
Reading – Average Grade Performance (2019)	2.8	3.0
Math – Average Grade Performance (2019)	2.7	2.8
Median Household Income (2023)	\$68,500	\$69,100
Children Eligible for Free Lunch (2022-2023)	58%	53%
Residential Segregation–black/white (2019-2023)	66	73
Child Care Centers per 1,000 Children (2010-2022)	7	9
Homicides (2016-2022)	3	7
Suicide Rate (2018-2022)	24	14
Firearm Fatalities (2018-2022)	14	14
Motor Vehicle Crash Deaths (2016-2022)	22	11

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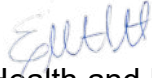
STATE OF MICHIGAN  
DEPARTMENT OF  
ENVIRONMENT, GREAT LAKES, AND ENERGY  
AND  
DEPARTMENT OF HEALTH AND HUMAN SERVICES


ELIZABETH HERTEL  
DIRECTOR

GRETCHEN WHITMER  
GOVERNOR

PHILLIP D. ROOS  
DIRECTOR

TO: Michigan Community Water Supplies

FROM: Elizabeth Hertel, Director   
Michigan Department of Health and Human Services

Phillip D. Roos, Director   
Michigan Department of Environment, Great Lakes, and Energy

DATE: March 20, 2025

SUBJECT: Fluoridation of Public Drinking Water

The purpose of this memorandum is to provide clarification on the status of drinking water fluoridation in the state of Michigan and to assist water supplies with fluoride-related communication in your communities. The Michigan Department of Environment, Great Lakes, and Energy (EGLE) and the Michigan Department of Health and Human Services (MDHHS) continue to support the practice of fluoridating public drinking water for the purpose of promoting oral health. **No adverse health effects have been associated with consuming water fluoridated at levels currently recommended; and fluoridation benefits everyone in the community, including seniors, adults, and children.** EGLE and the MDHHS are committed to acting on current facts and relying on the expertise of public health organizations and agencies that look at the complete body of evidence, including peer-reviewed systematic studies, to develop national recommendations.

## Background

Michigan led the world with the first city to fluoridate drinking water (Grand Rapids in 1945). After seeing the compelling evidence of fluoridation effectiveness in Grand Rapids, many other Michigan and American communities chose to fluoridate. Estimates as recent as 2022 indicate that nearly three out of four Americans served by public

water supplies have access to fluoridated water.<sup>1</sup> Studies conducted in a cross section of states have concluded that for each dollar communities spend on fluoridation, many times that amount is saved in dental treatment.<sup>2</sup>

### Fluoride Basics

Fluoride is an ion of fluorine, which is an element on the Periodic Table, and is found naturally and abundantly in the Earth's crust. Lakes, rivers, oceans, and groundwater contain natural levels of fluoride. The concentration determined by the U.S. Public Health Service that maximizes fluoride's oral health benefits while minimizing potential harm is 0.7 milligrams/Liter (mg/L). Naturally occurring fluoride in groundwater or surface water can be less than, equal to, or greater than the optimal concentration. The practice of drinking water fluoridation consists of adjusting the naturally occurring concentration to optimal levels.

A fundamental principle of toxicology is, "The dose makes the poison." Like various essential minerals, fluoride is toxic at **high** concentrations. Copper, magnesium, manganese, selenium, and zinc are examples of other elements that are beneficial for humans at certain concentrations, but harmful at higher levels. Fluoride is one of several examples of common products fortified to improve human health — iodine is added to table salt, folic acid is added to breads and cereals, and Vitamin D is added to milk. Fluoride is also naturally present in some foods, including black tea, coffee, shellfish, raisins, and potatoes.<sup>3</sup> In Europe and Australia, fluoride is added to salt, milk, and/or drinking water to promote oral health.<sup>4</sup> Fluoridation of public drinking water systems maintains fluoride concentrations at *optimal* levels.

### Role of Local and State Agencies

Fluoride is an acute toxin at concentrations multiple times higher than that in fluoridated water and the U.S. Environmental Protection Agency has set the Maximum Contaminant Level (MCL) at 4.0 mg/L. Therefore, State agencies and water utilities share a responsibility to implement water fluoridation safely. Because of the diligence of this partnership, **Michigan has 100 percent compliance with the fluoride MCL in the last ten years.**

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<sup>1</sup> <https://www.cdc.gov/fluoridation/about/statement-on-the-evidence-supporting-the-safety-and-effectiveness-of-community-water-fluoridation.html>

<sup>2</sup> <https://ilikemyteeth.org/debate-fluoridation/effects-of-fluoride/>

<sup>3</sup> <https://nutritionsource.hsph.harvard.edu/fluoride/>

<sup>4</sup> <https://www.pewtrusts.org/en/research-and-analysis/articles/2011/11/11/water-fluoridation-frequently-asked-questions>

Following is a summary of the roles of various parties:

### **Community Water Supplies**

Local water utilities make up the front lines of drinking water operations, monitoring, and emergency response. Water treatment plant operators perform several measurements, calculations, and analysis to ensure that fluoride concentrations remain near the optimal dose and below the MCL. Drinking water operators use this information to make fluoride feed rate adjustments and report the measurements and analysis results to the State to ensure compliance. Furthermore, community water supplies report directly to their customers each year in their Consumer Confidence Report, which includes the highest concentration of fluoride detected during the year. All of these duties are required to be done under the oversight of a State-certified operator in charge.

### **EGLE**

If a Michigan community chooses to fluoridate, EGLE's Drinking Water and Environmental Health Division (DWEHD) staff works with them to provide healthy and consistent fluoridation in two main ways. First, through the Michigan Safe Drinking Water Act, 1976 PA 399, as amended (Act 399), construction permitting program, EGLE engineers ensure that fluoridation equipment in community water supplies is designed to meet stringent design standards used across the region and country. Through the permit review process, EGLE engineers verify that feed equipment is properly sized, that anti-siphon controls are in place, and that feed pumps include electrical interlocks to prevent accidental overfeeds. Second, EGLE provides oversight through our water system surveillance activities. For example, EGLE engineers review operation reports of all fluoridating water supplies each month to verify concentrations are at optimal levels. Furthermore, comprehensive sanitary surveys are conducted periodically to assess the condition, operation, and performance of the fluoridation feed equipment and monitoring systems. Any problems identified during the survey are documented, and the community must correct them to stay in compliance. Lastly, EGLE ensures that each fluoride additive being used across the state is a third-party certified product suitable for addition to drinking water. Act 399 requires that all drinking water additives meet the stringent standards of NSF/ANSI Standard 60.<sup>5</sup>

### **MDHHS**

The MDHHS's Oral Health Program (OHP) analyzes fluoride levels in community water supplies by working with local water operators and provides relevant education and technical assistance to local officials, drinking water supplies, public health professionals, and the public. The OHP conducts yearly continuing education training for operators required for certification. The OHP works closely with the Centers for Disease Control and Prevention (CDC) for data tracking through the

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<sup>5</sup> <https://www.nsf.org/consumer-resources/articles/fluoridation-products-guide>



Water Fluoridation Reporting System. They also secure funding for and develop grants for water systems to replace aging fluoridation equipment.

## Legal Considerations

To prevent unilaterally undoing a resolution of the local governing body or a referendum of the people, which could negatively impact residents, most city, village, and township charters have rules related to water fluoridation decision-making. Local decision-makers may want to check with their legal counsel to ensure any proposed decision conforms to the local charter. Local anti-fluoride movements can be vocal and persistent, but do not necessarily represent the viewpoints of the greater community. For instance, water fluoridation is especially important for people living at or below the poverty level who cannot afford regular access to dental care and for people who have challenges in providing their own basic dental care, such as some disabled or elderly people. Discussion related to fluoridation should be done transparently with input from a cross section of community members and local public health professionals.

Fluoridation is most beneficial when it is implemented *consistently*. However, if there is a prolonged interruption in fluoridation, it is imperative for the water supply to notify the public so residents can make informed decisions about their oral health. Local pediatricians and dentists make prescription and treatment decisions based on their understanding of the water supply fluoride levels.

## Contact Information

- Contact the Oral Health Program at [Oralhealth@Michigan.gov](mailto:Oralhealth@Michigan.gov) for general questions related to fluoride and oral health.
- Contact DWEHD's Mike Bolf (906-630-4107 or [BolfM@Michigan.gov](mailto:BolfM@Michigan.gov)) for general questions about the design, operation, or regulations related to water system fluoridation.
- Contact your [EGLE district engineer](#) for questions about your specific water system.

**For more information, please visit the following websites:**

[Campaign for Dental Health – Fluoride Myths & Facts](#)

[Campaign for Dental Health – Helpful Information for Water Operators](#)

[Pew Charitable Trusts – Water Fluoridation Frequently Asked Questions](#)

[CDC – Community Water Fluoridation](#)

[State of Michigan MDHHS – Community Water Fluoridation](#)

[State of Michigan EGLE – Fluoridation Information](#)

[American Water Works Association – Fluoridation of Public Water Supplies](#)

[American Academy of Pediatrics – Fluoridation](#)

[American Cancer Society – Water Fluoridation and Cancer Risk](#)

[American Public Health Association – Community Water Fluoridation in the United States](#)

[National Institutes of Health – Fluoride](#)

[Australia National Health and Medical Research Council – Water Fluoridation and Human Health in Australia: Questions and Answers](#)

[Center for Oral Health – Water Fluoridation: Facts vs. Fears](#)

## **MEDICAL DIRECTOR'S REPORT**

**March 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. Working on documentation for primary care providers
5. Continuing treatment of multiple latent TB patients and several active TB patients. Face to face with one Branch County patient and two St. Joseph County patients this month.
6. Planning to attend Day at the Capital in Lansing on April 9, 2025.
7. Continued telephone conversations with area providers.

## MEASLES (RUBEOLA)

Measles is a highly contagious virus that can lead to serious complications. Two doses of the MMR vaccine provide the best protection.

Measles was declared eliminated (absence of continuous disease transmission for greater than 12 months) from the US in 2000. This was thanks to a highly effective vaccination program in the US.

90% of individuals without immunity to measles will become ill after exposure to the virus.

Measles can live for up to 2 hours in an airspace after an infected person leaves the area.

**Symptoms** usually begin 7 to 14 days after infection.

High fever, cough, runny nose, red, watery eyes

Tiny white spots may appear inside the mouth two to three days after symptoms begin (Koplik spots)

Measles rash appears 3 to 5 days after the first symptoms. It usually begins as flat, red spots that appear on the face at the hairline. They spread toward the neck, trunk, arms, legs, and feet.

Small raised bumps may appear on top of the flat red spots.

When the rash appears, fever may spike to more than 104 degrees F.

**Complications** include ear infections (1 out of every 10 children) and diarrhea in 1 out of 10 people.

1 in 5 unvaccinated people in the US will require hospitalization.

1 out of 20 children with measles get pneumonia, the most common cause of death in young children.

1 child out of every 1,000 will develop encephalitis (swelling of the brain). This can lead to convulsions and leave the child deaf or with intellectual disability.

Nearly 1 to 3 of every 1,000 children who become infected with measles will die from respiratory and neurologic complications.

If you are pregnant and have not had the MMR vaccine, measles may cause premature birth and low-birth weight babies.

Long term complications can include subacute sclerosing panencephalitis, a fatal disease of the central nervous system. This can develop 7 to 10 years after a person has measles, even though it appears they have fully recovered.



## Director's Report

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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. They are also working on direct outreach with community partners to share highlights, program goals and offer training to new staff about the Victim Assistance Program. Recent trainings/information sessions have been held with Community Action Foster Grandparents and Kline's Resort retirement community. The team will also present at upcoming outreach events in St. Joseph County – Resource Roundtable which will include all AAA programs.
  - IDT meetings in each county continue w/ case review, collaboration, and resource sharing.
2. The most recent Continuing Resolution enacted at the federal level on March 14<sup>th</sup> funds the government until September 30, 2025. Older American's Act programs, MIPPA (an outreach program for low income Medicare beneficiaries to enroll them in cost saving programs) and SHIP (State Health Insurance Program) were level-funded at FY2024 levels. We await our full-year Statement of Grant Award from the ACLS Bureau who is awaiting their Notice of Award... More updates and budget amendments are forthcoming – stay tuned!
3. I am pleased to introduce you to our newest team members in the Area Agency on Aging division:
  - Cindy Headley, part-time Outreach Specialist – Cindy has a great background and experience. For most of her career she has worked with families through Branch County Intermediate School District and she has a great excitement to help people!
  - Alexandra “Alex” Curtis, RN, full-time Care Consultant – Alex is new to the aging network and has shown an excitement for learning. She comes to us from the hospital setting and seems to be adjusting well to home visits and the high-level case management that are tantamount in the Community Living Program.
  - + one more full-time Outreach Specialist position posted... we are in process!
4. No Wrong Door 2025 Updates:

We are definitely in a transition time. Quite literally, “age old” contracts ending at the state level and in with brand new (NWD) contracts... CAVEAT: We don't technically have a subcontract, YET. Though they've shared our award amount, shared a draft contract, shared alllllll the related communication and meeting invitations – we technically don't have a sub-agreement. It's forthcoming. This transition remains frustrating for all of the program staff and volunteers, specifically in the State Health Insurance Program (formerly MMAP). We have been and will continue to share information & updates with providers but it's really coming close to start dates under these new contracts and structures – and we just don't have a comfort level with it. Cindy was recently trained in the evolving “Person Centered Options Counseling” program and looks to be trained in health insurance counseling in late April... Moving forward!

## Personal Health and Disease Prevention: March 27<sup>th</sup>, 2025

Heidi Hazel, BSN, RN

### Communicable Disease:

Data from our regional epi's.

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

**Influenza:** As of March 8<sup>th</sup>, the amount of Influenza-Like Illness (ILI) activity has decreased 5.9% from the prior week with a total of 8,897 patient visits. Our current ILI activity remains high. Locally, our reported cases are declining.

Pediatric deaths: Nationally, there have been 134 influenza associated deaths and six for Michigan. One of these children did reside within our jurisdiction.

Michigan's goal is to have 4 million residents vaccinated for this season and as of March 8<sup>th</sup>, we are at 72% towards that goal.

**Influenza A(H5N1):** The state is still receiving sick bird calls on a daily basis. They continue to emphasize biosecurity as the best defense. [Biosecurity information and checklist](#).

- Report Domestic Animal Diseases to 800-292-3939
- Report Wildlife/Wild Bird Diseases to 517-336-5030
- Or Eyes in the Field to report a natural resource violation  
<https://www2.dnr.state.mi.us/ors/Home>

**Measles:** In 2024 there were 285 cases across 33 jurisdictions. So far in 2025, there have been 222 cases across 12 jurisdictions.

Ontario has been experiencing an outbreak since October of 2024. As of March 12<sup>th</sup>, 372 cases have been identified with an increase of 195 cases since February 27, 2025.

We have shared an alert with our providers, which included a bulletin outlining important reminders on isolation, testing, and reporting protocols to help limit the spread. Additionally, I've been in contact with the infection prevention staff at our local hospitals to ensure they are prepared for when a case arrives at their facility.

**RSV:** Activity has decreased.

**COVID:** ED visits with COVID-19 diagnoses are decreasing.

**Pneumonia:** ED visits for Pneumonia are elevated compared to previous seasons but have come down since November and seems to be shifted to individuals over 64 year of age.

**TB/LTBI:** We currently have a few cases that our nurses are following closely:

- Hillsdale: 2 TB and 3 LTBI
- Branch: 1 TB and 6 LTBI
- St. Joseph: 2 LTBI

**Immunizations/STD/HIV:**

Our STI/HIV Coordinator attended the National Women and Girls HIV/AIDS virtual conference. This was an educational event aiming to address different aspects of women's health, support and advocacy. Participants had the opportunity to hear from presenters on many topics, including STI treatment/prevention, sexual health, effective communication and other critical issues.

We are gearing up for the largest National HIV/STI testing Day Event on June 27<sup>th</sup>! We are making sure to have plenty of supplies on hand and will be promoting the event to spread the word. Walk-ins are welcome.

We purchased another vaccine refrigerator for Sturgis. This will allow us to comply with storage and handling requirements with the Vaccine For Children (VFC) Program.

**Staff Updates:**

We have been doing interviews for the Breastfeeding Peer in Coldwater. The Mobile Unit RN position remains open at this time.

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

We continue to serve a diverse population, including Haitian, Arabic, and Spanish-speaking communities, at our Coldwater and St. Joseph locations. Additionally, we have applied for funding to support our WIC Parent Pit Stop initiative. This initiative focuses on resource sharing, support services, community engagement, and parent empowerment. The 'Pit Stop' serves as a space where parents can take a break, access resources and guidance, or connect with others in the community. We are requesting up to \$1,000 in funding, and if approved, our plan is to use these funds to purchase items for moms attending our community baby shower events.

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

CSHCS:

We're working closely as a team to find ways to enhance our outreach efforts with providers, ensuring they have a deeper understanding of the program and its benefits.

HEARING AND VISION:

We are still facing challenges in finding optometrists in our area who accept Medicaid. This is particularly frustrating for families who receive referral letters indicating they need to have their child seen by an optometrist and submit the follow-up form. Unfortunately, many are unable to find a provider that accepts their insurance, creating an added barrier to care.

KOHA:

Our Dental Hygienist is making every effort to participate in as many upcoming Kindergarten Round Ups as possible. However, since she is the only hygienist covering all three counties, it's not feasible for her to attend every event. At this time, she is scheduled to attend seven events starting March 18th.

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

Confirmed & Probable Case Totals	Feb-25								FYTD 2023-2024 (Oct-Sept)			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Animal Bite/Rabies potential exposure	-	1	-	1	2	12	-	14	1	16	5	22
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	-	-	-	-	5	2	7	14	4	4	2	10
Chicken Pox	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia	10	5	11	26	30	37	86	153	40	31	67	138
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	-	-	-	-	2	2	1	5
Cryptosporidiosis	-	-	-	-	-	-	-	-	1	1	1	3
Giardiasis	-	-	-	-	-	-	1	1	-	3	-	3
Gonorrhea	-	3	3	6	2	6	23	31	13	12	15	40
H. Influenzae Disease - Inv.	-	-	1	1	-	1	2	3	1	-	-	1
Hepatitis B - Acute	-	-	-	-	-	-	2	2	1	-	1	2
Hepatitis B - Chronic	-	-	-	-	1	1	-	2	1	-	3	4
Hepatitis C - Acute	-	-	-	-	-	-	-	-	1	-	1	2
Hepatitis C - Chronic	-	1	1	2	-	4	5	9	2	5	5	12
Hepatitis C Unknown	-	-	-	-	1	-	-	1	-	-	-	-
Histoplasmosis	1	-	-	1	1	-	-	1	2	-	1	3
HIV/AIDS	-	-	-	-	1	-	-	1	1	-	1	2
Influenza	245	58	299	602	441	93	489	1,023	298	39	196	533
Kawasaki	-	-	-	-	-	-	-	-	-	-	-	-
Latent Tuberculosis	2	-	-	2	2	1	-	3	-	-	-	-
Legionellosis	-	-	-	-	-	1	-	1	-	-	1	1
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Lyme Disease	1	-	-	1	3	2	3	8	-	1	4	5
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	-	-	-	-	1	-	1	1	-	1	2
Menengitis - Bacterial	-	-	-	-	1	-	-	1	-	-	1	1
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	-	-	-	4	2	1	7	1	1	3	5
Norovirus	11	1	-	12	16	1	-	17	-	-	-	-
Novel Coronavirus	70	69	49	188	281	490	228	999	560	644	437	1,641
Pertussis	-	-	-	-	7	11	3	21	-	-	-	-
RSV	2	9	1	12	2	9	1	12	-	-	-	-
Salmonellosis	-	-	-	-	2	-	3	5	3	-	-	3
Shiga Toxin-prod. (STEC)	-	-	-	-	-	1	1	2	-	1	-	1
Shigellosis	-	-	-	-	-	-	-	-	-	-	-	-
Shingles	-	-	-	-	-	-	1	1	1	1	-	2
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	1	1	3	-	3	6	3	4	1	8
Strep Pneumonia Inv Ds.	-	1	-	1	-	2	-	2	3	6	6	15
Syphilis - Primary	-	-	1	1	-	-	6	6	-	-	-	-
Syphilis - Secondary	-	-	2	2	1	-	3	4	-	1	-	1
Syphilis To Be Determined	-	-	-	-	-	3	7	10	-	1	2	3
Trichinosis	-	-	-	-	-	1	-	1	-	-	-	-
Tuberculosis	-	-	-	-	-	2	-	2	-	-	1	1
Unusual Outbreak/Occurrence	-	-	-	-	-	-	-	-	-	-	1	1
VZ Infection, Unspecified	-	-	-	-	-	1	-	1	-	2	1	3
Yersinia Enteritis	-	-	-	-	-	1	1	2	-	1	-	1



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

	Feb-25					YTD					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	136	114	103	38	391	1,477	921	294	1,261	3,953	737	654	307	320	2,018
All VFC Doses Given	635	287	-	568	1,490	2,942	1,549	157	2,531	7,179	3,991	1,894	-	3,366	9,251
Waivers	6	2	5	8	21	68	61	12	61	202	75	66	3	56	200
<b>ADULT IMMUNIZATIONS</b>															
# Vaccines Given CHA	47	15	13	13	88	286	116	98	66	566	546	112	41	153	852
All AVP Doses Given	52	10	-	7	69	338	111	14	108	571	132	110	-	41	283
<b>COMMUNICABLE DISEASE</b>															
TB Tests Done	5	9	1	2	17	22	40	2	12	76	28	27	2	8	65
STD treatments	-	-	-	3	3	3	4	-	46	53	2	16	-	65	83
HIV Testing	-	-	-	3	3	2	8	-	40	50	1	5	1	47	54
<b>ENROLLMENTS</b>															
Medicaid & Michild	-	2	-	-	2	9	3	-	-	12	9	7	1	1	18
<b>REFERRAL SERVICE</b>															
MCDC Referrals	3	-	19	10	32	18	9	76	71	174	27	55	62	28	172
MIHP referrals	-	-	43	25	68	1	-	264	249	514	7	1	92	106	206
<b>Hearing Screens</b>															
Pre-school	-	15	-	-	15	199	107	-	66	372	35	67	-	73	175
School Age	33	30	-	315	378	807	714	619	877	3,017	524	749	-	1,708	2,981
<b>Vision Screens</b>															
Pre-school	-	-	-	-	-	189	91	-	54	334	75	15	-	65	155
School Age	80	538	-	1,185	1,803	1,470	1,555	-	2,795	5,820	1,758	1,844	-	3,359	6,961
<b>Children's Special Health Care Services</b>															
Diagnostics	-	-	-	-	-	3	1	-	-	4	11	1	-	-	12
Assessments-Renewal	31	26	-	43	100	99	104	-	140	343	82	95	-	132	309
Assessments-New	4	14	-	7	25	-	37	-	18	55	-	19	-	18	37

State Participation/Enrollment Ratio [2]:

Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Curr Year P/E Ratio (last 12 months)
96.3%	96.0%	96.2%	96.2%	96.1%	95.2%

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	4,191	-0.47%	93.18%
Jan / 2025	4,461	4,153	4,198	0.17%	93.10%
Feb / 2025	4,372	4,079	(est[7]) 4,200		93.30%
Mar / 2025	0	0	(est[7]) 4,157		
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)	22,173	20,691	16,795		
Curr Year Avg	4,435	4,138	4,199	497.46%	92.53%
Months with Count	5	5	4	4	5
Average to Base % [8]		106.9%	108.47%		
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]:

4,192
4,199

**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.

***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 to distribute and begin collection of a non-motorized traffic survey. We received 73 surveys prior to the March Advisory Committee Meeting. Since that meeting, we have received even more. The data is being compiled and will be shared with the Advisory Committee at the next meeting. Our subgroups continue working on enhancing the vulnerable population module of Drivers' Education and developing a community education booklet on road safety. We have submitted the FY 2026 grant application and are awaiting a response as to our ability to submit a full application.

We have received the contracts for the Michigan Medical Marijuana Grant award in Branch and Hillsdale counties. We anticipate St. Joseph county will see their contract soon. We continue planning for the activities including securing partners for distribution of safe storage materials.

Josh Englehart and Isabella Stycos made presentation to Coldwater Community Schools' grades 6-12 on the topic of vaping. The students were engaged in the presentation and it was shared that the number of vape alarms in the buildings post presentation had decreased.

Isabella Stycos attended Communications 101 training offered by MDARD and MALPH. This one day training provided information and opportunity to discuss messaging, media relations, social media, and mis/dis-information strategies.

Josh Englehart and Kaitlyn Gross presented information on sexually transmitted infections to the St. Joseph County ISD's Human Growth program. These adult students were given information and allowed the opportunity to ask questions of agency staff.

We are preparing for the Day at the Capital on April 9, 2025. A local agency will be receiving a Hometown Healthcare Hero award from the Michigan Public Health Week Partnership. Dr. Luparello, Candy Cox, and Kris Dewey will be attending. We are scheduling meetings with our legislators.

Our office is finalizing the preparations for the agency's in-person All Staff Meeting on April 25, 2025. Our offices will be closed that day.

The office is working the 2024 Annual Report. We are working to have the report ready for distribution in April.

We continue to work on the opioid awareness program in Hillsdale County. The planning committee has developed a draft agenda and is working to secure the date, location, and presenters for the day.

The agency distributed 1 press release in February. There were 12 media stories in February that mentioned the agency.

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

<ul style="list-style-type: none"> <li>• Heart Health Month video/prevention tips</li> <li>• HAPI prevention tips</li> <li>• MDHHS Respiratory Virus Guidance</li> <li>• Hillsdale CHNA</li> <li>• Project Child Safe- Gun Locks</li> <li>• Children's Dental Health Month-dental tips shared</li> <li>• CSHCS promoted- National Birth Defects Awareness Month</li> <li>• WIC social media toolkit</li> <li>• Take Control of Your Birth Control</li> <li>• Available job positions at BHSJ</li> <li>• Car seat safety tips</li> <li>• Emergency Preparedness- Winter Ready Toolkit</li> </ul>	<ul style="list-style-type: none"> <li>• Medicaid Application Assistance</li> <li>• National Condom Week (Feb 14-21st)</li> <li>• Respiratory illness prevention tips</li> <li>• Press release- <a href="#">First Pediatric Deaths from Flu in Michigan   Branch Hillsdale St. Joseph Community Health Agency</a></li> </ul> <p>Recalls:</p> <ul style="list-style-type: none"> <li>• <a href="#">Naturipe Value Added Fresh LLC Issues Allergy Alert On Undeclared Wheat &amp; Eggs In "Berry Buddies, Berries &amp; Pancakes" Lot # 1097901   FDA</a></li> <li>• <a href="#">ZB Importing Issue Voluntary Recall and Allergy Alert on Undeclared Egg, Wheat and Milk in Certain Ulker Brand Products   FDA</a></li> </ul>
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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:**

We have been working with insurance providers to receive allowable reimbursement for services provided by the program. This is a part of the sustainability plan for the program. WellWise in Hillsdale County was awarded a “No Wrong Door” grant. We are working with WellWise to review a sub-contract for this program to help clients with issues related to insurance and care options in Hillsdale County.

The greatest needs requested were assistance with Medicaid applications, insurance options, 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
2/10	Kings Kupboard – Hillsdale County
2/14	Friendship Friday – St. Joseph County
2/24	Coach Eby Dinner – Branch County
2/26	Health Education Presentation – St. Joseph County ISD
3/13	Diaper Bank – St. Joseph County
3/18	Sturgis School’s Kindergarten Round-Up – St. Joseph County
3/20	Coldwater Community Schools Parent Night - Branch
3/24	Coach Eby Dinner – Branch County
4/5	Wonderland Hunt – Branch County
4/9	Roundtable Presentations - St. Joseph County
4/12	Community Baby Shower – Hillsdale County
4/14	Kings Kupboard – Hillsdale County
4/17	Spring Fling – Hillsdale County
4/23	Jonesville Mission/Great Start Collaborative Outreach – Hillsdale County
4/28	Coach Eby Center – Branch County

**Social Media Data (As of March 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)
<b>February</b>	4,384	1,456 <i>(Up 3% from January )</i>	19,210 <i>(Down 15 % from January)</i>	<i>Videos shared: Heart Health, Hearing and Vision Screening Program, Video with Hillsdale Hospital</i>	11	<i>No boosted activites this month.</i>
<b>TOTAL TO DATE (Since 10/1/2022)</b>	<i>2 NEW followers since last report</i>	6,737	704,464	21	400	18

**Branch-Hillsdale-St. Joseph Community Health Agency  
Environmental Public Health Services  
Report for the March 27, 2025 Board of Health Meeting  
Prepared by Joseph Frazier R.E.H.S. , Director of Environmental Health**

**Food Service Program Update**

We are quickly approaching the busy season for the Food Program. We have begun reviewing, updating, and mailing all food licenses for the Tri-County Agency. This careful evaluation of applications will enable our staff to update vital contact and communication information and input data into Hedge Hog.

Additionally, our St. Joseph County food inspector, in collaboration with the owners of Farrand Hall, has opened Farrand Hall Bakery in downtown Colon, MI. The bakery will feature freshly baked breads and pastries daily.

**Well, Septic, and Pools**

All three offices have noticed an uptick in activity as the weather warms and spring projects ramp up. Recently, our general staff attended an online training for the Land Division Act, hosted by EGLE and MUSE. This training will provide valuable knowledge to our younger staff, enabling them to better assist the public. Our new clerk in St. Joseph County is working diligently, spending time in all three offices to train with staff and learn our Hedge Hog program.

## EH Service Statistics Report

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

ENVIRONMENTAL HEALTH SERVICE REPORT	2024/2025											
	FEBRUARY				YTD 2024/2025				YTD 2023/2024			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
<b>WELL/SEWAGE SYSTEM EVAL.</b>	-	-	3	3	-	5	9	14	-	-	3	3
<b>CHANGE OF USE EVALUATIONS - FIELD</b>	2	3	4	9	11	16	21	48	13	19	28	60
<b>CHANGE OF USE EVALUATIONS - OFFICE</b>	6	2	4	12	17	10	30	57	16	5	33	54
<b>ON-SITE SEWAGE DISPOSAL</b>												
PERMITS NEW CONSTRUCTION ISSUED	4	3	8	15	28	36	42	106	20	26	33	79
REPAIR/REPLACEMENT ISSUED	2	1	4	7	18	17	37	72	23	20	39	82
VACANT LAND EVALUATION	-	-	1	1	4	7	3	14	6	11	3	20
PERMITS DENIED	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	6	4	13	23	50	50	82	182	51	57	75	181
<b>SEWAGE PERMITS INSPECTED</b>	1	3	4	8	30	31	59	120	37	50	66	153
<b>WELL PERMITS ISSUED</b>	10	7	13	30	61	55	82	198	55	51	80	186
<b>WELL PERMITS INSPECTED</b>	13	9	36	58	73	56	89	218	69	75	114	258
<b>FOOD SERVICE INSPECTION</b>												
PERMANENT	35	22	30	87	111	123	162	396	109	113	140	362
NEW OWNER / NEW ESTABLISHMENT	-	1	4	5	4	2	10	16	4	6	11	21
FOLLOW-UP INSPECTION	-	1	2	3	2	4	6	12	5	6	5	16
TEMPORARY	-	-	1	1	8	4	11	23	7	6	21	34
STFU/MOBILE	1	-	1	2	5	7	18	30	9	9	15	33
PLAN REVIEW APPLICATIONS	1	-	-	1	3	2	2	7	4	-	6	10
FOOD COMPLAINTS RECEIVED	-	-	1	1	3	-	6	9	1	5	4	10
FOODBORNE ILLNESS INVESTIGATED	-	-	-	-	-	-	1	1	1	3	1	5
<b>FOOD CLASSES</b>												
MANAGEMENT CERTIFICATION CLASS	-	-	-	-	-	-	-	10	-	-	-	10
<b>CAMPGROUND INSPECTION</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>NON-COMM WATER SUPPLY INSP.</b>	-	1	6	7	4	9	15	28	4	4	13	21
<b>SWIMMING POOL INSPECTION</b>	-	-	-	-	9	5	4	18	-	6	1	7
<b>PROPOSED SUBDIVISION REVIEW</b>	-	-	-	-	-	-	-	-	-	-	-	-
<b>SEPTIC TANK CLEANER</b>	6	-	-	6	6	-	-	6	-	-	4	4
<b>DHS LICENSED FACILITY INSP.</b>	-	4	4	8	6	12	12	30	8	8	8	24
<b>COMPLAINT INVESTIGATIONS</b>	2	-	-	2	7	6	7	20	4	13	2	19
<b>LONG TERM MONITORING</b>	-	-	-	-	-	-	-	-	-	-	-	14
<b>BODY ART FACILITY INSPECTIONS</b>	-	4	2	6	-	5	3	8	3	3	6	12





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: 02/01/2025 - 02/28/2025

County	Inspection Type / Reason	Count
<b>Branch County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	1
	Non Foodborne Illness Complaint - Initial	3
	Plan Review Activity - Initial	1
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	30
	STFU Inspection - Routine	2
	<b>Total # of Food Safety inspections - Branch County</b>	<b>38</b>
<b>Hillsdale County</b>		
<u>Food Safety</u>		
	Non Foodborne Illness Complaint - Initial	1
	Progress Note - New Inspection Reason	1
	Risk Based Inspection - Routine	21
	<b>Total # of Food Safety inspections - Hillsdale County</b>	<b>23</b>
<b>St. Joseph County</b>		
<u>Food Safety</u>		
	Consultation - Plan Review Consultation	2
	Pre-Opening - Pre-Opening	1
	Progress Note - New Inspection Reason	4
	Risk Based Inspection - Follow-up	1
	Risk Based Inspection - Routine	30

**Inspection Type Count By County**

For Date Range: 02/01/2025 - 02/28/2025

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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>41</b>
	<b><u>Total # of inspections - All counties</u></b>	<b><u>102</u></b>



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20 Care Drive  
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(269) 273 - 2161 ext. 233

## Food Establishment Inspection Report by Facility Name

For Date Range: 02/01/2025 - 02/28/2025 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Biggby Coffee	Three Rivers	02/20/2025	Risk Based Inspection - Routine	0	0	0	2
Biggby Coffee #494	White Pigeon	02/26/2025	Risk Based Inspection - Routine	0	0	0	1
Biggby Coffee #571	Jonesville	02/24/2025	Risk Based Inspection - Routine	0	0	0	0
BILL'S STEAKHOUSE	Bronson	02/07/2025	Non Foodborne Illness Complaint - Initial	0	0	0	0
BILL'S STEAKHOUSE	Bronson	02/07/2025	Risk Based Inspection - Routine	0	0	0	0
Burnside Senior Center	Coldwater	02/04/2025	Risk Based Inspection - Routine	0	0	0	0
BURR OAK GRANGE #1350	Burr Oak	02/05/2025	Risk Based Inspection - Routine	0	0	0	0
Burr Oak Missionary Church	Burr Oak	02/26/2025	Risk Based Inspection - Routine	0	0	0	0
BURR OAK SCHOOL	Centreville	02/06/2025	Risk Based Inspection - Routine	0	0	0	1
CAVONI'S	HILLSDALE	02/26/2025	Risk Based Inspection - Routine	0	0	0	0
Centreville United Methodist Church	Centreville	02/24/2025	Risk Based Inspection - Routine	0	0	0	0
CHICAGO STREET PUB INC.	COLDWATER	02/27/2025	Risk Based Inspection - Routine	0	0	0	0
China 1	Coldwater	02/11/2025	Non Foodborne Illness Complaint - Initial	0	0	0	1
Coach Eby Youth & family Center	COLDWATER	02/10/2025	Risk Based Inspection - Routine	0	0	0	1

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
COLDWATER CINEMAS	COLDWATER	02/07/2025	Risk Based Inspection - Routine	0	0	0	1
CONGRESS SCHOOL	STURGIS	02/12/2025	Risk Based Inspection - Routine	0	0	0	1
COTTAGE INN PIZZA	COLDWATER	02/19/2025	Risk Based Inspection - Routine	0	0	0	1
Cronkrite Beverage Catering	Coldwater	02/18/2025	STFU Inspection - Routine	0	0	0	0
Culver's of Three Rivers	Three Rivers	02/11/2025	Risk Based Inspection - Routine	0	0	0	0
Doyle Community Center	Sturgis	02/10/2025	Temporary Food Inspection - Routine	0	0	0	0
DQ Grill & Chill	Coldwater	02/26/2025	Consultation - Plan Review Consultation	0	0	0	0
EASTWOOD SCHOOL	Sturgis	02/25/2025	Risk Based Inspection - Routine	0	0	0	0
EL TACO LOCO II	Coldwater	02/19/2025	Risk Based Inspection - Routine	1	0	1	2
ELKS LODGE	COLDWATER	02/18/2025	Risk Based Inspection - Routine	0	0	0	1
EMMANUEL GLOBAL METHODIST CHURCH	UNION CITY	02/03/2025	Risk Based Inspection - Routine	0	1	0	0
Farrand Hall Bakery	Colon	02/03/2025	Consultation - Plan Review Consultation	0	0	0	0
Farrand Hall Bakery	Colon	02/06/2025	Pre-Opening - Pre-Opening	0	0	0	0
First Baptist	Sturgis	02/28/2025	Risk Based Inspection - Routine	0	0	0	0
FIRST CONGREGATIONAL CHURCH	UNION CITY	02/03/2025	Risk Based Inspection - Routine	0	0	0	0
FIRST CONGREGATIONAL CHURCH BRONSON	BRONSON	02/11/2025	Risk Based Inspection - Routine	0	0	0	0
FIRST UNITED METHODIST CHURCH OF BRONSON	BRONSON	02/21/2025	Risk Based Inspection - Routine	0	1	1	0
FIRST UNITED METHODIST CHURCH OF STURGIS	Sturgis	02/25/2025	Risk Based Inspection - Routine	0	0	0	1
FOE AERIE #2303	Three Rivers	02/26/2025	Risk Based Inspection - Routine	0	0	0	1
Four Corners Coffee	Cement City	02/26/2025	Risk Based Inspection - Routine	0	0	0	0
Frankie's	Three Rivers	02/25/2025	Risk Based Inspection - Routine	0	1	0	1
Grambys Homestyle Restaurant	Sturgis	02/21/2025	Risk Based Inspection - Routine	0	1	1	2
Hillsdale College Dow Conference Center	Hillsdale	02/24/2025	Non Foodborne Illness Complaint - Initial	0	0	0	0
HILLSDALE FILLING STATION DELI	Hillsdale	02/11/2025	Risk Based Inspection - Routine	0	0	0	0
Hillsdale Lunchbox	Hillsdale	02/03/2025	Risk Based Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
HILLSDALE TWP FIRE DEPT	HILLSDALE	02/20/2025	Risk Based Inspection - Routine	0	0	0	0
JEFFERSON ELEMENTARY SCHOOL	COLDWATER	02/12/2025	Risk Based Inspection - Routine	0	1	0	0
Jerolene Elementary	Sturgis	02/27/2025	Risk Based Inspection - Routine	0	0	0	0
JILLY BEANS TOO	JONESVILLE	02/24/2025	Risk Based Inspection - Routine	0	0	0	0
Kimball Camp Outdoor Center	Reading	02/14/2025	Risk Based Inspection - Routine	1	0	0	0
KING DRAGON BUFFET	Sturgis	02/26/2025	Risk Based Inspection - Routine	1	1	2	3
La Michoacana Ice Cream	Sturgis	02/05/2025	Risk Based Inspection - Routine	0	4	4	1
La Michoacana Ice Cream	Sturgis	02/28/2025	Risk Based Inspection - Follow-up	0	0	0	0
LIL PEPPI'S PIZZA	SOMERSET CENTER	02/26/2025	Risk Based Inspection - Routine	0	0	0	0
Little Caesars - Sturgis	Sturgis	02/05/2025	Risk Based Inspection - Routine	0	1	1	0
Little Caesars - Three Rivers	Three Rivers	02/12/2025	Risk Based Inspection - Routine	0	0	0	2
LONE RANGER CAFE	READING	02/19/2025	Risk Based Inspection - Routine	0	0	0	0
MAMMA MIA'S PIZZA	Burr Oak	02/06/2025	Risk Based Inspection - Routine	1	1	1	1
MARIA'S	Sturgis	02/05/2025	Risk Based Inspection - Routine	0	0	0	2
MAX LARSEN ELEM SCHOOL	COLDWATER	02/27/2025	Risk Based Inspection - Routine	0	0	0	0
MCDONALDS OF BRONSON	BRONSON	02/18/2025	Risk Based Inspection - Routine	0	0	0	0
MCDONALD'S OF QUINCY	QUINCY	02/14/2025	Risk Based Inspection - Routine	1	0	1	0
McDONALDS OF THREE RIVERS #2196	Three Rivers	02/05/2025	Risk Based Inspection - Routine	0	0	0	1
McDonald's of White Pigeon	White Pigeon	02/26/2025	Risk Based Inspection - Routine	0	0	0	0
Mocha Town		02/18/2025	Plan Review Activity - Initial	0	0	0	0
MR GYROS	COLDWATER	02/06/2025	Risk Based Inspection - Routine	0	0	0	0
MR. B'S DAIRY BAR	THREE RIVERS	02/20/2025	Risk Based Inspection - Routine	2	0	1	0
Nutrition Expression	Coldwater	02/24/2025	Risk Based Inspection - Routine	0	0	0	0
NUTRITION XTREME	Jonesville	02/25/2025	Risk Based Inspection - Routine	0	0	0	1
Old Style Pizza Plus	Quincy	02/19/2025	Risk Based Inspection - Routine	1	0	1	2
OLIVIA'S CHOP HOUSE	JONESVILLE	02/20/2025	Risk Based Inspection - Routine	1	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
OUR SAVIOR LUTHERAN CHURCH	UNION CITY	02/03/2025	Risk Based Inspection - Routine	0	0	0	0
PANSOPHIA ACADEMY	COLDWATER	02/12/2025	Risk Based Inspection - Routine	0	0	0	0
Pigeon Inn	White Pigeon	02/24/2025	Risk Based Inspection - Routine	0	0	0	1
PIPER'S GRINDERS GALORE	Constantine	02/25/2025	Risk Based Inspection - Routine	0	0	0	1
PIZZA HUT	HILLSDALE	02/19/2025	Risk Based Inspection - Routine	0	0	0	0
Ponderosa Steakhouse	Coldwater	02/11/2025	Non Foodborne Illness Complaint - Initial	0	0	0	0
Project Graduation	Three Rivers	02/03/2025	Temporary Food Inspection - Routine	0	0	0	0
RAY'S TAVERN	READING	02/19/2025	Risk Based Inspection - Routine	1	0	1	0
READING UNITED METHODIST CHURCH	READING	02/18/2025	Progress Note - New Inspection Reason	0	0	0	0
ROUGH DRAFT	HILLSDALE	02/03/2025	Risk Based Inspection - Routine	0	0	0	0
Sabor A Mexico	Three Rivers	02/19/2025	Consultation - Plan Review Consultation	0	0	0	0
Saint Paul's Lutheran Church	Centreville	02/10/2025	Progress Note - New Inspection Reason	0	0	0	0
Saint Paul's Lutheran Church	Centreville	02/24/2025	Progress Note - New Inspection Reason	0	0	0	0
Share the Warmth of Hillsdale County	Hillsdale	02/28/2025	Risk Based Inspection - Routine	0	0	0	0
Shawarma Station	Coldwater	02/12/2025	Risk Based Inspection - Follow-up	0	0	0	0
Small Town Girl	Coldwater	02/14/2025	Risk Based Inspection - Routine	0	0	0	0
Spangler's Stockyard Restaurant	Hillsdale	02/03/2025	Risk Based Inspection - Routine	0	1	1	0
ST PAUL'S LUTHERAN CHURCH	HILLSDALE	02/12/2025	Risk Based Inspection - Routine	0	1	0	0
ST. CHARLES SCHOOL	COLDWATER	02/10/2025	Risk Based Inspection - Routine	0	0	0	0
ST. JOE. K OF C COUNCIL 13749	WHITE PIGEON	02/12/2025	Progress Note - New Inspection Reason	0	0	0	0
ST. JOE. K OF C COUNCIL 13749	WHITE PIGEON	02/24/2025	Progress Note - New Inspection Reason	0	0	0	0
ST. JOHN'S EPISCOPAL CHURCH	Sturgis	02/28/2025	Risk Based Inspection - Routine	0	0	0	0
St. John's Lutheran Church	Burr Oak	02/18/2025	Risk Based Inspection - Routine	0	0	0	0
STURGIS HOSPITAL	Sturgis	02/25/2025	Risk Based Inspection - Routine	0	0	0	1
STURGIS MIDDLE SCHOOL	STURGIS	02/27/2025	Risk Based Inspection - Routine	1	1	2	1

<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>
Taqueria El Tejano	Three Rivers	02/19/2025	Risk Based Inspection - Routine	1	3	1	1
Taqueria EL Texano	Three Rivers	02/03/2025	Temporary Food Inspection - Routine	0	0	0	0
Tasteful Kreations	Bronson	02/21/2025	Risk Based Inspection - Routine	0	0	0	2
TASTY TWIST	COLDWATER	02/24/2025	Risk Based Inspection - Routine	0	1	0	0
THE GREAT WALL	HILLSDALE	02/19/2025	Risk Based Inspection - Routine	0	0	0	0
The Saucy Dog's BBQ	JONESVILLE	02/20/2025	Risk Based Inspection - Routine	1	0	1	0
The Udder Side	Jonesville	02/25/2025	Risk Based Inspection - Routine	0	0	0	0
Three Rivers Health (Food)	Three Rivers	02/25/2025	Risk Based Inspection - Routine	0	0	0	0
TIP-UP ISLAND	QUINCY	02/10/2025	Risk Based Inspection - Routine	0	0	0	0
Trainwreck Grill & Ale	Coldwater	02/20/2025	Risk Based Inspection - Routine	0	0	0	4
WENZEL SCHOOL	STURGIS	02/12/2025	Risk Based Inspection - Routine	0	0	0	0
Woodin Family Concession	Battlecreek	02/10/2025	STFU Inspection - Routine	0	0	0	0
				<b>13</b>	<b>19</b>	<b>20</b>	<b>41</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.



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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2025 Through 2/28/2025

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Abila	2,100.23	25-02-07 A.01	2/7/2025
Accident Fund	3,307.00	25-02-07 P.01	2/7/2025
ACD.NET	1,914.11	54716	2/21/2025
Action Quick Print Plus	416.00	25-02-07 A.02	2/7/2025
Aflac District Office	497.27	25-02-14 PR.01	2/14/2025
Aflac District Office	497.27	25-02-28 PR.01	2/28/2025
Alert Medical Alarms	224.60	54717	2/21/2025
Alerus Retirement Solutions	3,511.00	25-02-14 R.01	2/14/2025
Alerus Retirement Solutions	3,636.00	25-02-28 R.01	2/28/2025
Amazon Capital Services, Inc	1,511.31	25-02-07 P.02	2/7/2025
Amazon Capital Services, Inc	237.62	25-02-21 P.01	2/21/2025
Angela Shedd	2,090.90	25-02-07 A.03	2/7/2025
Angela Shedd	1,537.00	25-02-21 A.01	2/21/2025
Barbara P. Foley	46.16	54714	2/14/2025
Barbara P. Foley	46.16	54731	2/28/2025
Beacon Properties Administration	4,631.85	25-02-28 A.01	2/28/2025
Blue Cross Blue Shield	64,806.81	25-02-21 P.02	2/21/2025
Branch Area Transit Authority	1,566.48	25-02-21 A.02	2/21/2025
Branch County Commission	22,449.46	25-02-21 A.03	2/21/2025
Branch County Complex	5,694.28	25-02-28 A.02	2/28/2025
Branch County Sheriff Department	41.95	54710	2/7/2025
Card Services Center	2,254.79	25-02-28 P.02	2/28/2025
CDW GOVERNMENT INC.	1,665.90	25-02-21 A.04	2/21/2025
Century Bank - Hillsdale Maintenance	2,000.00	25-02-28 A.03	2/28/2025
Century Bank - Three Rivers Maintenance	2,000.00	25-02-28 A.04	2/28/2025
Century Basic	1,006.59	25-02-14 R.02	2/14/2025
Century Basic	1,006.59	25-02-28 R.02	2/28/2025
Century EFTPS	27,952.00	25-02-14 R.03	2/14/2025
Century EFTPS	94.32	25-02-28 L.01	2/28/2025
Century EFTPS	32,833.02	25-02-28 R.03	2/28/2025
Century Mastercard	2,099.00	25-02-07 P.03	2/7/2025
Century MERS	56,882.50	25-02-07 A.04	2/7/2025
Century State/Michigan State Treasury	6.18	25-02-28 L.02	2/28/2025
Century State/Michigan State Treasury	5,010.65	25-02-28 R.04	2/28/2025
Century State/Michigan State Treasury	5,474.50	25-02-28 R.05	2/28/2025
Charter Communications	149.98	25-02-07 P.04	2/7/2025
Cintas Corporation Loc 351	169.28	25-02-07 P.05	2/7/2025
City Of Coldwater	120.00	25-02-07 A.05	2/7/2025
City Of Coldwater	120.00	25-02-21 A.05	2/21/2025
City of Jonesville	120.00	25-02-21 A.06	2/21/2025
Crossroads Home Care Inc.	1,165.32	25-02-21 A.07	2/21/2025
CSHCS	240.00	54718	2/21/2025
Dan Wood Co.	717.00	25-02-21 A.08	2/21/2025
DELTA DENTAL	3,944.03	25-02-21 A.09	2/21/2025
DiningRD	4,646.34	25-02-21 A.10	2/21/2025
Dr. Karen M. Luparello	4,469.20	25-02-28 A.05	2/28/2025
Eurotrol U.S.B.V.	445.00	54719	2/21/2025
Frontier	292.57	25-02-07 P.06	2/7/2025
GDI Services Inc.	4,827.40	25-02-28 A.06	2/28/2025
Glaxo-Smithkline Financial Inc.	2,615.16	25-02-21 A.11	2/21/2025
Health Equity	2,327.48	25-02-14 PR.02	2/14/2025
Health Equity	2,743.58	25-02-28 PR.02	2/28/2025

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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2025 Through 2/28/2025

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Helping Angels Home Care LLC	741.48	25-02-21 A.12	2/21/2025
Hillsdale Board Of Public Utilities	1,998.64	25-02-07 P.07	2/7/2025
Hillsdale County Treasurer	639.23	25-02-07 A.06	2/7/2025
Hillsdale County Treasurer	2,741.97	25-02-21 A.13	2/21/2025
Home Roots Companion & Home Care Services LLC	113.56	25-02-21 A.14	2/21/2025
HomeJoy of Kalamzoo	2,871.09	25-02-21 A.15	2/21/2025
Hospital Network Healthcare Services	64.75	25-02-21 A.16	2/21/2025
Indiana MI Power Company	1,581.42	25-02-07 P.08	2/7/2025
Joseph Frazier	42.36	25-02-21 A.17	2/21/2025
Karim Healthcare	125.00	54720	2/21/2025
Laboratory Corporation of America	107.60	25-02-21 A.18	2/21/2025
Legal Services Of S.Central MI	1,260.00	25-02-21 A.19	2/21/2025
Lumen Orthotics & Prosthetics	1,589.60	54721	2/21/2025
Macquarie Equipment Capital Inc.	1,322.75	25-02-21 A.20	2/21/2025
Maner Costerisan	13,000.00	25-02-28 A.07	2/28/2025
Maplecrest, LLC	1,265.08	25-02-28 A.08	2/28/2025
Marilyn Fletcher	215.55	54722	2/21/2025
McKesson Medical-Surgical Gov. Solutions LLC	705.26	25-02-07 P.09	2/7/2025
McKesson Medical-Surgical Gov. Solutions LLC	2,708.00	25-02-21 P.03	2/21/2025
Medical Care Alert	412.60	25-02-21 A.21	2/21/2025
MEHA	280.00	54723	2/21/2025
Merck Sharp & Dohme LLC	3,587.14	54724	2/21/2025
MERS 5% EMPLOYEES	22,131.74	25-02-07 A.07	2/7/2025
MI Security & Lock, LLC	787.50	54711	2/7/2025
MI Security & Lock, LLC	1,362.00	54725	2/21/2025
Michigan Gas	81.31	25-02-07 P.10	2/7/2025
Michigan Public Health Institute	2,567.95	25-02-21 A.22	2/21/2025
Michigan State Disbursement Unit	190.11	54715	2/14/2025
Michigan State Disbursement Unit	190.11	54732	2/28/2025
Mistel de Varona	607.50	54712	2/7/2025
Mistel de Varona	675.00	54726	2/21/2025
Nationwide	620.00	25-02-14 R.04	2/14/2025
Nationwide	620.00	25-02-28 R.06	2/28/2025
PFIZER INC	2,664.40	54727	2/21/2025
Principal Life Insurance Company	2,003.27	25-02-21 P.04	2/21/2025
Reserve Account	3,000.00	25-02-07 A.08	2/7/2025
Richard Clark	2,461.85	25-02-28 A.09	2/28/2025
Riley Pumpkin Farm	2,405.00	25-02-28 A.10	2/28/2025
Rosati Schultz Joppich Amtsbueshler	180.00	25-02-21 A.23	2/21/2025
ROSE PEST SOLUTIONS	83.00	25-02-07 A.09	2/7/2025
Sanofi Pasteur Inc.	343.82	25-02-21 P.05	2/21/2025
Semco Energy	222.30	25-02-07 P.11	2/7/2025
Shred It	124.95	25-02-07 P.12	2/7/2025
Smilemakers	1,253.22	25-02-21 A.24	2/21/2025
St Joseph County COA	27,296.95	25-02-21 A.25	2/21/2025
Staples	1,000.08	25-02-07 P.13	2/7/2025
State of MI - EGLE	34.00	54728	2/21/2025
State of Michigan-Dept	11.50	54729	2/21/2025
Stratus Video, LLC	3,023.76	54730	2/21/2025
TMK Worldwide, LLC	174.21	25-02-07 A.10	2/7/2025

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

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 2/1/2025 Through 2/28/2025

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
Toledo Radiological	33.00	54713	2/7/2025
Verizon	1,093.70	25-02-07 P.14	2/7/2025
VRI INC.	108.00	25-02-21 A.26	2/21/2025
Wendy Nowicke	<u>29.70</u>	25-02-07 A.11	2/7/2025
Report Total	404,914.85		

Branch-Hillsdale-St Joseph Community Health Agency  
Balance Sheet - Unposted Transactions Included In Report  
As of 2/28/2025

	Current Period Balance
<b>Assets</b>	
Cash on Hand	15,793.03
Cash with County Treasurer	3,735,725.10
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	42,450.00
Cash TR Building Maintenance	67,049.40
Accounts Receivable	85,282.52
Due from Dental DAPP	1,275.67
Due from State	(253,197.97)
Due from Other Funding Sources	107,341.72
Prepaid Expenses	166,399.60
Biologic Inventory	167,455.66
<b>Total Assets</b>	4,445,530.67
 <b>Liabilities</b>	
Accounts Payable	173,681.74
Payroll Liabilites	90,901.60
Deferred Revenue	484,436.44
Deferred Revenue BR	19,155.08
Deferred Revenue HD	20,204.50
Deferred Revenue SJ	26,914.67
Biologics	167,455.66
<b>Total Liabilities</b>	982,749.69
 <b>Net Assets</b>	
Operation Fund Balance	314,086.41
Restricted Fund Balance	387,769.73
Designated Fund Balance	2,760,924.84
<b>Total Net Assets</b>	3,462,780.98
 <b>Total Liabilities and Net Assets</b>	4,445,530.67

**12 Month Grants Should be 41.67% Expended, 9 Month Grants Should be 55.56%**

	Current Month	Year to Date	Total Budget · Amendment1	% Total Expended
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.	0.00	31,670.30	44,590.00	71.02%
717 EGLE Swimming Pools Over budget due to extra staff time for training. We will continue to monitor and adjust at the next amendment.	269.66	11,360.42	16,652.59	68.22%
210 Beacon Health Grant ends in May 2025, this will fall back in line as the year progresses.	400.75	13,434.75	20,000.00	67.17%
720 EH- Complaints Increased activity. We will continue to monitor and will adjust at the next budget amendment.	280.15	4,064.20	6,109.89	66.51%
008 Salary & Fringe Payoff Over budget due to yearly pay out of sick time. This will fall in line as the year progresses.	12,798.70	49,344.20	80,000.00	61.68%
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 43.75%. Will continue to monitor.	28,191.82	131,644.93	222,409.00	59.19%
719 Body Art Over budget due to increased staff time. We will continue to monitor and adjust at the next budget amendment.	1,443.92	3,255.17	6,259.47	52.00%
010 Agency Support Over budget due to one time expenditure for audit fees and prepaid postage. Legal fees are also running higher than expected. Will monitor and adjust in next amendment.	7,591.95	65,238.75	126,220.00	51.68%
255 Community Health Direction Over budget to do grant cycles. This will come in line as the year progresses, as staff will spend much more time on other programs.	20,166.18	71,659.07	150,000.00	47.77%
605 General EH Services Over budget due to one time equipment purchase and not anticipating how much staff time needed for this program. Will monitor and adjust in next amendment.	3,121.66	15,482.61	32,660.38	47.40%
332 HIV Prevention Over budget due to change in Medical Director's allocation. Will adjust in next budget amendment.	1,641.70	11,565.11	25,498.93	45.35%
032 Emergency Preparedness Over budget due to increase time for staff training and an issue with timesheet reporting that is being corrected. This should come back in line as the year progresses.	18,473.17	78,605.76	182,953.96	42.96%

	Current Month	Year to Date	Total Budget Amendment1	% Total Expended
714 Onsite Sewage Disposal Slightly over budget. This should come back in line as the year progresses.	37,607.32	199,644.55	477,364.15	41.82%
341 Infectious Disease Over budget due to increased staff time and a change in the Medical Director's allocation. Will adjust in next budget amendment.	30,808.44	157,099.34	376,327.24	41.74%
138 Immunization IAP	88,088.75	539,855.23	1,300,401.52	41.51%
327 Hearing (ELPHS)	6,966.16	49,373.58	123,035.71	40.12%
329 MCH Enabling Children	7,867.41	39,393.78	99,409.00	39.62%
108 WIC Breastfeeding	11,212.01	55,679.35	140,989.60	39.49%
109 WIC	87,523.86	457,328.46	1,166,245.37	39.21%
021 Dental Clinic - Three Rivers	4,631.85	23,159.25	60,000.00	38.59%
704 Food Service	46,195.36	237,244.71	616,146.78	38.50%
326 Vision (ELPHS)	11,332.38	48,068.95	124,893.05	38.48%
014 VOCA	14,433.36	77,708.04	205,743.40	37.76%
107 Medicaid Outreach	674.17	5,606.92	14,928.97	37.55%
721 Drinking Water Supply	37,331.31	169,615.34	453,011.68	37.44%
029 Dental Clinic - Hillsdale	1,059.46	4,342.12	12,000.00	36.18%
331 STD	11,220.16	61,433.82	176,115.32	34.88%
207 MCRH Community Health Workers	6,954.49	40,292.76	115,599.08	34.85%
338 Immunization Vaccine Handling	5,018.56	30,546.76	89,356.68	34.18%
201 CSF Carseats	2,088.36	9,877.12	30,779.56	32.08%
202 Oral Health	5,663.30	26,524.61	84,585.50	31.35%
205 OHSP Grant	6,818.84	25,840.99	82,583.69	31.29%
012 Area Agency on Aging	89,575.71	486,562.86	1,582,916.42	30.73%
405 Grant Writing	68.19	968.78	3,246.50	29.84%
745 Type II Water	14,971.87	55,337.27	220,763.05	25.06%
101 Workforce Development	4,262.99	12,142.15	51,027.54	23.79%
096 CSHCS Donations SJ	0.00	4,846.08	20,574.31	23.55%
286 HEP Special Projects	717.00	3,284.83	15,565.22	21.10%
345 Lead Testing	(399.56)	9,266.75	48,328.50	19.17%
097 CSHCS Donations BR HD	1,829.60	3,299.60	20,640.49	15.98%
722 PFAS Response	14.14	478.28	3,000.09	15.94%
724 PFAS - Westside Landfill	757.91	1,106.39	7,675.09	14.41%
363 363 CVDIMS Covid Immz Supplemental	2,800.60	19,039.88	135,349.60	14.06%
718 EGLE Septage	71.58	392.30	6,309.81	6.21%
351 CELC Infection Prevention	7,972.25	23,914.28	400,000.00	5.97%
723 PFAS Response - White Pigeon	10.93	274.88	9,700.09	2.83%
716 EGLE Campgrounds	7.26	440.20	18,377.23	2.39%

015 Local Expenses - Unallowable by Grants

	755.62 Current Month	279.52 Year to Date	37,956.74 Total Budget Amendment 1	0.73% % Total Expended
355 COVID-19 PH Workforce Supplemental	(0.15)	407.32	66,263.00	0.61%
035 Vector Borne Disease Surveillance	75.68	77.10	61,338.75	0.12%
025 PH Workforce & Infastructure	0.00	134.01	135,967.06	0.09%
023 Capital Expenditures	0.00	0.00	78,000.00	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%
Total Total Expense	641,366.83	3,368,213.43	9,703,194.41	34.71%

## March 17, 2025 – Board of Health Finance Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Finance Committee meeting was called to order by Jared Hoffmaster at 9:01 AM. Roll call was completed as follows: Jared Hoffmaster and Kevin Collins. Jon Houtz was absent.

Also present from BHSJ: Rebecca Burns, and Theresa Fisher

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

Public Comment: No public comments were given.

New Business:

- Mr. Collins moved to recommend the full board accept the bid from STP Painting to repaint the interior of the Three Rivers building. The motion received support from Mr. Hoffmaster and passed unopposed.

Public Comment: No public comments were given.

With no further business, the meeting was adjourned at 9:09 AM.

Respectfully Submitted by:



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



## Three Rivers Facility Interior Paint Project

The Branch-Hillsdale-St. Joseph Community Health Agency sought quotes for painting the interior of the Three Rivers facility according to the attached specification. The quotes will not be made public until a vendor has been selected, which allows the board to seek additional information if necessary.

The Board of Health Finance Committee reviewed the quotes at their regular meeting on March 17, 2025 and recommends that the Board of Health accept the quote and move forward with STP Painting.



Painting Bid Specifications for:  
1110 Hill Street  
Three Rivers, MI 49093

Submit to:  
Rebecca Burns  
Health Officer  
570 Marshall Road  
Coldwater, MI 49036  
[burnsr@bhsj.org](mailto:burnsr@bhsj.org)

Submit by: March 10, 2025

All Bids Must Contain the Following:

1. Paint for Ceilings; specify the brand, type, number of gallons, number of coats to be applied. Provide cost for paint and labor.
2. Paint for Walls; specify the brand, type, number of gallons, number of coats to be applied. Provide cost for paint and labor.
3. Specify prep work to be done and this labor cost
4. See the map for locations to be painted.
5. Specify materials other than paint; drywall repair material, roller covers, caulk, sanding blocks, paint rags, tape, plastic, etc. and the cost for these materials.
6. Predict the time to complete the job in number of work days (a work day is expected to be from 8 am to 5 pm, 7 am to 4 pm, or other mutually agreed upon time frame)
7. Provide references
8. Include cost to move furniture away from walls and to move furniture back as well as removing bulletin boards, pamphlet racks, fire extinguishers, chart holders and rehangings.

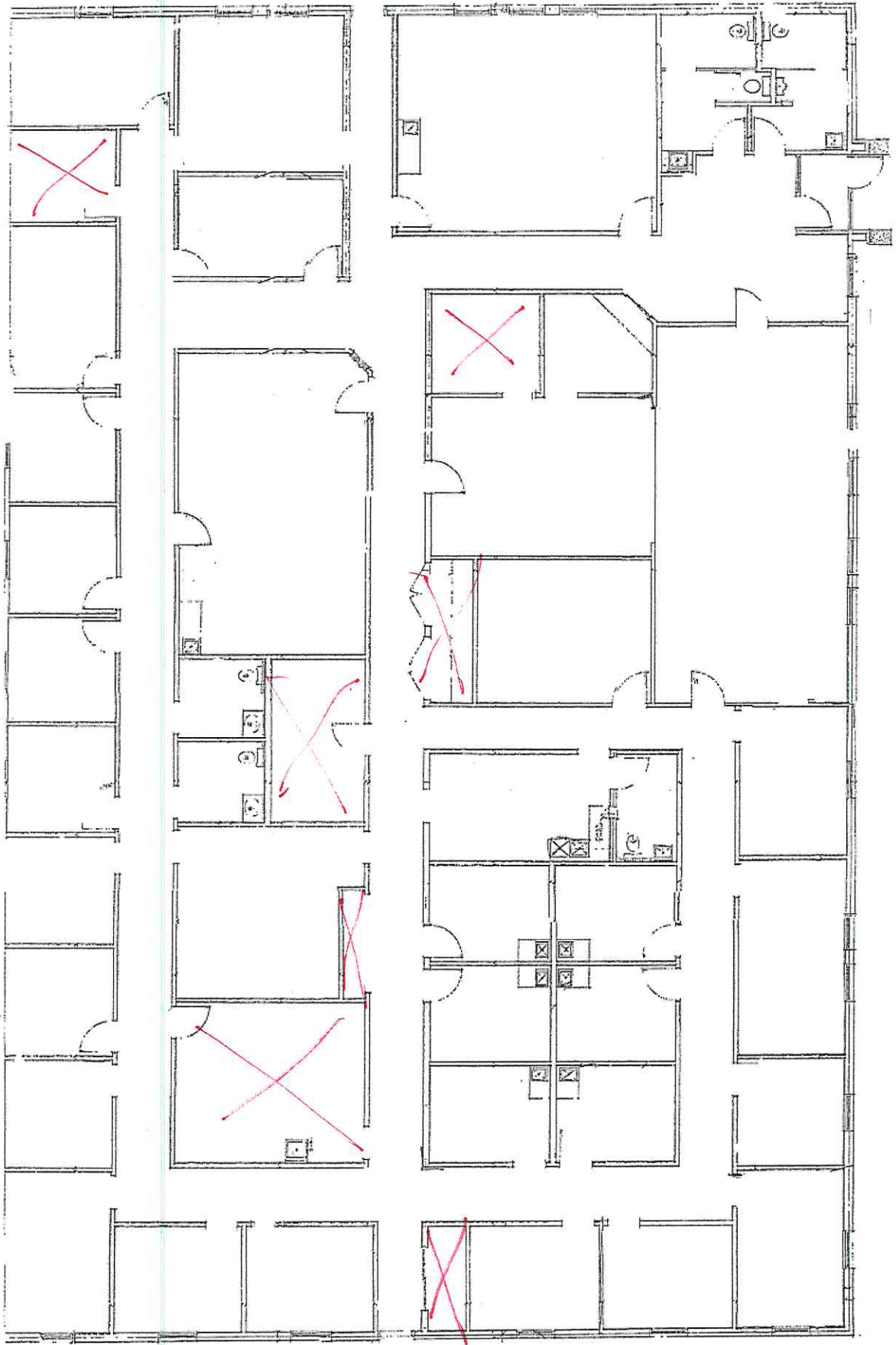
All bidders must provide certificate of insurance and complete a W9 once hired.

570 N. Marshall Road  
Coldwater, MI 49036  
(517) 279-9561  
(517) 278-2823 Fax

20 Care Drive  
Hillsdale, MI 49242  
(517) 437-7395  
(517) 437-0166 Fax

1110 Hill Street  
Three Rivers, MI 49093  
(269) 273-2161  
(269) 273-2452 Fax

1555 E. Chicago Rd  
Suite C  
Sturgis, MI 49091  
(269) 273-2161



STP Painting  
P.O. Box 36  
White Pigeon, MI 49099  
773.744.8316



Branch-Hillsdale-St. Joseph Community Health  
570 Marshall Rd.,  
Coldwater, MI 49036

## ESTIMATE

Estimate # 0004912  
Estimate Date 03/04/2025

Item	Description	Unit Price	Quantity	Amount
	<p>1110 Hill St., Three Rivers, MI</p> <p>Prep/Prime/Paint: Walls/Ceilings.</p> <p>Including: Entry, Bathrooms (5), Offices (27), Break room, Hallways, Large conference room, Waiting room, Dept. of Environmental Health, Examination Room, Laboratory.</p> <p>First we will fill any nail holes/scuffs/cracks in the surfaces with Sherwin Williams (SW) Shrink-free Spackle and SW QD flex caulk. Then, we will spot prime the surfaces. On the walls we will use SW Emerald. Emerald has anti-microbial agents that inhibit the growth of mold and mildew on the paint surface as well as zero VOCs while providing excellent scrubbability. On the ceiling, we will spot prime the repaired areas and paint using SW CHB. In the areas with wallpaper, we will remove the paper and repair any areas before spot priming the walls.</p> <p>X 2 Topcoats</p> <p>Prep/Prime/Paint: Ext. Doors and jambs (2). We will clean doors and jambs, then prime, and paint using SW Duration.</p> <p>X 2 Coats</p>			

\*\*\*Our price includes all materials, labor, paint/primer, and the moving of furniture and removal of wall hangs and moving/reinstalling back.

We would be willing to work evening shifts to avoid any interference with daily operations. I believe we can complete this job in 7 days or less. I have a large crew.

References:  
 Village of White Pigeon  
 City of Sturgis  
 Arby's Corporation  
 Summit Polymers  
 Edward Jones

TOTAL PRODUCT AND LABOR ESTIMATE	34900.00	1.00	34,900.00
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NOTES: Insured thru Foremost Insurance (Liability and Workers Comp.)#003201693-001-00001.

Agent Glen Rifenberg, Three Rivers, MI

License # 558327 Michigan

All work guaranteed for 1 (one) year. Products have separate warranties. A deposit of 50% due before the start of the job and the remaining 50% paid day of completion.

	<b>Subtotal</b>	34,900.00
	<b>Total</b>	34,900.00
	<b>Amount Paid</b>	0.00
	<b>Estimate</b>	\$34,900.00

Mike's Custom Painting

# Estimate

17254 Heimbach Rd.  
Three Rivers, MI 49093

Date	Estimate #
2/13/2025	521

Name / Address
Community Health Agency 1110 Hill St. Three Rivers, MI 49093

Project

Description	Qty	Rate	Total
<p>Painting of the interior of Community Health Agency located at 1110 Hill St., Three Rivers, MI 49093.</p> <p>Price includes: All prep work which includes moving all furniture and office equipment. Removing sound pads, soap dispensers, and pictures off of all walls. Protecting all floors, trim, appliances, and equipment from dust and over spray. Removing all wallpaper and glue of off walls. Patching and sanding all imperfections in ceilings and walls only. Caulking around trim and windows if necessary. One coat of finishing paint on all ceilings in the color of your choice. Two coats of finishing paint on all walls in the color of your choice. Painting of two exterior doors to match white siding of building. All labor and material cost.</p> <p>Paint for ceiling Sherwin Williams Premium Ceiling Paint Flat White 23 gallons x 60.00=1380.00</p> <p>Paint for walls Sherwin Williams ProMar 200 Eggshell 126 gallons x 60.00 = 7560.00</p> <p>Other material Tape, plastic, paper, roller knapps, trays, drywall mud, caulk, sandpaper, etc. 890.00</p> <p>Cost Breakdown Ceiling 8034 sqft. Walls 22020 sqft.</p> <p>Total 30,054 sqft. x 1.33 =39,970.00</p> <p>Approximate Time 3 weeks</p>		39,970.00	39,970.00

Thank you for your business.	<b>Total</b>		
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Mike's Custom Painting

# Estimate

17254 Heimbach Rd.  
Three Rivers, MI 49093

Date	Estimate #
2/13/2025	521

Name / Address
Community Health Agency 1110 Hill St. Three Rivers, MI 49093

Project

Description	Qty	Rate	Total

Thank you for your business.	<b>Total</b>
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Mike's Custom Painting

# Estimate

17254 Heimbach Rd.  
Three Rivers, MI 49093

Date	Estimate #
2/13/2025	521

Name / Address
Community Health Agency 1110 Hill St. Three Rivers, MI 49093

Project

Description	Qty	Rate	Total
Thank you for your business.			<b>Total</b> \$39,970.00



# Wiles Painting

wileswilespainting@gmail.com.com

<b>ESTIMATE NO.</b>	012	<b>ISSUE DATE</b>	3/9/2025	<b>VALID UNTIL</b>	3/9/2025
<b>FROM</b> Wiles Painting 610 George st Sturgis MI 49091 United States	<b>FOR</b> Community Health Agency c/o Rebecca Burns 1110 Hill Street Three Rivers MI 49093 United States				

DESCRIPTION	QUANTITY	UNIT PRICE (\$)	AMOUNT (\$)
<p>Interior Painting</p> <p>Ceilings; 2 coats approx. 50 gallons of sherwin Williams ceiling paint : Total cost:\$12,625.00</p> <p>Walls; 1 coat primer approx. 50- gallons sherwin-Williams pro block primer. 1 coat approx. 50 gallons sherwin Williams Super paint. Total cost for wall primer and topcoat: \$31,150.00</p> <p>Prep work; Fill and sand any nail holes and or cracks. Cover all windows, trim and floors . Total costs for labor is \$2,500.00</p> <p>Supplies: Plastic, tape, roller covers, caulk, drywall mud, sanding pads, tray liners, Brushes, Total costs \$500.00</p> <p>Labor cost of removal and replacement of furniture, bulletin boards, pamphlet racks, fire extinguishers, and chart holders. Total costs: \$3000</p>	1	49,775.00	49,775.00
Interior painting	1	0.00	0.00
<p>Estimated time</p> <p>Estimated at approximately 20 business days to complete</p>	1	0.00	0.00

**Total (USD):** **\$49,775.00**

References: David Munn Custom Home Builders. 269-625-1784  
 Draper construction. 269-716-3447  
 Carr Construction 269-625-7803  
 Patty and David Barth 219-805-8285

**\*\*\*ESTIMATE\*\*\***

George Seman

PO Box 133

Constantine, MI 49042

269-506-4449

**Bid for:**

BHSJ CHA

570 N. Marshall

Coldwater, MI 49036

**Job Site Location:**

BHSJ CHA

1110 Hill Street

Three Rivers, MI 49093

**Description of work to be done:**

Move furniture in rooms and cover with plastic

Strip wallpaper borders

Patch walls

Sand patched areas

Sand entirety of all walls

Paint Ceiling 1 coat Flat

Paint Walls 2 coats Matte

Put furniture back

Hang things back on the walls

**Labor and Supplies (other than paint) (paint rollers, drop cloths, paint brushes, etc).** \$19,900.00

**Cost for Paint\* (see below for detail)** \$8,000.00

**Total price including all labor and supplies** \$27,900.00

\*The paint recommended by Sherwin Williams is Duration Home in Matte Finish which is a sheen between flat and satin. This is what I included in the bid for the price of paint. If you wanted to switch to Sherwin Williams Duration Home in Satin Finish that would add \$500 to the bid.

**Additional Cost for painting the 2 ext. doors 2 coats white** \$300.00

**\*\*ESTIMATE\*\***

Castle Coatings

10191 Walnut Dr  
 Three Rivers, MI 49093

# Estimate

Date	Estimate #
3/11/2025	187

Name / Address
St Joe County Community Health Agency

			Project
Description	Qty	Rate	Total
<p>Bid includes all labor and materials to move furniture, prep and paint.            All items will be removed from walls to prepare for paint excluding TV's. Furniture and filing cabinets will be moved as required.            Small patches will be done as required.            Spot priming will be done as required. ie stains, patches, etc.            Stress cracks in drywall will be repaired where necessary.            Interior trim and doors are not to be painted.            Two exterior entry doors are included. Product will be Sherwin Williams Multisurface Acrylic or equivalent product from Sherwin Williams.            Wall paper boarder will be removed.            Walls will be pole sanded to prepare for paint.            Two full coat of top coat will be applied. Paint will be Sherwin Williams promar 200 or higher in eg-shel.</p> <p>One full coat of top coat will be applied to ceilings in Sherwin Williams promar ceiling paint flat white.</p> <p>Walls will be pole sanded to prepare for paint.            Two full coat of top coat will be applied. Paint will be Sherwin Williams promar 200 or higher level in eg-shel.            Color to be determined by customer.</p> <p>To move all furniture, remove items from walls and replace upon completion.</p>			0.00
		10,900.00	10,900.00
		38,800.00	38,800.00
		11,000.00	11,000.00

Thank you for the opportunity

Castle Coatings  
 10191 Walnut Dr  
 Three Rivers, MI 49093

# Estimate

Date	Estimate #
3/11/2025	187

Name / Address
St Joe County Community Health Agency

Project

Description	Qty	Rate	Total
Time frame to complete is estimated at 3 weeks with a 5 day variance.		0.00	0.00

Thank you for the opportunity

# Operational Plan Report

## BHSJ CHA | 1-Strategic Plan - Strategic Plan



[3/21/2025]

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

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

**1-Strategic Plan Values:**

- Inclusion *Inclusion*
- Innovation *Innovation*
- Integrity *Integrity*

### Group: - 1-Strategic Plan | - Strategic Plan

#### Initiative Employee Investment 1:



**Goal** Ensure retention of a competent and satisfied workforce  
**1.1:**



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

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

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.1.1	[L] Fisher, Theresa	[Timeline] Seek out wage surveys conducted in past 12 months if available for review; request assistance from MALPH as appropriate by January 2023	Wage Surveys Compiled measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	27.1% of Timeline Starting 12/12/2024
<p><b>Notes:</b> [12/14/2024 - Theresa Fisher] Presented to BOH.</p> <p>[11/2/2023 10:57:35 AM - Theresa Fisher] Per Norm Hess, the MALPH LHD Services/Staffing report will not be completed and available for several more weeks. This data will not be available for this year's discussion.</p> <p>[10/3/2023 9:28:27 AM - Theresa Fisher] Sent a copy of the 2019 Compensation Study and the most recent data from the May Municipal Consulting Services study to the Board of Health. The MALPH study is still in progress and not available yet.. Still waiting for the new ELPHS allocation to be released. Expect to have enough information to bring wage increase to the BOH in December.</p> <p>[04/25/2023 - Theresa Fisher] MALPH will be updating their salary study in 2023. The existing data is from 2019. Municipal Consulting Services is in the process of doing a survey that will be ready in April of 2023. Work in this area to gather data is ongoing, but as new studies are only now being conducted, this activity timeline has been adjusted from January to June. Work should be completed by the end of June to have relevant data to present in October.</p>					
	1.1.1.2	[L] Fisher, Theresa	[Project] Create opportunities for board members interact with employees to gain understanding of public health work and build rapport by January 2023	Interaction opportunities created, implemented and documented [between 10/1/2022 and 1/31/2023]	100% Complete
<p><b>Notes:</b> [4/25/2023 - Theresa.Fisher] - Rebecca Burns set up lunch meetings to allow staff to meet the local Commissioners that represent them on the Board of Health. Hillsdale County staff met with Commissioner Leininger on February 9, 2023 (Commissioner Lanus was not able to attend). Branch County staff met with Commissioners Houtz and Matthew on February 23, 2023. St. Joseph County staff met with Commissioners Hoffmaster and Baker on March 1, 2023.</p> <p>[11/29/2022 - Theresa.Fisher] With such turnover after the election, this activity timeline should be adjusted to begin after the new Board of Health members are assigned in January of 2023. The time would be better spent on incoming members who will be with us for 2 years, not outgoing members who will be retired from our board at the end of 2022.</p>					
	1.1.1.3	[L] Fisher, Theresa	[Timeline] Present wage equity plan to BOH in December of every year	Present Wage Equity Plan to Board of Health measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	27.1% of Timeline Starting 12/12/2024

<b>Notes:</b> [12/14/2024 - Theresa Fisher] Presented to BOH. The Board approved a 5% increase. [12/14/2023 - Theresa Fisher] Presented to the Board of Health in December. The Board approved a standardized scale with a 7% increase.  [10/13/2023 8:50:17 AM - Theresa Fisher] The Board does not meet in October and budget data may not be complete at that time. Adjusting this activity to December of every year.
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**Objective 1.1.2:** Review and update the agency workforce development plan by January 2024 **Lead:** Fisher, Theresa

Objective % Done: 0 % Activities Sum:


Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.2.1	[L] Fisher, Theresa	[Project] Analyze agency-wide self-assessment of the public health core competencies to identify knowledge gaps and opportunities for staff development by December 2022	[between 10/1/2022 and 12/31/2022]	100% Complete
<b>Notes:</b> Survey was completed and the report was received on 9/30/2022. The report has been reviewed. The three top training areas identified are stress management, recruitment and retention, and public health 3.0. The two core competency skills that scored the lowest are Data Analytics and Assessment Skills, and Leadership and Systems Thinking Skills.					
	1.1.2.2	[L] Fisher, Theresa	[Project] Identify the mandated trainings required for each department and program by December 2023.	[between 6/1/2023 and 12/31/2023]	100% Complete
<b>Notes:</b> [7/5/2024 3:58:10 PM - Theresa Fisher] A training record sheet was created for each position and lists all required trainings. [4/10/2024 2:55:23 PM - Theresa Fisher] The majority of the data has been collected and reviewed by the HR Support Specialist. We are currently in the processes of having Directors review and sign off on the compiled lists. [11/2/2023 10:30:08 AM - Theresa Fisher] Administrative Services staff have been working with Directors/Supervisors to compile the lists.					
	1.1.2.3	[L] Fisher, Theresa	[Project] Create an annual training schedule and tracking system to assure the mandated trainings are completed by January 2024.	[between 9/1/2023 and 12/31/2023]	100% Complete
<b>Notes:</b> [1/31/2025 9:40:42 AM - Theresa Fisher] Updated checklists and tracking in excel.  [4/10/2024 2:58:59 PM - Theresa Fisher] There has been much research and discussion on this activity, but we have not yet found a universal solution to track all trainings. We will continue working to identify the best way to track the the vast number of different trainings required.					
	1.1.2.4	[L] Fisher, Theresa	[Project] Compile the information necessary for new employee orientation by January 2024.	[between 9/1/2023 and 12/31/2023]	100% Complete
<b>Notes:</b> [7/5/2024 3:59:41 PM - Theresa Fisher] Orientation and training checklists completed and working well. [4/10/2024 3:03:21 PM - Theresa Fisher] A new employee orientation checklist has been created, along with job specific checklists for each position. This item will be completed as soon as testing has been completed by using the processes with new hires.					
	1.1.2.5	[L] Fisher, Theresa	[Project] Consider a peer-mentoring program for new employees by June 2024.	[between 2/1/2024 and 6/28/2024]	% Complete
<b>Notes:</b> [2/5/2025 12:48:39 PM - Theresa Fisher] Updated activity date from June 2024 to June 2025.					
	1.1.2.6	[L] Fisher, Theresa	[Project] Provide staff the opportunity to review and provide input into the plan by September 2024.	[between 7/1/2024 and 9/30/2024]	% Complete
<b>Notes:</b> [2/5/2025 12:49:32 PM - Theresa Fisher] Updated activity dates from September of 2024 to September of 2025.					




**Objective 1.1.3:** Evaluate our hiring strategies and opportunities for advancement by September 2023 **Lead:** Fisher, Theresa



Objective % Done: 0 % Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.3.1	[L] Fisher, Theresa	[Project] Review each step in the recruitment and hiring/orientation process and recommend improvements by March 2023	[between 11/1/2022 and 3/31/2023]	100% Complete
<b>Notes:</b> [11/2/2023 10:31:37 AM - Theresa Fisher] Hiring policy/procedure reviewed and updated. Met with Directors/Supervisors on 11/1/2023 to roll out new process.					
	1.1.3.2	[L] Fisher, Theresa	[Project] Develop materials to promote the benefits provided by the agency to be used in the recruiting process by March 2023	[between 11/1/2022 and 3/31/2023]	100% Complete
<b>Notes:</b> Recruitment poster created and reviewed/approved by the Personnel Policy Committee.					
	1.1.3.3	[L] Fisher, Theresa	[Timeline] Review job descriptions for accuracy and update as appropriate; assure employees know where job descriptions are located for reference by September 2023	Review/Update Job descriptions measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	71% of Timeline Starting 7/5/2024
<b>Notes:</b> [7/5/2024 4:03:20 PM - Theresa Fisher] Completed - will review annually [4/10/2024 3:06:13 PM - Theresa Fisher] The new HR Support Specialist is 90% done with the review process. She is currently in the process of updating the documentation and will finalize the documents soon.  [2/6/2024 3:33:19 PM - Theresa Fisher] This activity will be completed by the new HR Support Specialist by the end of March.  [11/2/2023 10:35:47 AM - Theresa Fisher] Adjusting project timeline to end of year and changing from project-based activity to a quality assurance activity, to ensure this work is ongoing each year. Job descriptions were last reviewed/updated in September of 2022.					

	1.1.3.4	[L] Fisher, Theresa	[Project] Explore the development of career ladders for employees to seek advancement opportunities and aid in succession planning by January 2024	[between 10/1/2023 and 1/31/2024]	100% Complete
<p><b>Notes:</b> [1/31/2025 8:30:33 AM - Theresa Fisher] Career ladders were explored, but the agency will be moving forward by creating a more robust succession planning process.</p> <p>[4/10/2024 3:09:23 PM - Theresa Fisher] This activity is behind schedule, but work will begin as soon as the other related items are caught up and completed.</p>					

 **Objective 1.1.4:** Develop and enhance employee satisfaction beginning in October 2023 and on an ongoing basis. **Lead:** Fisher, Theresa

Objective % Done: **100 %**                      Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	1.1.4.1	[L] Burns, Rebecca Fisher, Theresa	[Project] Create multi-department and level employee satisfaction team by January 2023	[11/1/2022 - 12/30/2022] [between 11/1/2022 and 12/30/2022]	100% Complete
<p><b>Notes:</b> [10/13/2023 2:21:01 PM - Theresa Fisher] Committee has been created and has reviewed the July employee satisfaction survey. They have decided to initially work on one of the problems identified in that survey, 'Staff don't know what is happening at BHSJ.' They have initiated a new email 'stream' to help address this problem, and are currently working on root cause analysis to identify the cause and other possible solutions.</p> <p>[9/29/2023 Theresa Fisher] The Employee Satisfaction Committee first met on May 12, 2023 and has continued to meet. The group is composed of staff from Personal Health &amp; Disease Prevention, Administration, Environmental Health, Area Agency on Aging, Health Education &amp; Promotion, and the Health Officer.</p> <p>[4/25/2023 Theresa Fisher] The Agency is still in the process of organizing this committee. Multiple calls for staff members who would like to volunteer to be a part of this committee have been made, but we are still lacking a complete committee. Work should begin shortly.</p>					
	1.1.4.2	[L] Fisher, Theresa	[Project] Create opportunities for staff to express their level of job satisfaction by September 2023	[between 4/3/2023 and 9/29/2023]	100% Complete
<p><b>Notes:</b> [10/13/2023 2:17:53 PM - Theresa Fisher] Employee Satisfaction Survey completed in July. Quarterly staff meetings held on March 7, 8, &amp; 9, June 6, 7, &amp; 8, and October 9, 11, &amp; 12.</p>					

## Initiative Communication and Advocacy

2:



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


**Notes:** The agency has completed the internal and external communications plans. The BOH has also approved a social media policy. The Marketing Committee and Employee Satisfaction Committee continue to follow the progress and make adjustments as needed.





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

Objective % Done: **80 %**                      Activities Sum: **0**

**Notes:** [3/3/2025 10:39:14 AM - Kristina Dewey] The agency is currently reviewing the internal communications plan with the Employee Satisfaction Committee. The agency has developed an internal communications plan with the collaboration of the Marketing Committee and Employee Satisfaction Committee.

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.1.1	[L] Englehart, Joshua Dewey, Kristina	[Project] Maintain a multi-departmental and multi-level staff committee to develop internal communication plan by January 2023	[10/1/2022 - 12/31/2022] [between 10/1/2022 and 12/31/2022]	100% Complete
<p><b>Notes:</b> This project is nearly complete. The Employee Satisfaction Committee and Marketing Committee developed a work plan to address the concerns identified in the strategic plan and results of an employee survey. This work plan has been constructed in VSMG for supervisors and directors to report activity in. The agency is utilizing BHSJ Insider, a streaming application in our email server to share information across the organization. Supervisors and directors will be educated on the elements of the communications work plan including expectations and reporting requirements at a leadership meeting to be held 3rd quarter of FY 24. Leadership held monthly virtual All Staff meetings in the 2nd qtr of FY24. Staff were surveyed after the last of the 3 meetings for feedback. Results of that survey will be discussed at the Employee Satisfaction Committee with recommendation made.</p> <p>[11/3/2023 2:43:37 PM - Theresa Fisher] The employee satisfaction committee was working on communication as well, so the committees have been merged for this project and work is ongoing to identify exactly what the staff would like to see. Root cause analysis has been completed and the committee is currently working to identify solutions.</p> <p>[9/19/2023 12:58:41 PM - Joshua Englehart] - A draft for the internal and external communication plan was sent to Becky and</p>					



		<p>Theresa for review. The draft was approved by the communications subcommittee during the monthly meeting on 9/1/2023, in which the draft was emailed later that day and waiting for approval.</p> <p>[4/25/2023 Theresa Fisher] The committee has been established and includes the following members: Joshua Englehart (chair), Health Educator; Rachael Wall (co-Chair), Community Health Worker; Candy Cox, Clinic Administrative Assistant; Shelby Ward, Clinic Supervisor; Brandie Lennox, EH Administrative Assistant; Stephanie Hightree, CSHCS Representative; Lisa Redmond, Outreach Specialist; and Diana Rogers, Administrative Support Clerk.</p> <p>Work on this activity has lagged a bit, but is ongoing. The committee began meeting in early April 2023 and will meet the first Friday of each month at 9:00 AM.</p>			
	2.1.1.2	[L] hicks, justin Elliott, Alan	[Project] Evaluate share drive system and provide staff access and training by June 2023	[between 3/1/2023 and 6/30/2023]	100% Complete
	<p><b>Notes:</b> [4/19/2024 8:58:22 AM - Theresa Fisher] The IT team continues to work on this. As there is constantly new information shared to the drive it will never be completely done and will continue to be an ongoing effort for the IT team.</p> <p>[11/2/2023 11:00:38 AM - Theresa Fisher] Work is ongoing, but this project is much more complicated than initially thought. IT staff will be meeting with staff from each division to get input on what we must keep and what can be archived. Date for completion adjusted to April 2024.</p>				
	2.1.1.3	[L] Dewey, Kristina	[Timeline] Create and provide to all agency staff, department and program meeting schedules on an annual basis starting in 2023	Meeting Schedule Provided to Staff measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	6% of Timeline Starting 2/27/2025
	<p><b>Notes:</b> [3/3/2025 10:12 AM - Kristina Dewey] Staff have the ability to access group calendars and can request access to the calendars of peers and supervisors. The agency holds monthly all staff meetings after the Board of Health meeting to share information. The February meeting was held on 2/27/25</p> <p>[2/3/2025 9:12:44 AM - Kristina Dewey] A survey of agency staff was completed regarding the strategies implemented in the 2023-24 cycle. Overall, the responses were in the affirmative. Internal communication strategies, BHSJ Insider, Zoho workspace, and Monthly All Staff Meetings were met with approval.</p> <p>[12/2/2024 8:34:41 AM - Kristina Dewey] The agency continues to offer monthly all staff meetings and utilizes BHSJ Insider to provide information on meetings to staff. The Board of Health meeting dates and times are available on the agency's website.</p> <p>The agency continues to maintain this calendar. Additional research is required to determine if staff are utilizing this method to be aware of upcoming meetings.</p> <p>[6/3/2024 8:59:48 AM - Kristina Dewey] Added Marketing Committee and Branch County Community Network (BCCN) meetings to calendar through December 2024.</p> <p>[4/19/2024 9:01:12 AM - Theresa Fisher] The BHSJ Insider calendar is available for all staff to review upcoming meetings. Directors should continue to keep this calendar updated with upcoming items.</p> <p>[11/2/2023 10:43:09 AM - Theresa Fisher] This information will be moved to the calendar associated with the BHSJ Insider Stream. This will allow for updates from all Supervisors/Directors and a more dynamic calendar that staff members can choose to view within their own calendar. This was discussed with all supervisors on 11/1/2023 and they were all instructed to add their meetings to the new calendar.</p> <p>[03/21/2023 - Theresa Fisher] A calendar has been created and is located M:\Staff Information\Communications. This calendar was presented to the staff at the quarterly staff meetings held on March 7, 8, &amp; 9.</p> <p>The agency has developed a new communications strategy for keeping staff informed about meetings of agency committees. We are utilizing BHSJ Insider to share meeting dates and minutes. Based upon a poll of staff taken on 3/29/24, staff feel that this strategy is working and meeting their needs.</p>				




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

**Lead:** Dewey, Kristina

Objective % Done: **100 %**                      Activities Sum: **0**

**Notes:** [3/3/2025 10:40:05 AM - Kristina Dewey] The agency continues to collaborate with community partners. We continue to collaborate with the Human Services networks, Great Start Collaboratives, Substance Abuse Task Forces, organizations serving under-served groups, safety coalitions, regional medical response and disaster coalitions, provider networks, insurance companies, Emergency Management and response agencies, law enforcement, and community service organizations in all three counties.

The agency continues to collaborate with community partners. We currently collaborate with the Human Services Networks in all three counties, Great Start Collaboratives, Substance Abuse Task Forces in all three counties, organizations serving under-served groups, safety coalitions, regional disaster and medical response coalitions, provider networks, Emergency Management and response agencies, and law enforcement

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.2.1	[L] Dewey, Kristina	[Project] Assess who the current and potential stakeholders are for the agency and create opportunities for engagement by June 2023	[between 4/1/2023 and 6/30/2023]	100% Complete


		<b>Notes:</b> [11/3/2023 1:45:08 PM - Alex Bergmooser] BHSJ has a very good understanding of our organizational partners and stakeholders throughout our 3 service counties. We engage with them regularly through community coalitions and committees and collaborative efforts.			
	2.1.2.2	[L] Dewey, Kristina	[Project] Develop a stakeholder email distribution list to share relevant agency, program, and emerging health issues information by September 2023	[7/1/2023 - 9/30/2023] [7/1/2023 - 9/30/2023] [7/1/2023 - 9/30/2023] [7/1/2023 - 9/30/2023] [7/1/2023 - 9/30/2023] [7/1/2023 - 9/30/2023] [between 7/1/2023 and 9/30/2023]	100% Complete
		<b>Notes:</b> [6/3/2024 9:01:06 AM - Kristina Dewey] We continue to update the email distribution lists as new individuals or groups are added to the agency circle. The agency maintains multiple lists by audience. Lists are maintained within multiple agency programs to ensure targeted communications with specific groups as needed. The agency is able to share emergency information, information on emerging issues, and targeted communications as needed. [11/3/2023 1:48:43 PM - Alex Bergmooser] Multiple lists of the agency's stakeholders exist. These lists represent all of our stakeholder organizations; however, the lists need to be reviewed and consolidated into one main email distribution list.  The agency has email distribution lists to community stakeholders developed and they are utilized to share information.  10/9/2024 The agency has email distribution lists which we continue to maintain.			
	2.1.2.3	[L] Dewey, Kristina	[Project] Seek out relationships with college and vocational programs to encourage public health as a career and staff recruitment by September 2024	[10/1/2023 - 9/30/2024] [10/1/2023 - 9/30/2024] [10/1/2023 - 9/30/2024] [10/1/2023 - 9/30/2024] [10/1/2023 - 9/30/2024] [10/1/2023 - 9/30/2024] [between 10/1/2023 and 9/30/2024]	95% Complete
		<b>Notes:</b> [12/2/2024 8:36:51 AM - Kristina Dewey] Participated in Glen Oaks Community College's Nursing Advisory Committee and participated in the public forum for their accreditation cycle.  Meeting with the American Heart Association on 5/28/24 to discuss their Heart Corps program. Declined a Heart Corps worker for this year, but will reconsider for next year. Meeting with Glen Oaks Nursing Program Advisory Committee on 4/23/2024. Glen Oaks would be interested in having students do a clinical rotation in public health. Conversation with Health Officer and PHDP Director needed in order to move forward.  This activity is ongoing. The agency has hired a new HR Assistant who will continue with the recruitment of individuals to the agency.  10/9/2024 The agency continues to participate with Glen Oaks Community College and sits on the Nursing School Advisory Committee. We continue to foster relationships with area universities and technical programs through interactions at various coalition meetings in the three counties.			
	2.1.2.4	[L] Dewey, Kristina	[Project] Share stakeholder events, information on social media platforms and with staff starting in April 2023	[4/1/2024 - 4/30/2024] [4/1/2024 - 4/30/2024] [between 4/1/2024 and 4/30/2024]	100% Complete
		<b>Notes:</b> This objective is complete. The agency has updated the External and Social Media Policies for the organization. The agency shares event information with the agency through a shared event calendar. The agency also shares key partners' event information through our social media channels.  HEP has developed a spreadsheet of community activities that has been shared with other departments. We continue to share stakeholder events on our social media platforms.  There is an error in the target date for this activity. It should have been targeted for April 2024, after the work to assess the current and potential stakeholders has been completed. Target date adjusted from April 2023 to April 2024.  The agency has completed their internal communications work plan and external communications plan. The agency shares information regarding stakeholder events and information on our social media platforms.			

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

Objective % Done: **80 %**                      Activities Sum:

**Notes:** The External Communications Plan has been drafted, reviewed by the Health Officer, PIO and the External Communications Policy Subcommittee. The policy will next be sent to the full Marketing Committee at their meeting on May 3, 2024.

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.3.1	[L] Dewey, Kristina	[Project] Maintain a multi-departmental and multi-level staff committee to develop an external communication plan by January 2024	[1/1/2023 - 1/1/2024] [between 1/1/2023 and 1/1/2024]	100% Complete
		<b>Notes:</b> This objective has been completed. HEP has a calendar of communication topics for each month. The Marketing Committee meets monthly to review the upcoming topics and add events and subjects to the calendar. The Marketing Committee has an External Communications policy that has been reviewed by the Health Officer, PIO and Sub Committee for approval at the May 3, 2024 meeting. [11/3/2023 3:12 PM - Theresa Fisher] The committee has completed research and has a model template to utilize. Work on development of the plan is ongoing.  [4/25/2023 Theresa Fisher] Work has not yet started on this activity. The committee will first focus on the Internal Communications plan called for in 2.1.1.			

		The agency has approved a new social media policy and an internal communications work plan. A new External Communications policy is currently in sub-committee and will be reviewed by the sub-committee on 04/05/2024.			
	2.1.3.2	[L] Dewey, Kristina	[Project] Explore the opportunities available to provide translation services to the public through staff, partners, and media by June 2024	[1/1/2024 - 6/30/2024] [between 1/1/2024 and 6/30/2024]	100% Complete
<p><b>Notes:</b> It has added a translation widget to our agency website. This allows translation of our front facing web pages to be translated into 142 languages. The agency continues to utilize the language line for customer interactions as needed. HEP has been producing signage and materials in multiple languages as needed.</p> <p>The agency has developed clinic intake tools in Haitian Creole. We have also explored working with the American Academy of Pediatrics for patient education tools for parents of young children. The agency has hired a clerk who is fluent in Spanish. HEP has been developing signage and materials in multiple languages for promotion of services. We continue to use the language line for services. HEP has been discussing with IT about the ability to translate the website.</p>					



**Objective 2.1.4:** Expand the behavioral health collaboration by March 2023





**Lead:** Dewey, Kristina

Objective % Done: **0 %**

Activities Sum:

**Notes:** [3/3/2025 10:43:44 AM - Kristina Dewey] The agency actively participates and collaborates with The Pines, Lifeways, and Pivotal to ensure residents are aware of the mental health services provided in the jurisdiction.

[3/3/2025 10:43:44 AM - Kristina Dewey]

Status	Number	Activity Team	Activity	Performance Metric	Status
	2.1.4.1	[L] Dewey, Kristina	[Project] Develop and disseminate informational materials for the 988 Hotline by January 2023	[10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [between 10/1/2022 and 12/31/2022]	100% Complete
<p><b>Notes:</b> [11/3/2023 1:51 PM - Alex Bergmooser] This activity is behind schedule. The content for the needed 988 materials has already been created and work will soon begin to develop and disseminate this content in a manner useful to the 988 system.</p> <p>The agency is promoting 9-8-8. We are following them on social media and sharing their informational posts. We are collaborating with The Pines, Lifeways, and Pivotal to promote crisis intervention services and participating in the monthly substance abuse task force meetings.</p>					
	2.1.4.2	[L] Dewey, Kristina	[Project] Assess the current behavioral health programs available within the district and share with staff and persons served by January 2023	[10/1/2022 - 12/31/2022] [between 10/1/2022 and 12/31/2022]	100% Complete
<p><b>Notes:</b> [11/3/2023 2:33:14 PM - Alex Bergmooser] Stay Well resources were shared with the BHSJCHA team in December of 2022, letting them know that the resources are available for clients but can also be used by staff. Staff were also provided information on how to participate in Stay Well discussion groups in November. The assessment and compilation of available behavioral health programs is ongoing but once prepared the information will be presented on a brochure or flyer and made available to both BHSJ staff members, as well as the clients that they serve.</p> <p>Stay Well resources have been shared with all staff and the community. The Stay Well Program has ended with the end of the PHE for COVID-19. We are referring staff and clients to the services of The Pines, Lifeways, and Pivotal.</p>					
	2.1.4.3	[L] Dewey, Kristina	[Project] Continue discussions with behavioral health organizations within the district to determine how our agency can collaborate and be of assistance starting in October 2022 and ongoing basis	[10/1/2022 - 10/2/2026] [between 10/1/2022 and 10/2/2026]	100% Complete
<p><b>Notes:</b> [11/3/2023 1:57:48 PM - Alex Bergmooser] Conversations are ongoing and occur monthly with behavior health organizations due to our participation in the county collaboratives, coalitions, county task forces, and other multi-organizational committees. These discussions will continue regularly and provide the agency the opportunity to support behavioral health organizations in our area when and where it is appropriate.</p> <p>Our agency continues to collaborate with The Pines, Lifeways, and Pivotal. We share information from all three partners on our social media. We refer clients with needs to their services. We are active participants on their Substance Abuse Task Forces. We continue to partner with agencies to address domestic violence, child abuse, suicide, and overdose prevention.</p>					
	2.1.4.4	[L] Dewey, Kristina	[Project] Provide staff with mental health educational opportunities to recognize behaviors, situations and the prevention and intervention resources available by December 2022	[10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [10/1/2022 - 12/31/2022] [between 10/1/2022 and 12/31/2022]	95% Complete
<p><b>Notes:</b> 10/9/2024 Completed partnership with Pivotal to support the Beacon grant funding. We continue to participate in various coalitions in which our CCBHCs participate or have convened committees to address issues such as substance use. We continue to use our social media channels to promote services available to the community regarding mental health. The agency has enrolled in an Employee Assistance Program to support our employees, which was effective Oct 1, 2024. We will monitor employee usage of the services and make adjustments as needed.</p> <p>Grant funding from Beacon to promote mental health services in St. Joseph County has been approved. Meeting with Pivotal on 7/10/24 to discuss project.</p> <p>[6/3/2024 9:02:31 AM - Kristina Dewey] The agency promoted mental health resource through social media in May for mental health awareness month. Will begin working on the promotion of Pivotal's services based on the grant funding from Beacon Health</p>					

The agency has promoted mental health resources on our social media channels. We are securing private funding to promote the services of Pivotal in St. Joseph County with a focus on their ability as a CCBHC to accept additional insurances and provider services to a larger range of individuals.

Staff will be provided a session at the All Staff Meeting on 4/26/2024 on dealing with difficult people and recognizing situations that may become dangerous. The agency continues to provide resources to the community and staff for mental health treatment. The agency has trained a health educator on employee wellness and there are 2 staff trained in Mental Health First Aid. All three counties have a CCBHC with whom the agency has relationships.

[11/3/2023 1:58:31 PM - Alex Bergmooser]

This activity, while behind schedule, is ongoing as the agency continues to work to identify resources and funding for behavioral health education, prevention, and intervention. As this research continues, Stay Well resources were shared with the BHSJCHA team in December of 2022; these resources were available for clients but could also be used by staff. Staff were also provided information on how to participate in Stay Well discussion groups in November of 2022

Several staff have completed training in Mental Health First Aid and Youth Mental Health First Aid. Staff will receive education on dealing with difficult people at the All Staff Meeting to be held on April 26, 2024.

## Initiative Programming and Policy

3:



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



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

**Lead:** Burns, Rebecca

Objective % Done: 0 %

Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.1.1	[L] Burns, Rebecca Fisher, Theresa	[Project] Develop and implement timelines to ensure program policy reviews and revisions take place on a scheduled basis by January 2023	[between 10/1/2022 and 12/31/2022]	100% Complete
<b>Notes:</b> [4/25/2023 Theresa Fisher] The VMSG Dashboard will keep track of the metric to ensure policies are reviewed every year. As policies are loaded into the dashboard, they will have dates assigned, and will automatically flag for review after 80% of the year is completed.					
	3.1.1.2	[L] Burns, Rebecca Fisher, Theresa	[Project] Evaluate the existing structure to our agency personnel policy committee and identify areas of opportunity for improvements by September 2023	[between 4/1/2023 and 9/30/2023]	100% Complete
<b>Notes:</b> [3/11/2024 10:17:46 AM - Theresa Fisher] The Committee reviewed its structure and by-laws in November 2023. They sent out messages on BHSJ Insider about the committee, what it does, who represents staff on the committee, and some things the committee has done in the past. This has been followed up by routine messages on BHSJ Insider to let staff know of upcoming meetings and to post the minutes from the meetings. [11/2/2023 11:23:42 AM - Theresa Fisher] The Personnel Policy Committee is in the process of evaluating the committee and working to update/revise the guidance documents, potential changes, and ways to get other staff members involved to make the committee more useful.					
	3.1.1.3	[L] Burns, Rebecca Fisher, Theresa	[Timeline] Present policy revisions to board of health for review and approval on an ongoing basis as necessary	measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100% [Cycle Start Date: 8/24/2023] [Cycle Start Date: 8/24/2023] [Cycle Start Date: 8/24/2023]	27.1% of Timeline Starting 12/12/2024
<b>Notes:</b> [12/19/2024 10:31:28 AM - Rebecca Burns] At December 12, 2024 BOH meeting updates to the Personnel Policies as suggested by the Personnel Policy Committee and reviewed by the agency's attorney were approved. [5/8/2024 1:07:09 PM - Rebecca Burns] BOH approved the personnel policy changes at the April 25th meeting. [4/18/2024 10:57:56 AM - Rebecca Burns] PPA Committee reviewed additional updates and changes as suggested by the Personnel Policy Committee to the Personnel Policy Manual at the meeting on April 17, 2024 and voted to move the updates and changes to the full board for approval at the April 25, 2024. [10/13/2023 2:25:35 PM - Theresa Fisher] The Personnel Policy Committee worked on additional updates to the Personnel Policy Manual and they were presented to the Board in August. The Board approved the revisions on August 24, 2023. [9/29/2023 Theresa Fisher] PPC completed the review of the Exposure Control Plan and Chemical Hygiene Plan. [3/21/2023 Theresa Fisher] The Personnel Policy Committee (PPC) met to review the Personnel Policy manual. Updates to the Personnel Policy manual will be reviewed and approved by the Board of Health On March 23, 2023. The PPC is currently working on updates to the Exposure Control Plan and the Chemical Hygiene Plan.					



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

Objective % Done: 0 %

Activities Sum:

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

CHNA and CHIP were completed and presented to all 3 counties human service collaboratives. The Board of Health PPA Committee reviewed in June 2023 and then moved it to the full BOH for their information at the meeting on June 22, 2023. The CHIP specifically addresses the need for additional programs and service delivery methods to meet community needs.

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.2.1	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Project] Establish a community health needs assessment team comprised of community partners and staff by January 2023	[between 10/1/2022 and 12/31/2022]	100% Complete
<p><b>Notes:</b> [4/25/2023 Theresa Fisher] The assessment team was created and began work in December 2023. The team consists of Rebecca Burns, Alex Bergmooser, Theresa Fisher from BHSJCHA, an independent contractor, Marcus Cheatham, and staff from the following community partner agencies: St. Joseph County Human Service Commission, Branch County Collaborative Network, Hillsdale County Human Service Network, Great Start Collaboratives (all 3 counties), Lifeways, Pines Behavioral Health, Pivotal (previously St. Joseph CMH).</p>					
	3.1.2.2	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Project] Collect and analyze primary and secondary community data through a variety of sources and methods by June 2023	[between 1/1/2023 and 6/30/2023]	100% Complete
<p><b>Notes:</b> [11/3/2023 3:00:13 PM - Alex Bergmooser] The CHNA was completed at the end of May 2023, with both primary and secondary data being collected and analyzed from various sources.</p> <p>[4/25/2023 Theresa Fisher] Work is ongoing on the CHNA process and is on track to be completed on time.</p> <p>Marcus Cheatham provided data review to each county collaborative in December and January, to discuss the currently available information about each county.</p> <p>Updated Community Health Rankings were distributed and discussed with all elected state legislators at the Day the the Capital Event in April</p>					
	3.1.2.3	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Project] Present data to partners, stakeholders, and community members to identify and prioritize health issues that will be included in community health improvement plan by June 2023	[between 11/1/2022 and 6/30/2023]	100% Complete
<p><b>Notes:</b> [11/3/2023 3:01:48 PM - Alex Bergmooser] The CHNA was completed at the end of May 2023 and the findings were then presented to our organizational partners, stakeholders, and community members in the weeks that followed so that a Community Health Improvement Plan (CHIP) could be developed.</p> <p>[4/25/2023 Theresa Fisher] Information will be shared when assessment is completed. We are still expecting to complete this work on schedule.</p>					
	3.1.2.4	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Project] Determine the assets and resources available to address the prioritized health issues by June 2023	[7/1/2023 - 10/31/2023] [7/1/2023 - 10/31/2023] [7/1/2023 - 10/31/2023] [between 7/1/2023 and 10/31/2023]	100% Complete
<p><b>Notes:</b> The agency has updated the website to include a page on Doula care with a link to the Michigan Doula Registry. The HEP website has added a Physical Activity page with links to all counties' municipal parks and recreation websites. The safe syringe program will not move forward due to lack of community support among key stakeholders' Boards and leadership.</p> <p>The agency continues to work on the activities identified in the CHIP. A mid-year report was provided to the Hillsdale Human Services Network on 4/16/24. Meetings are set for St. Joseph County Human Services Commission and Branch County Community Network in May 2024. At these meetings, the agency reviewed the progress to date and is sharing the 2024 Count Health Rankings data.</p> <p>[11/3/2023 3:14:20 PM - Alex Bergmooser] The Community Health Improvement Plan (CHIP) was completed in late June and outlines the assets and resources needed to address the issues laid out by the CHNA. However, work is still ongoing to identify which of these assets and resources are actually available.</p> <p>[4/25/2023 - Theresa Fisher] There is an error in the planned date for this activity. This work cannot be completed until after the needs assessment is done. Date changed from June 2023 to October 2023.</p> <p>The Agency received the first draft of the CHNA in late April. The group is currently working on the CHIP.</p> <p>The CHIP has been developed and plans are being developed to support the areas of the CHIP.</p>					
	3.1.2.5	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Project] Seek out public and stakeholder input regarding necessary programs and service delivery methods and identify gaps within the district by June 2023	[between 1/1/2023 and 6/30/2023]	100% Complete
<p><b>Notes:</b> [11/3/2023 3:17:46 PM - Alex Bergmooser] The input gathered through surveys, focus groups, and key partner interviews enabled the agency to complete the CHNA by late May of 2023.</p> <p>[4/25/2023 - Theresa Fisher] Work ongoing. Initial input was provided during the early planning process, to discuss the project</p>					



		and solicit feedback. Additionally, Focus groups with key partners are scheduled for late April and May. The Great Start Collaboratives and Pines Behavioral have scheduled focus groups.			
	3.1.2.6	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Timeline] Work with community partners to assure community needs are met that are beyond the scope of delivery by the agency by June 2023	Update on working with community partners to assure community needs are met that are beyond the scope of delivery by the agency. measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	12.6% of Timeline Starting 2/3/2025
	<p><b>Notes:</b> [2/5/2025 12:55:26 PM - Theresa Fisher] Updated to Quality Assurance activity that requires yearly updates. [2/3/2025 9:15:10 AM - Kristina Dewey] Beacon Heath has approved Provider Access as their strategic focus. The implementation strategy includes community collaboration with CHW programs. Will continue to monitor. Hillsdale Hospital will end the public survey period on February 14, 2025. Will continue to monitor. ProMedica Coldwater Hospital has completed the sale to Insight. We are working to secure a meeting with the new ownership.</p> <p>[12/2/2024 8:38:45 AM - Kristina Dewey] We completed participation with Beacon on their CHNA process. They have taken the CHNA to their respective hospital boards and have approved their focus as increasing access to providers. Hillsdale Hospital is beginning the work on their CHNA this year. We provided input on their survey tool and will support them in collecting surveys. We continue to partner with the CCBHCs, Human Services Networks, and Great Start Collaboratives in all three counties to address community needs.</p> <p>10/9/2024 - We continue to work with Beacon on their Community Needs Assessment which will be released before the end of this calendar year. We will be participating with Hillsdale Hospital as they complete their assessment in 2025. We have partnered with Human Services Networks in all three counties to assist in collaborative efforts. We partnered with the Branch County Great Start Collaborative to bring enhance 9-1-1 services to residents. This is a 18 year partnership with the Branch County Commissioners and Gryphon Place. We continue to participate in the Substance Abuse Coalitions in each county. Our Lock It Up campaign supported community efforts by distributing 1,100 secure storage devices and raising awareness to the issues surrounding marijuana and children. Our Community Health Worker program has been meeting with individuals and families to enroll in health insurance, find providers, apply for food, cash assistance, and disability services. Through this work we are developing relationships with community organizations who support SDOH. Our final application for the Amish Crash Reduction grant has been approved and we will begin work on this project in the coming quarter.</p> <p>Hosted a community focus group with 20 individuals in attendance for Beacon Health's Community Needs Assessment on June 20, 2024. OHSP has approved our proposal for the Amish Crash Reduction grant. Application for funding will open July 1st, notification of awards should be released in August. Meeting with Branch County Commissioners on 7/11/24 to answer questions and complete the contract for Branch County to fully participate in 2-1-1 services.</p> <p>[6/3/2024 9:05:32 AM - Kristina Dewey] The agency continues to work with Beacon on their community needs assessment. The agency has submitted a grant to the Michigan Office of Highway Safety Planning to address the safety of vulnerable populations on jurisdictional road, specifically the Amish population. Funding award notices should be coming by July 1, 2024. The agency continues to work with collaborative partners and agencies on the items identified in the CHIP. The agency is currently participating in the CHNA being conducted by Beacon Health, who operates Beacon Three Rivers Health.</p> <p>[11/3/2023 3:20:05 PM - Alex Bergmooser] This activity is ongoing due to the collaborative nature of the project. The Community Health Improvement Plan (CHIP) outlines most of the objectives and will guide this process.</p> <p>[4/25/2023 - Theresa Fisher] There is an error in the planned date for this activity. This work cannot be completed until after the needs assessment is done. Date changed from June 2023 to October 2023. Some unmet needs may be beyond what the LHD can achieve. We will endeavor to try to figure out how to meet unmet needs, but should not assume we can automatically solve all.</p> <p>Meetings are ongoing with Human Services Networks in all three counties and our Behavioral Health partners. We continue to work on plans internally and with community partners to support the CHIP.</p>				
	3.1.2.7	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Timeline] Develop goals, objectives, and a reporting process to monitor and sustain the process and health status by September 2023	Review/Update development of goals, objectives, and reporting to monitor and sustain the process and health status. measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100%	12.6% of Timeline Starting 2/3/2025
	<p><b>Notes:</b> [2/5/2025 12:57:18 PM - Theresa Fisher] Changed to a Quality Assurance activity requiring yearly updates. [2/3/2025 9:31:39 AM - Kristina Dewey] The Kindergarten Oral Health Assessment program continues with visits to area schools. Condom distribution through the public bathrooms is increasing distribution. We promote mental health and the programs of our CBHCCs. WIC recertifications have improved.</p> <p>[12/2/2024 8:43:41 AM - Kristina Dewey] The agency has launched the Kindergarten Oral Health Assessment Program, changed the distribution method for condoms, worked to increase % of recertifications, and decrease time to inspection/issuance of TFU licenses. We have partnered with CBHCCs to increase exposure and access to mental health care.</p> <p>With transition of leadership in the HEP department, this activity is behind schedule.</p> <p>[11/3/2023 3:31:14 PM - Alex Bergmooser] The Community Health Improvement Plan (CHIP) which was derived from the Community Health Needs Assessment (CHNA) was completed at the end of June 2023. The CHIP has not been fully input into the VMSG system at this time as there are some timeline revisions that need to be made. This project is ongoing, but approaching completion.</p> <p>With a change in supervision in HEP, this activity has been delayed. Review of the CHIP is ongoing with planning continuing.</p>				
	3.1.2.8	[L] Dewey, Kristina Burns, Rebecca Fisher, Theresa	[Timeline] Review and update the plan on an annual basis	Review and Update CHIP measured Annually Green <= 75% Yellow >75% and < 100% Red >= 100% [Cycle Start Date: 6/30/2023] [Cycle Start Date: 4/18/2024]	44.7% of Timeline Starting 10/9/2024

[Cycle Start Date: 6/3/2024]  
 [Cycle Start Date: 10/9/2024]  
 [Cycle Start Date: 10/9/2024]  
 [Cycle Start Date: 10/9/2024]

<p><b>Notes:</b></p>	<p>[3/3/2025 10:15:54 AM - Kristina Dewey] Beacon Health has completed their CHIP. We will continue to participate with their Health Advisory Committee as our CHIPs have similar focus. Hillsdale Hospital has completed their survey work for their CHNA. We continue to work in a support role with them. No date currently to meet with Insight, but will work to schedule a meeting no later than June 30, 2025.</p> <p>[2/3/2025 9:34:04 AM - Kristina Dewey] Continuing to meet with each county's Human Services Network. Beacon Health has identified their area of focus as access to providers for their Strategic Plan. We will continue to work with them to support activities in their plan. Hillsdale Hospital is continuing the public survey until February 14, 2025. We are offering surveys to clients at our office. We are trying to set a meeting with the new owners of ProMedica Coldwater Regional Hospital, Insight.</p> <p>[12/2/2024 8:48:16 AM - Kristina Dewey] Continuing to meet with each county's Human Services Network and participating in the CHNA for Beacon and Hillsdale Hospitals. Coldwater Hospital is in the process of being sold. Will continue to monitor their progress/activity. Review of current CHIP shows we are making progress in areas of focus.</p> <p>[10/9/2024 9:19:34 AM - Kristina Dewey] Continuing to meet with each county's human services networks and participating in other organization's community needs assessments. Will make modifications as issues are identified.</p> <p>[6/3/2024 9:08:29 AM - Kristina Dewey] Completed update meetings with all three counties' human services groups. No additional needs were identified at this time. Will continue to monitor. Hillsdale Human Services Network received their annual update on 4/16/2024. Meetings are set with St. Joseph and Branch counties for May.</p> <p>[11/3/2023 3:35:20 PM - Alex Bergmooser] Once the Community Health Improvement Plan (CHIP) has reached the 1-year mark, annual reviews and updates will be held.</p> <p>Materials to be developed by HEP for delivery to the Human Services Networks at their April meetings.</p>



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

**Lead:** Burns, Rebecca

Objective % Done: **0 %**

Activities Sum:

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.3.1	[L] Burns, Rebecca Fisher, Theresa	[Project] Implement agency-wide educational opportunities on the use of VMSG software and dashboard functions for program compliance by June 1, 2025.	[10/1/2022 - 12/31/2022] [between 10/1/2022 and 6/1/2025]	30% Complete
			<p><b>Notes:</b></p> <p>[1/16/2025 11:35:59 AM - Theresa Fisher] Writing mini-grant to increase license county. Adjust timeframe from December 31, 2022 to June 1, 2025.</p> <p>[4/19/2024 9:12:40 AM - Theresa Fisher] VMSG training is ongoing to staff who have responsibilities to report or monitor in the system. As more things are loaded into the system, more and more staff will be trained. The VMSG dashboard training is also being incorporated into the new hire orientation &amp; onboarding process.</p> <p>[10/17/2023 9:33:34 AM - Theresa Fisher] All supervisory staff and IT staff were provided training on the VMSG system over the course of 5 weeks (one session each week) to retrain and/or enhance their understanding of the system. These training sessions will be completed on October 19, 2023.</p> <p>[03/13/2023 - Theresa.Fisher] One Third (1/3) of the staff have received introductory training on the dashboard. More people will be trained as work plans where they are assigned responsibilities are added to the system.</p> <p>The Agency has engaged with VMSG to provide staff training in September and October 2023.</p>		
	3.1.3.2	[L] Burns, Rebecca Fisher, Theresa	[Project] Upload the strategic planning objectives into VMSG by December 2022	[between 10/1/2022 and 12/31/2022]	100% Complete
			<p><b>Notes:</b></p> <p>[11/3/2023 2:09:43 PM - Theresa Fisher] Plan is fully operational and actively being monitored using VMSG.</p>		
	3.1.3.3	[L] Burns, Rebecca Fisher, Theresa	[Project] Upload program performance measures at least three programs into VMSG by January 2023 and quarterly thereafter until all programs are included in the software system	[between 1/1/2023 and 1/31/2023]	40% Complete
			<p><b>Notes:</b></p> <p>[1/31/2025 8:24:50 AM - Theresa Fisher] Items being tracked with VMSG have increased, but it is still not being used to track deliverables for all programs. The agency will be adding licenses so that all staff can be added to the system in April. This will allow the agency to increase the projects tracked.</p> <p>[4/19/2024 9:14:55 AM - Theresa Fisher] Utilization for all programs is still lagging. More items are being tracked with the system and it is actively being used to monitor work plans and policy revisions.</p> <p>[11/2/2023 11:28:30 AM - Theresa Fisher] Rollout continues to lag. All Supervisory staff have now completed training. Currently utilized to monitor the new MCH plan, the strategic plan, and Admin Services 2024 Goals. Continuing the process of loading all agency policies, contracts, and other plans.</p>		




		[03-31-2023 - Theresa Fisher] We currently only have MCH and the Strategic Plan live. We are working to load policies and local accreditation to the system.		
	3.1.3.4	[L] Burns, Rebecca Fisher, Theresa	[Project] Monitor the VMSG dashboard on a quarterly basis for program compliance beginning in March 2023	[between 3/1/2023 and 3/31/2023]  100% Complete
	<p><b>Notes:</b> [1/31/2025 9:41:33 AM - Theresa Fisher] This activity was delayed due to the delay in getting items into the VMSG system. The due date for this activity has been extended to March 2025. The committee has been established and trained to do the work and will have their first meeting in February.</p> <p>[4/19/2024 9:16:37 AM - Theresa Fisher] Plans that have been entered into the system are actively being monitored, but there are still plans that need to be entered.</p> <p>[11/3/2023 2:11:12 PM - Theresa Fisher] We are still lagging at getting plans added, but all plans that have been added are being monitored and staff are getting more familiar with</p> <p>[03/21/2023 - Theresa Fisher] The plans that have been added are being actively monitored, but we are lagging in getting plans added.</p>			



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

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

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

Status	Number	Activity Team	Activity	Performance Metric	Status
	3.1.4.1	[L] Burns, Rebecca Fisher, Theresa	[Project] Implement agency-wide educational opportunities on the use of VMSG software and dashboard functions for policy compliance by January 2024	[between 1/1/2023 and 12/31/2023]	% Complete
	<p><b>Notes:</b> [4/19/2024 9:18 AM - Theresa Fisher] Staff are being trained on the system when they have a responsibility to report on a plan.</p>				
	3.1.4.2	[L] Burns, Rebecca Fisher, Theresa	[Project] Upload the policy performance measures of at least three programs into VMSG by January 2025 and quarterly thereafter until all policies are included in the software system	[between 1/1/2024 and 4/30/2025]	70% Complete
	<p><b>Notes:</b> [1/31/2025 9:38:30 AM - Theresa Fisher] Policies continue to be loaded into the system. The projected date for this activity to be fully completed has been extended to 4/30/2025.</p> <p>[4/19/2024 9:18:59 AM - Theresa Fisher] Policies continue to be loaded into the system. In some areas this is nearly complete, but other areas are lagging. We will continue to work on this.</p>				
	3.1.4.3	[L] Burns, Rebecca Fisher, Theresa	[Project] Monitor the VMSG dashboard on a quarterly basis for policy compliance beginning in March 2025	[between 4/1/2024 and 4/30/2024]	% Complete
	<p><b>Notes:</b> [4/19/2024 9:20:05 AM - Theresa Fisher] The policies which have been loaded are being actively monitored, and the dashboard is working as expected.</p>				



# PUBLIC COMMENT

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