

Program, Policy, & Appeals
Committee Members:
Commissioner Leininger (Chair)
Commissioner Shaffer
Commissioner Stoll

BOARD OF HEALTH – PROGRAM, POLICY, & APPEALS COMMITTEE Agenda for April 16, 2025 at 8:30 AM

- 1. Call to Order
 - a. Roll Call
 - b. Approval of the Agenda
- 2. Public Comment
- 3. Unfinished Business
 - a. Health Officer Evaluation Tool pg 2
- 4. New Business
 - a. Annual Report pg 9
 - b. Social Media Policy pg 21
 - c. Procurement Policy pg 25
 - d. Board of Health Meeting Materials
- 5. Public Comment
- 6. <u>Adjournment</u> Next meeting: Full Board meets April 24, 2025. PPA next meeting is scheduled for May 21, 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.



Program: Administration **Effective Date:** 1/27/2022

Subject: Health Officer Evaluation Policy Revised Date: 1/23/2025

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

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

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

Policy Statement:

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

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

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

Questions on Evaluation (likert Scale Options: 1 Excellent, 2 Good, 3 Satisfactory, 4 Needs Improvement, 5 Unacceptable, No basis for judgement)

1	Performs the functions of the Health Officer for this Agency
2	Maintains a work style which is open to constructive suggestions
3	Demonstrates the leadership, initiative and persistence needed to accomplish goals and objectives.
4	Assigns tasks to personnel capable of carrying them out.
5	Maintains the professional culture that is needed to carry out the mission, strategic directions and organizational goals.
6	Monitors current budget and operational data to assure continued success of the organization.
7	Handles problems in a professional manner.
8	Demonstrates knowledge and understanding of Public Health programs.
9	Assures that facilities and equipment are suitable for the Agency's immediate and long-range goals.
10	Assures the agency is in compliance with applicable standards, codes, laws and regulations.
11	Anticipates trends and opportunities affecting agency operations and develops an appropriate and timely response.
12	Promotes a positive image of the Agency to the community.
13	Represents the Agency at community activities.
14	Works with community leaders in determining local health care needs.
15	Maintains an active advocacy role in promoting Public Health in the community.
16	Works with the Board of Health in developing the mission and long-and-short-range strategic plans.
17	Communicates with the Board of Health and provides appropriate information at and between meetings.
18	Is readily available to board members.
19	Keeps the Board of Health appraised of the Agency's financial status.
20	Keeps the Board of Health appraised of the status of Public Health programs and services.
21	Provides educational programs for the Board of Health on a regular basis.
22	Has fostered good communication between the Board of Health and the Agency's administrative team.

Workplace Satisfaction Survey Results	2024	2025
Please identify the location of your home office.		
CW	48.15%	
HD	18.52%	
TR	14.81%	
I don't want to anser this question (I'm afraid it may identify my answers)	18.52%	
Which best describes your current position?		
AAA	3.70%	
EH	12.96%	
PH&DP	31.48%	
HE&P	14.81%	
AS	5.56%	
Don't Want to Identify	31.48%	
How long have you worked for the Agency?		
Less than 1 year	24.07%	
1-5 years	48.15%	
5-15 years	14.81%	
16+ years	12.96%	
•		
ikert Scale: 1=Strongly Disagree, 2=Disagree, 3=Neither Disagree Nor Agree, 4=Agree,	Weighted	
i=Strongly Agree	Average	
The management team and staff maintain respectful relationships.	3.92	
am generally satisfied with my salary and benefits.	2.83	
My supervisor is flexible and willing to accomodate my family-related needs.	4.62	
The agency has a clearly defined and intentional leadership development strategy.	3.58	
The agency's effectiveness is not hampered by adversarial relationships between staff	3.62	
members and their supervisors.		
trust my supervisor.	4.20	
trust the administrative team and health officer.	3.63	
Question Changed in 2024 to:		
trust the agency directors and the health officer.		
Conflict is resolved as quickly and effectively as possible.	3.54	
Everyone knows and understands the lines of authority within the organization.	3.75	
Established lines of authority are usually followed.	3.72	
Systems for quality assessment are in place and functioning effectively.	3.71	
Systems for quality improvement are in place and functioning effectively.	3.69	
enjoy working in this organization.	4.23	
The agency is focused on achieving outcomes that fulfill its mission.	4.08	
My supervisor provides regular feedback about my performance that is objective and	4.16	
notivates me to improve as a professional.		
Job openings within the agency are filled using a well-defined hiring process.	3.63	
Staff members are encouraged to pursue additional education and training.	3.47	
My supervisor fosters a culture that celebrates the achievments of subordinates.	3.47	
am valued by my supervisor.	4.33	
an valued by my supervisor.	4.33	

The agency is quick to adapt to the changing circumstances, technologies or public	3.54	
health best practices.		
My talents, training and expertise are used effectively.	3.86	
The health officer and administrative team do an effective job of leading the agency through changeQuestion changed in 2024 to: The health officer and directors do an effective job of leading the agendy through change.	3.79	
I feel respected by my supervisor.	4.25	
I respect my supervisor.	4.38	
I feel respected by my co-workers.	4.10	
My supervisor seeks and values my opinion about the department's policies and procedures.	4.14	
The agency is managed in an ethical and professional manner.	3.90	
Supervisors/Administration seek advice and feedback from others before making significant decisions. Question changed in 2024 to: Supervisors/Directors seek advice and feedback from others before making significant decisions.	3.46	
I fully support the agency's mission and values as articulated in its official documents.	4.15	
The environment in the workplace is comfortable and safe.	4.06	
I am knowledgeable about program plans for the programs I am assigned to work.	4.00	
The agency's strategic plan is reviewed annually with the staff.	3.98	
Employees are treated fairly and equally.	3.49	
I feel a great deal of stress on my job.	2.90	
My position adds value to the agency and the community.	4.35	
I am trusted to work autonomously.	4.38	
I understand my job responsibilities in the agency and have the tools needed to complete my assignments.	4.14	
I would encourage a friend to work for this agency.	3.90	
Below is a list of attributes related to our services that link to the agency's current-mission, vision and value statements (changed in 2024). A short explanation of what each term means has been provided. Using the following Likert Scale, please rank how well the agency demonstrates these attributes to our clients. For each category		
identify one of the following ratings: We do: Very Well, Well, Fair, Poor or Very Poor.	Inverted S (Lower Nu are better	ımbers
Likert Scale: 1=Very Well, 2=Well, 3=Fair, 4=Poor, 5=Very Poor		′
Accessible Services: How accessible are our service for our clients? This includes: hours, location, explaining eligibility requirements, etc.	1.93	
Client-Focused Services: Do we deliver services in a way that demonstrates we are sensitive to their preferences and are culturally competent?	1.76	
Collaboration: Do we work well with other agencies and organizations to assure that the diverse needs of our clients are met?	1.78	
Coordination: Do we work well internally to assure that clients receive all the services they need?	1.68	

Effective Services: Do we provide services in the most competent and organized manner?	1.83	
Equitable Services: Are we fair and impartial as we work with different populations and individuals?	1.73	
Quality Services: Do we maintain standards of excellence as we provide services?	1.70	
Timeliness of Services: Do we deliver services within a reasonable timeframe?	1.91	
Valued-Services: Do the services we deliver add value to our clients' lives and make a difference?	1.53	
Below is a list of attributes related to your job-that link to the agency's current mission, vision and value statements (changed in 2024). A short explanation of what each term means has been provided. Using the following Likert Scale, please rank how well the agency demonstrates these attributes to our employees. For each category identify	Inverted S	Scale
one of the following ratings: We do: Very Well, Well, Fair, Poor or Very Poor.	(Lower Nu are better	
Likert Scale: 1=Very Well, 2=Well, 3=Fair, 4=Poor, 5=Very Poor		1
Challenging: Is your job providing opportunities for professional growth?	2.51	
Communication: Is the information you need readily available so that you can accomplish your job and do messages flow freely though various channels?	2.09	
Coordination: Are team approaches being utilized to accomplished tasks and complete projects?	1.92	
Equitable: Are standards of performance applied fairly to all employees?	2.21	
Fiscally Responsible: Is the agency a good steward of the public funds we receive?	1.87	
Rewarding: Is your job satisfying and does it add meaning to your life?	1.79	
Safety: Is your work environment clean and free of hazards?"	1.81	
Technology: Is the electronic equipment and other tools provided adequate to accomplish your job?	2.06	
What do you enjoy most about your work experience with this agency?		
What do you least enjoy about your work experience with this agency?		
If you had the authority and resources to solve one internal problem in the agency, what would it be?		
If you could communicate anything to the Health Officer and Directors that would contribute to improving the work of this agency, what would you communicate?		
What do you see as the most significant opportunities for your division/section over the next five years?		
What resources will be needed to take advantage of these opportunities?		
What are the most significant obstacles for your division/section over the next five years?		
Where do you see our agency in five to ten years?		
Where would you want our agency to be in five to ten years?		
Do you have any suggestions you think would help improve internal communication?		
Additional comments:		



LETTER OF AGREEMENT October 27, 2022

LETTER OF AGREEMENT, by and between Rebecca Burns and the Branch-Hillsdale-St. Joseph Community Health Agency for the position of Health Officer.

This is intended to be a binding contract by and between the parties effective January 1, 2023 through December 31, 2025. Either party may terminate this agreement with or without cause upon giving a 60-day notice to the other party of the intention.

The agreed upon base salary by both parties shall be \$100,000 per year. During the terms of this contract the Health Officer shall be granted any percentage increase in pay as approved by the Board of Health for employees of this agency.

The Board of Health shall evaluate the performance of the Health Officer annually per the evaluation policy adopted by the Board of Health. Upon a satisfactory evaluation, the Board of Heath may award up to \$5,000 in merit pay.

It is hereby agreed by both parties that the Health Officer position shall be a full-time position. The duties of the position shall be defined in the job description created by the Agency and in compliance with the requirements of the State of Michigan.

It is hereby agreed by both parties that Rebecca Burns, a current employee of this Agency, will retain her current fringe benefits which are consistent with the benefits listed in the Agency's Personnel Policies; health insurance, life insurance, disability insurance, MERS, etc.

It is hereby agreed by both parties that Rebecca Burns shall be paid the agency rate per mile for necessary business travel for the completion of her assigned duties in accordance with the Agency's Travel Policy.

It is hereby agreed by both parties that Rebecca Burns shall retain her current accrued vacation and sick time and earn future vacation and sick time in compliance with the Personnel Policies of the Agency at the rate of 10 years or more of service.

It is hereby agreed by both parties that Rebecca Burns shall be reimbursed the amount of expenses incurred for the successful completion of trainings, classes, or conferences taken as deemed necessary for the position.

It is hereby agreed by both parties that if termination of this contract becomes necessary with or without cause that Rebecca Burns shall be paid any and all accrued time (vacation and sick leave) upon termination earned to date.

The terms of this contract may continue for 60 days after December 31, 2025 as long as it is mutually agreed by both parties.

Tom Matthew, Chair, Board of Health

Date October 27, 2022

Rebecça A. Burns, MPH, RS, Health Officer

Date: 10-27-2022

2024 Annual Report



Helping People Live Healthier





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BOARD OF HEALTH



Jared Hoffmaster Commissioner St. Joseph County Chair



Tom Matthew Commissioner Branch County Vice-Chair



Brent Leininger Commissioner Hillsdale County



Randy Baker Commissioner St. Joseph County



Jon Houtz Commissioner Branch County



Steve Lanius Commissioner Hillsdale County

OUR MISSION:

Helping People Live Healthier

OUR VISION:

To be the trusted health resource for all people.

- Website: bhsj.org
- 🖄 Facebook: <u>branch-hillsdale-stjoseph</u>

community health agency

 ○ Instagram: bhsj healthagency
 ○ YouTube: ebhsjchamedia
 M Nextdoor: branch-hillsdalestjosephcommunityhealthagency

AGENCY DIRECTORS



Rebecca A. Burns, MPH, RS Health Officer



Karen Luparello, DO, MPH Medical Director



Theresa Fisher, BS
Director of
Administrative Services



Heidi Hazel, BSN, RN Director of Personal Health and Disease Prevention



Laura Sutter, BS
Director of Area Agency
on Aging Region IIIC



Paul Andriacchi, REHS Director of Environmental Health

"Do not follow where the path may lead. Go instead where there is no path and leave a trail." -Ralph Waldo Emerson

Dear Community:

To the Residents of Branch, Hillsdale, and St. Joseph Counties, On behalf of the Board of Health and staff of the agency, it is my pleasure to share with you this fiscal year (FY) 2024 Annual Report.

In fiscal year 2024, the agency monitored and responded to public health concerns; including protecting residents from the risks of lead, radon, tick and mosquito carried diseases, and providing information on "bird flu". Our Health Education & Promotion team provided timely information on prevention strategies related to these issues, as well as supporting the safe storage of marijuana products to keep them out of the hands of children.

The Personal Health & Disease Prevention team provided seasonal and routine vaccines, nutrition education through WIC, breastfeeding support, hearing and vision screening for children, and support to families of children with chronic conditions. Our nurses investigated incidents of communicable disease, provide testing and follow-up for STI/HIV, and responded to human encounters with animals to prevent rabies.

We implemented a planning process for the Kindergarten Oral Health Assessment (KOHA) program during the fiscal year. Actual implementation is planned for next fiscal year. KOHA requires the services of a dental professional to provide a screening to children entering and in kindergarten. Good oral health promotes better learning, nutrition, and socialization.

The Environmental Health team supported residents by ensuring safe drinking water, sanitary sewage disposal, and safe food service. Seasonally, they evaluate campgrounds, public swimming pools, septage hauling trucks, distribute radon test kits, and have worked hard to prevent disease.

The Area Agency on Aging IIIC continued to support adults who want to age in their home and help those that are victims of abuse and exploitation.

To ensure we are maintaining our facilities, we replaced carpet in Hillsdale, and painted our Hillsdale and Coldwater facilities. All offices received new water bottle fill stations that provide filtered water.

The team at Your Local Health Department is proud of our public health work and we look forward to continuing to serve you and your family into 2025.

Yours in Good Health, Rebecca A. Burns, MPH, RS Health Officer



Credit to: HDNW 2023 Annual Report

LOCATIONS

Branch County

570 Marshall Road Coldwater, MI 517-279-9561

Hilldale County

20 Care Drive Hillsdale, MI 517-437-7395

St. Joseph County

1110 Hill Street
Three Rivers, MI
269-273-2161

Suite C
Sturgis, MI
269-273-2161

PROTECTING THE ENVIRONMENT

Protecting Families

Keeping Our Water Clean

Our communities are blessed with many lakes, rivers, and streams. Additionally, we have aquifers and underground water sources to protect for the benefit of all.

Our well program ensures that residents have safe and clean water sources from which to drink, recreate, and irrigate.

Another way to ensure we have clean water is to ensure we are handling sewage in a safe and sanitary manner. Septic systems are used to treat wastewater for more than 1.3 million homes and businesses in Michigan. These systems are prominent in our area because many residents and businesses cannot connect to municipal systems.

Our Sanitarians work with homeowners, contractors, and business owners to evaluate the site and issue a permit. The final review process provides assurance that the systems will operate as intended.

In 2024, the entire agency supported the City of Three Rivers to address elevated lead levels in community water supplies by distributing filtration systems, providing professional education, and distributing educational materials to residents.

We work with residents who have had their wells impacted by PFAS contamination, providing filtration systems and advocating for long term solutions.

In 2024 the agency transitioned to a new online platform that will provide residents with additional information on well and septic sites for which we have record. Residents and contractors are able to review recorded site plans without making a trip to the local office.

Additional features such as online application and permit payment options are planned for 2025.

By the Numbers:



Ensuring Safe Food Supply

Our Sanitarians ensure restaurants, schools, food trucks, community fairs, and festivals follow safe food handling practices and sanitation standards.

Public Health's role is not just a regulatory function, but an educational one as well. Our agency provides Food Manager Certification classes to support food service operators in their efforts to provide a pleasant and healthy dining experience.

Watching for Vectors of Disease

Each summer the agency has Vector Surveillance Technicians in each county monitoring the population of mosquitos and ticks.

The technicians trap and identify mosquitos throughout the three counties looking for the species that transmit diseases such as Eastern Equine Encephalitis, Zika Virus, and Jackson Canyon Virus.

They also drag tall grass and wood lines looking for the species of tick that transmit Lyme's disease and Rocky Mountain Spotted Fever.

SUPPORTING THE COMMUNITY

Supporting Families

Helping the Most Vulnerable

In 2024, the agency continued to focus efforts on the Community Health Worker program. Community Health Workers are trained and certified to address the social determinants of health which include economic stability, education access, healthcare access, and community supports.

Community Health Workers have assisted individuals to enroll in health insurance, find resources for food, locate safe housing, complete their education, access rehabilitative services, access medical care, secure transportation, and address urgent financial needs.

The agency partners with additional community agencies and services to ensure needs of residents in our communities are met. Together, we strive to ensure residents with the greatest needs are connected to the resources that can assist them to become healthier by stabilizing their social situation.

Our Community Health Worker and Health Education and Promotion staff participate in monthly outreach activities in all three counties. Outreach events allow us to share information on the services the agency provides to support families and the community.

The agency provides car seats to families who participate in the WIC program or who are unable to afford a car seat. This program is funded with local dollars to ensure our youngest residents are safe when traveling in a car.

Our Emergency Preparedness program works with county Emergency Managers and the Michigan Department of Health and Human Services to ensure a coordinated response to emergency situations that could impact public health. We also provide community education to help residents be prepared to respond to and recover from an emergency.

By the Numbers:



Community Events Attended

60



Coalitions We Participate With

28



Community Health
Worker Clients

51



News Stories

93



Social Media Followers **4,300**



Car Seats Distributed

247

In 2024, we supported the response to the BP Gas Line rupture in Girard Township, sewage spilled into the St. Joseph River, Harmful Algal Bloom public access notifications, and the Quincy Community Schools student health concerns.

Communications is Key

The Health Education and Promotions team is responsible for communicating information with the public. This includes management of our social media platforms, maintaining relationships with local media, press releases, updating website information, developing newsletters, and preparing for crisis communications.

Our digital platforms are the primary vehicle for ensuring the community has information that is timely, relevant, and credible.



INVESTING IN FAMILIES

Investing in You

Starting off Strong

Our clinical services are designed to support individuals of all ages. From the cradle to the rocking chair, and everywhere in between, Your Local Health Department is here to serve your needs.

Women, Infants, and Children (WIC) services are designed to support healthy pregnancy and thriving children. Education for parents on child development milestones, nutritional support for children up to age 5, and breastfeeding support are the cornerstones of this program.

Children's Special Healthcare Services (CSHCS) provides case management support to families of children with chronic health conditions. This includes assistance with referrals and transportation to specialists, coverage of medical supplies, and specialized equipment.

Immunizations are provided for residents of all ages to prevent severe illness from the fourteen vaccine preventable diseases of childhood as well as respiratory illnesses, meningitis, HPV, and shingles. The Vaccines for Children and Adult Vaccine Program offer certain immunizations at no cost for those without insurance or low income.

Our public health nurses investigate communicable diseases to protect the community at large. Providing education to patients and close contacts can reduce disease spread because individuals and families know the steps to take to protect others.

Hearing and Vision technicians provide valuable screening services to school-aged and preschool children. Hearing and vision problems can negatively impact a child's performance in the classroom and hinder social development. Children who are identified with concerns are referred to local physicians for diagnostic testing and treatment.

By the Numbers:



WIC Participants **8,218**



Maternal Child Health: Safe Sleep 1,648



Community Referrals Offered

16,877



Children Enrolled in CSHCS

953



Vision Screenings 13,519



Hearing Screenings

6,511



Communicable
Disease Cases
2,022



Immunizations
Administered
6,390



Clients Served at MCDC Clinics 10,862

Partnering for Oral Health

Your oral health is more important than you may realize. Good oral health contributes to your overall health since the mouth can be a gateway for germs.

Your Local Health Department and My Community Dental Centers have partnered together to ensure residents have access to low cost and Medicaid dental services. These clinics offer preventative and restorative services. My Community Dental Center has offices in Coldwater, Hillsdale, Sturgis, and Three Rivers. To schedule an appointment call (877) 313-6232

WORKING WITH NEIGHBORS

Working with You



Area Agency on Aging

The Area Agency on Aging IIIC team continued working to address community needs, provide comprehensive information & assistance, and develop stronger community partnerships. Our programs & providers work to meet unique needs across our two-county planning & service area.

The Services to Victims of Elder Abuse (SVEA) project served 50 individuals this year. This program supports victims in our communities like "William"*.

"William" was referred by our local interdisciplinary team. He was a victim of domestic abuse. At the time, William was living in a neglected, foreclosed home with inadequate plumbing. He was severely underweight and unable to live independently.

Our Elder Abuse Victim Specialist provided case management services and worked with William to establish goals for regaining his independence. We assisted him in securing medical care, insurance, mental health services, and establishing a medical and financial Power of Attorney. Additionally, we helped him secure housing and community-based services such as home-delivered meals to support his recovery. William has gained 30 pounds, receives regular medical care, has made new friends, and participates in community programs. He shared with us, "I now have a positive outlook on life!"

The Community Living Program's Care Consultants work with individuals and families to develop a person-centered support plan. Nearly 80 individuals were served over the past year.

"John" is 62 years old and lives with his brother in their family home. Through the Community Living Program, we have supported his goal of living as independently as possible. John has developmental and physical disabilities, which make navigating everyday life challenging for him.

His care plan highlights his desire to move around town in his wheelchair and receive in-home support, including personal care, light housekeeping, and

*Note: Names have been changed to honor the individuals' privacy.

By the Numbers:







Hours of In-Home Services



Community Services

31,880 2,054



Access to Services

21,969



Legal Services 4,044



15.771

Meals on Wheels. He and his brother support each other, such as managing medications, and ensuring their home is safe. Recently, they worked with a neighbor to repair the entryway to their home, ensuring safe access not only for themselves, but also for their care providers.

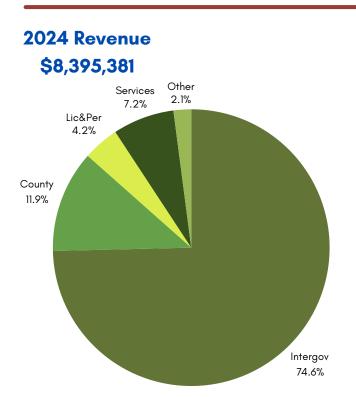
The Area Agency on Aging Care Consultants collaborate with participants, their friends and family, and diverse community partners to develop goals, monitor care, and address both successes and challenges.

For more information on any of our programs contact our office at 517-278-2538, toll free 888-615-8009, or visit our website www.bhsj.org/aaa.

Services/Project	Funding	
Operations	\$69,637.00	
Nutrition	\$463,980.00	
In-Home Services	\$302,158.00	
Community	\$58,717.00	
Access	\$228,848.00	
Legal	\$12,000.00	
Traditional Federal & State (OAA/OMA) funding sources only		
Services to Victims of Elder Abuse	\$185,644.00	
American Rescue Plan Act	\$88,168.00	
Direct Care Worker Pay	\$67,200.00	

MAGNIFYING EFFICIENCIES

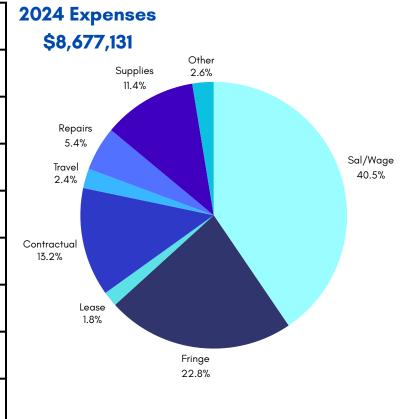
Stewarding Your Tax Dollars



Category	FY24	FY23
Licenses & Permits	\$353,057	\$333,613
Intergovernmental	\$6,264,198	\$6,493,566
County Appropriations & Other Local	\$1,001,853*	\$790,027
Charges for Services	\$602,840	\$513,707
Other	\$173,433	\$226,761
Total	\$8,395,381	\$8,357,674

^{*}Not comparable to FY 2023 as agency reporting of fund category changed .

Category	FY24	FY23
Salaries/Wages	\$3,514,343	\$3,186,375
Fringe Benefits	\$1,974,397	\$1,604,257
Supplies & Materials	\$988,075	\$716,565
Contractual	\$1,144,167	\$1,348,718
Travel & Training	\$206,646	\$192,573
Repairs& Maintenance	\$465,930	\$578,604
Bldg & Equip Lease	\$159,571	\$136,468
Other	\$224,002	\$222,541



HOW WE ARE STRUCTURED

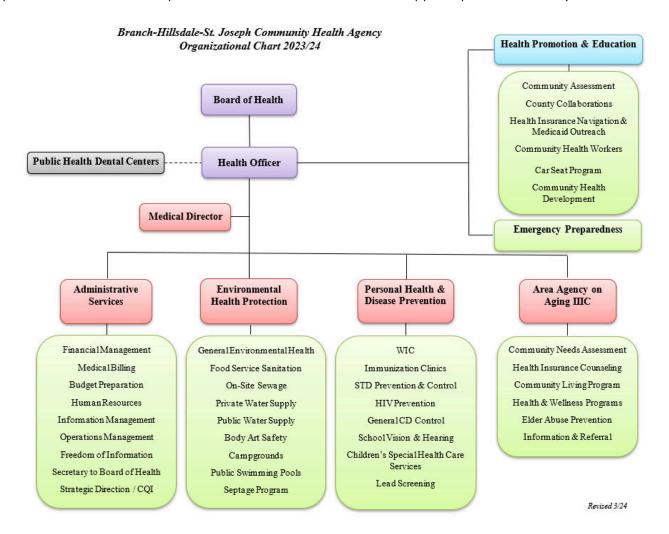
Maximizing Human Resources

Committed to Excellence

Our agency serves three counties, 1604 square miles, 31 communities, and 151,670 residents with approximately 77 full and part-time staff in 2023–24. The agency is lead by the Board of Health, comprised of two county commissioners from each county. The Health Officer is responsible for the operation of the agency. The Health Officer is supported by the Medical Director, a local physician, who advises the agency regarding issues of public health and disease prevention.

Four Division Directors are responsible for program planning, policy development, and staff training. Seven Supervisors ensure that staff are supported in carrying out the requirements of the programs and services we provide. Sixty-four talented team members ensure that each individual receives the high quality services that are expected.

Our staff is committed to our mission and vision, desiring to make our communities safe and providing services to support optimal community health.



We hope that you have found the 2023–24 Annual Report informative. We appreciate the community's support and take seriously the trust and financial resources invested in our agency's programs and employees. Your Local Health Department is here to serve you, contact us with any concerns or needs you may have. Thank you!





570 Marshall Road Coldwater, Michigan, 49036

Phone: 517-279-9561





Program: Health Education & Promotion Effective Date: 4/30/2016

Subject: Social Media Policy Last Update Date: 2/22/20244/24/2025

Purpose:

To communicate reliable public health information and events to clients and the community through social media. While many social media platforms provide for interaction, it is not the intent of Branch-Hillsdale-St. Joseph Community Health Agency to create limited public forums on all social media platforms, and some platforms may be utilized solely for providing information and not public interaction.

Policy Statement:

Branch-Hillsdale St. Joseph Community Health Agency will use social media to promote our mission, vision, services, events, and general health and wellness information to our clients and the community.

Definitions:

None

Implementing Procedure: Policy Standards

Social Media platforms will allow Branch-Hillsdale-St. Joseph Community Health Agency to stay connected with people throughout their day whether they are on their computers or mobile devices, at home or at work, watching TV or shopping. This creates rich social experiences, builds lasting relationships and amplifies the most powerful type of marketing – word of mouth. The goal is to drive people to the organization's web site for additional information or appointment scheduling.

A. Procedure:

- a. Social Media platforms will be selected by the Health Education and Promotion Supervisor (Data Analyst) (HPES) with approval of the Health Officer. The HEPS will assign no less that than three (3) moderators who will have responsibility to post on the selected social media platforms.
- b. Moderators will only include staff of the BHSJ CHA. Moderators will be representative of Health Education and Promotion and Personal Health & Disease Prevention. Moderators will be selected by the director and supervisor of the departments.
- c. When desired, mModerators will form a subcommittee to the Marketing/Web Committee and work together to develop a list of posts for a quarterly period which will be shared with Marketing /Web Committee.

- d. Moderators are to use Social Media at work as has been approved by the Health Officer, <u>Health Education and Promotion Supervisor</u>, Division Director and/or his/her designee and only for accomplishing work goals.
 - i. Branch-Hillsdale-St. Joseph Community Health Agency staff or other related organizations who would like to have a status update on the BHSJ CHA Social Media page(s) will submit it to the moderators assigned to posting on the page.
 - ii. Requests for status updates should be given with as much advance notice as possible.
- e. Requests for live stream events should be made to the Health Officer, <u>Health Education</u> and <u>Promotion Supervisor</u>, Division Director and/or his/her designee with as much advanced notice as possible.
 - i. Live stream events should be scripted when possible.
 - ii. In the event of a community remote, every effort should be made to ensure HIPAA compliance by avoiding showing people who are not agency staff, showing personal vehicles or license plates, youth under the age of 18, or people getting services from the agency.
 - iii. Interviews of persons from outside the agency can be done during a live stream with their verbal consent.
- f. YouTube. The YouTube platform shall be used for information purposes, only, and not for public interaction. Therefore, any videos posted to YouTube, live stream or otherwise, will have message, chat, live chat, and/or comment capabilities disabled. This includes the live stream of the Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meetings that may be posted on YouTube.

B. Frequency

- a. Moderators will update the status at least once per week. Pre-posting of pre-approved messages is acceptable for a multi-month period of time.
- b. Multiple daily posts are accepted acceptable.

C. Content

- a. General
 - i. Use neutral, accurate statements
 - ii. Keep the media in mind when posting
 - iii. Provide resource links
 - iv. The public will not be able to post anything on the BHSJ CHA wall. They will, however, be able to comment on, like, or share any status update from the Branch-Hillsdale-St. Joseph Community Health Agency Page(s), with the exception of the BHSJ YouTube page, as referenced above in Sec. A.f. Moderators will be notified via Agency email as soon as there is a comment made on the page and the lead moderator will monitor and review all comments. To assist with the process, IT may help the staff set up agency phones to receive email messages.
- b. Status Updates
 - i. Status updates should be brief and to the point
 - ii. Status updates should, on average, not exceed 250 characters
 - iii. Status updates should pick out important information for the user
 - iv. Links in a status update:
 - 1. Try to summarize site content directly in the post rather than linking to external sites if possible.
 - 2. When linking to external sites, avoid dropping users off on the homepage. Instead, link to a particular article, photo, or video. Be as specific as possible.
 - 3. We may link to CDC, MDCHMDHHS, EGLE, WHO, and other trustworthy websites, as determined by the moderator. Locally, we may link to Great Start

- Collaborative, Early On, Early Head Start, Head Start, MSU Extension, local hospitals, and other partnering health and human service agencies' Social Media pages.
- 4. Linking individual Social Media pages to Branch-Hillsdale-St. Joseph Community Health Agency Social Media page is prohibited without consent from the Health Officer. Other organizational Social Media pages and/or group pages will need to meet the following conditions:
 - The proposed page must contain accurate information
 - The proposed page must be educational in its purpose
 - The proposed page must contain information that clearly provides information about their organization and identifies their purpose.
- 5. The Branch-Hillsdale--St. Joseph Community Health Agency reserves the right to refuse any request made to include a proposed link on our Social Media page or to remove a link from our Social Media page if it is determined by the Agency that the link does not provide accurate or beneficial information. The Health Officer for the Branch-Hillsdale-St. Joseph Community Health Agency will make all decisions about whether a link is accepted for posting on our webpage.
- c. Be Aware of Legal Considerations: In order to avoid liability, do not make status updates or comments that:
 - i. Discriminate on the basis of race, creed, color, age, religion, sex, marital status, sexual orientation, national origin, weight, height, genetic information, gender identity, or gender orientation;
 - ii. Are sexual in nature:
 - iii. Compromise the safety or security of the Agency or individuals;
 - iv. Support or oppose a political candidate or ballot measure;
 - v. Promote illegal activity;
 - vi. Violate another party's copyright, trademark or other protected property;
 - vii. Are obscene or profane, or contain swear words, use expletives, or make derogatory or disparaging comments about any one person or group;
 - viii. Infringe on a person's personal protected or protected health information (e.g. HIPAA);

d. Photos

- Photos may include BHSJ CHA promotional pieces, events, posters, flyers, etc. or promotional pieces from reputable sources (such as CDC, MALPH, MDHHS, <u>EGLE</u> etc.) If members of the school or public are in the photo, use only photos when an agency consent form has been obtained.
- ii. Only moderators will be allowed to post photos to the page. They will be able to comment on, like, or share any photo from the Branch-Hillsdale-St. Joseph Community Health Agency. Moderators will be notified via email as soon as there is a comment made on a photo and will monitor and review all comments immediately.
- iii. The public will not be able to "tag" themselves or others in posted photos.

e. Video

i. Videos may be uploaded to Social Media in two ways: (1) using the "upload video" option to post videos and (2) sharing the video to Social Media from YouTube, Vimeo, etc. Videos uploaded to YouTube are subject to Sec. A.f., above.

E. Security

a. Login and Passwords

- i. Login and passwords will be stored and retained by HT-HEP division.
- ii. Login and passwords will be subject to Agency IT policies.
- iii. Login and passwords should not be shared with other staff media that are identified as moderators.

F. Record retention

- a. Copies of most materials that involved an event or documents that are associated with Agency programs must be kept until the event has passed or project is completed.
- b. If a posting is the only record of a component of a project, operation or event, a copy of the post (i.e., Archive Social, screen shot, and/or uploaded file) must be kept in compliance with the Agency's record retention schedule.

G. **Evaluation**

- a. Agency customer satisfaction surveys will be modified to include questions concerning knowledge of and/or utilization of Agency's Social Media page(s). This information will be used to help evaluate Agency's social media utilization and outcomes.
- b. Metrics related to reach will be collected on a quarterly basis by the lead moderator and shared with the Agency Marketing/Web Committee. Once benchmarks are established, the agency will set performance indicators related to reach. Performance indicators and measures will be included in Agency's performance indicator report.

Monitoring the Site

Branch-Hillsdale-St. Joseph Community Health Agency social media moderators will monitor the site frequently, with email alerts set for when anyone posts, "likes," or comments on the social media pages. Profanity filters will be set to strong.

Please note that comments that contain the following may be removed:

- Discriminate on the basis of race, creed, color, age, religion, sex, marital status, sexual orientation, national origin, weight, height, genetic information, gender identity, or gender orientation;
- ii. Are sexual in nature;
- iii. Compromise the safety or security of the Agency or individuals;
- Support or oppose a political candidate or ballot measure; iv.
- Promote illegal activity; v.
- vi. Violate another party's copyright, trademark or other protected property;
- Are obscene or profane, or contain swear words, use expletives, or make vii. derogatory or disparaging comments about any one person or group;
- Infringe on a person's personal protected or protected health information (e.g. viii. HIPAA);
- Contain solicitation ix.
- Are irrelevant to the limited subject matter of the specific post. X.

Individuals or organizations who make repetitive inappropriate comments may be blocked, per the Health Officer's directive.

This policy will be reviewed February 22, 2024 and then annually from the effective date.

Approved:

Rebecca Burns, RS, MPH

Health Officer/Administrator

Date: 02/22/202404/24/2025



Program: Administration

Subject: Procurement Policy Effective Date: 10/4/2018

Purpose: To ensure all supplies, equipment, construction, and services are obtained in an open and effective manner and in full compliance with the provisions of applicable federal statutes and executive orders.

Policy Statement: Prior to starting a procurement process, Branch-Hillsdale-St. Joseph Community Health Agency (Referred to as "The Agency" going forward) must review the procurement to ensure that it complies with all parts of **2 CFR 200-317-326**.

Implementing Procedure: GENERAL PROCUREMENT STANDARDS (Sec. 200.318):

The Agency:

- Must maintain oversight to ensure that contractors perform in accordance with the terms, conditions, and specifications of their contracts or purchase orders.
- Must maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award and administration of contracts.
- Must avoid acquisition of unnecessary or duplicative items.
- Will seek to enter into state and local intergovernmental agreements or inter-entity agreements where appropriate for procurement or use of common or shared goods and services.
- Will seek to use Federal excess and surplus property in lieu of purchasing new equipment and property whenever such use is feasible and reduces project costs.
- Will use value engineering clauses in contracts for construction projects of sufficient size to offer reasonable opportunities for cost reductions. Value engineering is a systematic and creative analysis of each contract item or task to ensure that its essential function is provided at the overall lower cost.
- Must award contracts only to responsible contractors possessing the ability to perform successfully under the terms and conditions of the proposed procurement. Consideration must be given to contractor integrity, compliance with public policy, record of past performance, and financial and technical resources. Awards, subawards and contracts with parties that are debarred, suspended, or otherwise excluded form or ineligible for participation in Federal assistance programs or activities are not allowed.
- Must maintain records sufficient to detail the history of procurement. These records will include, but are not limited to the following: rationale for the method of procurement, selection of contract type, contractor selection or rejection, and the basis for the contract price.
- May use a time and materials type contract only after a determination that no other contract is suitable and if the contract includes a **ceiling price that the contractor exceeds at its own risk**.

Reviewed Date: 10/1/2023

A time and materials type of contract means that a contract whose cost to the grantee is the sum of the actual cost of materials and direct labor hours charged at fixed hourly rates that reflect wages, general and administrative expenses, and profit.

Accepts sole responsibility, in accordance with good administrative practice and sound business
judgement, for the settlement of all contractual and administrative issues arising out of
procurement.

METHODS OF PROCUREMENT (Sec 200.320):

1. Procurement by small purchase procedures: For purchases up to \$\frac{149249}{249},999 - ("Simple Acquisition Threshold" defined in 41 U.S.C. 403(11) set at \$\frac{150250}{250,000}:

Small purchases are those that are relatively simple and informal for items such as supplies, services or other property. If small purchase procedures are used, price or rate quotations shall be obtained from an adequate number of qualified sources to ensure that the selection process is competitive in accordance with these policies. "Adequate Number" as well as specific rules governing small purchases are further defined in The Agency's Purchasing Policy.

2. Procurement by sealed bids:

Bids are publicly solicited and a firm-fixed-price contract (lump sum or unit price) is awarded to the responsible bidder whose bid, conforming to all the material items and conditions of the invitation for bids, is the lowest price. *This method is preferred for procuring construction, if the following are present*,

- A complete, adequate, and realistic specification or purchase description is available
- **Two or more** responsible bidders are willing and able to compete effectively for the business, and
- The procurement lends itself to a firm fixed price contract and the selection of the successful bidder can be made principally on the basis of price.

If sealed bids are used, the following requirements apply:

- Bids must be solicited from an adequate number of known suppliers, providing them sufficient response time prior to the date set for opening the bids. The invitation for bids must be publicly advertised.
- The invitation for bids, which will include any specifications and pertinent attachments, must define the items or services in order for the bidder to properly respond.
- All bids will be opened at the time and place prescribed in the invitation for bids.
- A firm fixed price contract award will be made in writing to the lowest responsive and responsible bidder. Where specified in bidding documents, factors such as discounts, transportation cost, and life cycle costs must be considered in determining which bid is lowest. Payment discounts will only be used to determine the low bid when prior experience indicates that such discounts are usually taken advantage of.
- Any or all bids may be rejected if there is a sound documented reason.

3. Procurement by competitive proposals, i.e. Requests for Proposals (RFPs):

Competitive proposals are normally conducted with more than one source (supplier) submitting an offer and either a fixed-price or cost-reimbursement type contract is awarded. This is generally used when conditions are not appropriate for the use of small, large or sealed bids - architectural, audit and third-party administration must use the competitive proposal method. The following requirements apply:

- Requests for proposals (RFP) must be publicized and identify all evaluation factors and their relative importance. In most cases, solicitation by mail or newspaper or professional journals is appropriate. A telephone call is not sufficient.
- Any response to publicized RFPs must be considered to the maximum extent practical.
- Proposals must be solicited from an adequate number of qualified sources.
- The non-Federal entity must have a written method for conducting technical evaluations of the proposals received and for selecting recipients.
- Contracts must be awarded to the responsible firm whose proposal is most advantageous to the program, with price and other factors considered.
- The grantee may use competitive proposal procedures for qualifications-based procurement of architectural/engineering A/E professional services. This method, where price is not used as a selection factor can only be used in the procurement of A/E professional services.

Procuring audit services (Sec. 200.509). The grantee must follow the procurement standards in sections 200.317-326, as applicable.

In requesting proposals for audit services:

- 1) Objectives and scope of the audit should be made clear, and
- 2) Grantee must request a copy of the audit organization's peer review report which the auditor is required to provide under GAGAS (Generally Accepted Government Auditing Standards).

Factors to be considered in evaluating each proposal for audit services include:

- 1) Responsiveness to the request for proposal,
- 2) Relevant experience,
- 3) Availability of staff with professional qualifications and technical abilities,
- 4) Results of external quality control reviews, and
- 5) Price.

4. Procurement by noncompetitive proposals:

Procurement through solicitation of a proposal from only one source. The grants reform clarified that this may be used only when one or more of the following circumstances apply:

- The item is available only from a single source.
- The public demand or emergency for the requirement will not permit a delay resulting from competitive solicitation (emergency situations).
- The federal awarding agency or pass-through entity expressly authorizes noncompetitive proposals in response to a written request from The Agency.
- After solicitation of a number of sources, competition is determined inadequate.

COMPETITION (Sec. 200.319):

All procurement transactions must be conducted in a manner providing full and open competition constituent with the standards for Part 200. In order to ensure objective contractor performance and eliminate unfair competitive advantage, contractors that develop or draft specifications, requirements, statements of work, or invitations for bids or requests for proposals must be excluded from competing for such procurement. Some situations that could be restrictive of competition include, but are not limited to:

- Placing unreasonable requirement(s) on firms in order for them to qualify.
- Requiring unnecessary experience and excessive bonding (insured in the event of a loss).
- Noncompetitive pricing practices between firms or between affiliated companies.

- Noncompetitive contracts to consultants that are on retainer contracts.
- Organizational conflicts of interest.
- Specifying only a "brand name" product instead of allowing "an equal" product.
- Any arbitrary action in the procurement process.

The Agency must conduct procurements in a manner that prohibits the use of statutorily or administratively imposed state, local or tribal geographic preferences, except where expressly mandated or encouraged.

The Agency must maintain written procedures for procurement transactions which Maintained in RFPs:

- Incorporate clear and accurate description of the technical requirements for materials, products or services to be procured.
- Identify all requirements that must be fulfilled by the offeror and all factors to be used in evaluating the bids or proposals.
- Ensure that all prequalified lists of offerors/products used for acquiring goods and services are current and include enough qualified sources to ensure maximum open and free competition.

CONTRACTING WITH SMALL AND MINORITY BUSINESSES, WOMEN'S BUSINESS ENTERPRISES AND LABOR SURPLUS AREA FIRMS (Sec. 200.321):

The Agency must take all necessary steps to assure that minority businesses, women's business enterprises and labor surplus firms are used when possible. These steps include:

- Placing qualified small and minority businesses (SMBs) and women's business enterprises (WBEs) on solicitation lists.
- Assuring that SMBs and WBEs are solicited whenever they are potential sources.
- Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by SMBs and WBEs.
- Establishing delivery schedules, where the requirement permits, which encourage participation by SMBs and WBEs.
- Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce.
- Requiring the prime contractor, if subcontracts are allowed, to take the affirmative steps listed in the above statements.

CONTRACT COST AND PRICE (Sec. 200.323):

The Agency must perform some form of cost or price analysis in connection with each procurement, which are further explained below.

COST ANALYSIS is used:

- When the bidder is required to submit the elements that make up the estimated cost.
- When sufficient price competition is lacking
- For all single-source procurements.

PRICE ANALYSIS is used when price reasonableness can be established on the basis of a catalog or the market price of a product on processes set by law or regulation.

BONDING REQUIREMENTS (Sec. 200.325):

For construction or facility improvement contracts/subcontracts exceeding the Simple Acquisition Threshold (currently set at \$150250,000), the Federal awarding agency or pass-through entity may accept the bonding policy and requirements of the non-Federal entity provided that the Federal awarding agency or pass-through entity has made a determination that the Federal interest is adequately protected. Is such a determination has not been made, the minimum requirements must be as follows:

- A bid guarantee from each bidder equivalent to five percent of the bid price. The bid guarantee must consist of a firm commitment such as a bid bond, certified check or other negotiable instrument accompanying a bid as assurance that the bidder will, upon acceptance of the bid, execute such contractual documents as may be required within the time specified.
- A performance bond on the part of the contractor for 100 percent of the contract price. This is so the obligations of the contract are completely fulfilled.
- A payment bond on the part of the contractor for 100 percent of the contract price. A payment bond in one executed in connection with a contract to assure payment as required by law of all persons supplying labor and material in the execution of the work provided for in the contract.

Last Reviewed: 10/01/2023 TEF



Program: Administration Effective Date: 7/1/2022
Subject: Purchasing Policy

Purpose: To ensure all purchases are conducted in full compliance with applicable laws and in a manner that promotes transparency, fairness, and competition.

Policy Statement: Purchases falling under the Simplified Acquisition Threshold of \$250,000 will be conducted openly and effectively, in full compliance with the provisions outlined under 41 U.S.C. § 403(11).

Implementing Procedure:

For the purchase of supplies, materials, equipment, capital expenditures, or other items costing \$5,000 per item or more:

- 1. Any single item purchase costing \$5,000 or more must receive prior approval from the Board.
- 2. Competitive Bidding:
 Staff are required to obtain quotes or bids from a minimum of three (3) qualified sources to ensure a competitive selection process.
 - If three quotes/bids cannot be obtained due to a lack of responsive or qualified vendors, the purchase may still proceed only if the agency documents all reasonable attempts made to obtain the required number of quotes/bids.

General Purchasing Procedures

- 1. All supplies, materials, and equipment used in the performance of job duties that are not stocked as general supplies within each location, shall be requested by completing a Material Requisition form. Inform all vendors that we are a tax-exempt organization and do not pay sales tax. If a tax-exempt form is required, note on the Material Requisition form.
- 2. Submitted Material Requisition forms must contain at least the following information: Vendor (from where you are ordering), name of staff to deliver to, RU and account numbers, date requisition completed, quantity, part number, description, cost, date needed, and Department Director signature.
- 3. Upon Director approval, the Requisition shall be forwarded to the Administrative Support Clerk.

Reviewed Date:

- 4. The Administrative Support Clerk shall data enter the Purchase Order information (vendor, brief description, and part number) on the "po list" tab in the yyyy Office Supplies Inventory Worksheet (Share-CW (M:) > Operations > Office Supply Management > PO File > PO List). This keeps track of the PO numbers.
- 5. The Administrative Support Clerk shall process orders to be delivered directly to the appropriate sites whenever practical, according to quantities and purchase units.
- 6. The Administrative Support Clerk shall enter all data into Abila purchasing program and generate a PO.
- 7. Upon initial receipt of the supplies, materials, or equipment, person receiving will sign, date, verify contents, counts, and accuracy. Then they will scan and email packing slip or if no packing slip was received notify the Administrative Support Clerk so items can be received in the Abila system. This must be completed upon receipt of goods.
- 8. As supplier invoices are received in the mail, those resulting from a PO go to the Administrative Support Clerk for processing. All others go directly to Accounts Payable.
- 9. If an invoiced price does not agree with the quoted or contracted price, the Administrative Support Clerk must contact the suppler to re-issue a corrected invoice. If any changes need to be made, the Administrative Support Clerk can do so BEFORE receiving the product in the Abila system.
- 10. If the invoiced price is different than the requisition/PO price, the Administrative Support Clerk will need to correct the copy of the PO and inform the employee who made the requisition and the Director. The director will need to sign off on the corrected copy of the PO as their acknowledgement of the price change for budget purposes.
- 11. After the invoice is received in Abila, it will be given to accounts payable along with the PO, proof merchandise was received, and any other documentation included in the ordering process.
- 12. Failure to gain pre-approval releases the Agency from any obligation to reimburse said individual. Fuel for mobile unit can be obtained, as needed, without prior approval and shall be noted on the trip log.
- 13. In order to use any Agency Credit card, the director must sign a material requisition form prior to the purchase. The requisition and the receipt will be turned into the Administrative Support Clerk. A purchase order will be created and the requisition with the receipt will be attached to the PO and then recorded in the V CC files (Share-CW (M:) > Operations > Office Supply Management > V CC (Mastercard (VISA) 1163 or SMB&T Mastercard (P-Card) or Wal-Mart Community). Once all steps are completed, then it is sent to accounts payable.
- 14. Unexpected and/or minor purchases (\$20.00 and under) utilizing Petty Cash funds must also be authorized by Directors. See Petty Cash Policy.

Last Reviewed: