MIEMICHIGAN DISTRICT HEALTH DEPARTMENT CHAPTON 10 CRACT

MID-MICHIGAN DISTRICT HEALTH DEPARTMENT

An Accredited Local Public Health Department

www.mmdhd.org

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BOARD OF HEALTH
George Bailey
Bruce DeLong
Betty Kellenberger
Tom Lindeman
Sam Smith
Dwight Washington, Ph.D.

MARK W. (MARCUS) CHEATHAM Health Officer

JENNIFER MORSE, MD, MPH, FAAFP Medical Director

BOARD OF HEALTH REGULAR MEETING

At

Mid-Michigan District Health Department Clinton County Branch Office Saint Johns, Michigan

Wednesday, August 22, 2018

9:00 a.m.

AGENDA

We take action to protect, maintain, and improve the health of our community.

Pledge of Allegiance

A. AGENDA NOTES, REVIEW, AND REVISIONS:

1.

- B. CONSENT ITEMS:
 - 1. Meeting Minutes **Included**.
 - a. Michigan Association for Local Public Health (MALPH) Board of Directors Meeting held July 9, 2018
 - b. Mid-Michigan District Board of Health (BOH) Regular Meeting held July 25, 2018
 - 2. Communications
 - a. Letter dated July 20, 2018 to Liz Braddock, MS, RS from Dale Ladouceur, RS, Environmental Quality Specialist, Onsite Wastewater Program, Michigan Department of Environmental Quality (MDEQ) regarding MMDHD's annual self-assessment report of the Onsite Wastewater Treatment Management Program **Included.**
 - b. National Association of Local Boards of Health (NALBOH) NewsBrief, Summer 2018, https://nalboh.site-ym.com/general/custom.asp?page=archived_enews **Handout.**
 - c. Letter dated August 14, 2018 to Marcus Cheatham Ph.D. from Daniel J. Dettweiler, Supervisor of the Noncommunity Water Supplies Unit for the Michigan Department of Environmental

Quality (MDEQ) regarding acceptance of the agency's Corrective Action Plan (CAP) for the Noncommunity Public Water Supplies Program – **Included.**

d.

- C. PUBLIC COMMENTS:
- D. BRANCH OFFICE EMPLOYEES:
- E. COMMITTEE REPORTS:
 - 1. Finance Committee Tom Lindeman, Chair
 - a. Mid-Michigan District Health Department's (MMDHD) Expenses for July 21 through August 17, 2018 **Included**.
 - b. MMDHD's Monthly Balance Sheet, Revenue and Expenditure Report for July 2018 **Handout**.
 - c. MMDHD Marketing Our Services WNEM Contracts; Website Development Included.

d.

- 2. Personnel Committee Betty Kellenberger, Chair
 - a. Michigan Nurses Association (MNA) Contract Negotiations
 - b. Non-Union Employees' Wage Proposal Included.
 - c. Health Officer's Employment Agreement Included.

d.

- 3. Program Committee Bruce DeLong, Chair
- 4. Mid-Central Coordinating Committee Tom Lindeman, Vice Chair
- 5. Well and Septic Stakeholders Committee Marcus Cheatham

a.

- F. MEDICAL DIRECTOR'S REPORT: Jennifer E. Morse, M.D. **Included**.
 - 1. Skin Cancer

2.

- G. HEALTH OFFICER'S REPORT: Mark W. (Marcus) Cheatham, Ph.D.
 - 1. District-Wide In-Service, Friday, November 2, 2018, Agro-Liquid Fertilizers, Saint Johns, 8:30 a.m. to 4:30 p.m.
 - 2. Michigan's Premier Public Health Conference, October 9-11, 2018, Bay City, Michigan **Included.**Page 2 of 109

3.

H. OLD BUSINESS:

- 1. Draft Septic Management Ordinance Included.
- 2. Results From Statewide PFAS Water Sampling Effort for Community Water Supplies and Schools **Included.**
 - a. Tri County Area Schools PFAS Contamination
- 3. Update on Hepatitis A Outbreak Response **Included.**

4.

I. NEW BUSINESS:

- 1. My Community Dental Centers (MCDC) 2017 Annual Report: The Power of Partnerships, http://www.mydental.org/wp-content/uploads/2018/07/MCDCAnnualReport2017.pdf **Handout.**
- 2. Overview of the International Board Certified Lactation Consultant (IBCLC) Program, Angie Martin, RD, IBCLC and Jennifer Stratton, Supervisor, Community Health and Education Included.
- 3. Emerging Issues

4.

J. LEGISLATIVE ACTION:

1.

- K. INFORMATIONAL ITEMS: Included.
 - 1. Mid-Michigan District BOH Action Items, July 2018
 - 2. MMDHD Staffing Report
- L. RELATED NEWS ARTICLES AND LINKS:
 - 1. MMDHD News Articles Available Online at: https://www.mmdhd.org/?q=node/142

2.

M. AGENCY NEWSLETTERS: None



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Board of Health Synopsis of Actions Needed

tem B. 1. & 2. Motion to acce	CONSENT ITEMS (MEETING MINUTES & COMMUNICATIONS) ept and place on file Meeting Minutes B. 1. a. and b. ept and place on file Communications B. 2. a. through c.
Motion to acce	ept and place on file Meeting Minutes B. 1. a. and b.
Motion to acce	
	ent and place on file Communications B. 2. a. through c
tem F 1 a	pt and place on the communications b. 2. a. through c.
CONT E. T. G.	EXPENSES FOR JANUARY 24 THROUGH FEBRUARY 20, 2018
	rove payment of the Mid-Michigan District Health Department's Expenses for July 21 t 17, 2018, totaling \$384,422.61.
tem E. 1. b.	BALANCE SHEET, REVENUE AND EXPENDITURE REPORT FOR JULY
Motion to appr file.	rove and place the Balance Sheet, Revenue and Expenditure Report for July 2018 on
tem E. 1. c.	WEBSITE DEVELOPMENT CONTRACT
	norize M. Cheatham to enter into a contract with Inspiration Studio Designs for agency ent and logo design at a cost of \$10,950, plus \$3.00 per month for web hosting.
tem E. 2. b.	NON-UNION EMPLOYEES' WAGE PROPOSAL
Motion to appr	rove the non-union employees' wage proposal as presented.
tem E. 2. c.	HEALTH OFFICER'S EMPLOYMENT AGREEMENT
Motion to appr	rove the Health Officer's Employment Agreement as proposed.
tem F. 1.	MEDICAL DIRECTOR'S REPORT, SKIN CANCER
Motion to ador	pt the BOH Monthly Healthy Living Recommendation for September as proposed.
Motion to acce	ept and place the Medical Director's Report on file.
Item H. 1.	DRAFT SEPTIC MANAGEMENT ORDINANCE
	•

MICHIGAN ASSOCIATION FOR LOCAL PUBLIC HEALTH

(MALPH)

Board of Directors Meeting Minutes July 9, 2018

I. Call to Order

The meeting was called to order at 9:01am by Annette Mercatante, President.

II. Roll Call

A quorum was present.

Jurisdictions Represented: Barry-Eaton [Colette Scrimger], Bay [Joel Strasz], Benzie-Leelanau [Lisa Peacock], Branch-Hillsdale-St. Joseph [Rebecca Burns], Central Michigan [Steve Hall], Chippewa [Karen Senkus], Delta-Menominee [Mike Snyder], Dickinson-Iron [Daren Deyaert], District 2 [Denise Bryan], District 10 [Kevin Hughes], District 4 [Denise Bryan], Grand Traverse [Wendy Hirschenberger], Huron [Ann Hepfer], Ionia [Ken Bowen], Jackson [Richard Thoune], Kalamazoo [Jim Rutherford], Kent [Adam London], Lapeer [Kathy Haskins], Lenawee [Martha Hall], Livingston [Dianne McCormick], Luce-Mackinaw-Alger-Schoolcraft [Nick Derusha], Macomb [Bill Ridella], Marquette [Jerry Messana], Midland [Fred Yanoski], Mid-Michigan [Marcus Cheatham, Dwight Washington], Monroe [Kim Comerzan], Muskegon [Kathy Moore], Northwest Michigan [Lisa Peacock], Oakland [Tony Drautz], Shiawassee [Larry Johnson], St. Clair [Annette Mercatante]Tuscola [Ann Hepfer], Wayne [Carol Austerberry],

Others Present:

Administrative Officers Forum, [Barton Maas], Health Education and Promotion Forum, [Julie Weisbrod], Nurse Administrators Forum, [Deidre Reed], Physician's Forum, [Teresa Frankovich], MAC, [Don Vrablic], MDARD, [Kevin Besey, Sean Dunleavy, Tim Slawinski, MDEQ, [Dana DeBruyn, Ian Smith], MDHHS, [Steve Crider, Laura de la Rambelje, Orlando Todd], MDLARA, [Allyson Chirio, Brian Hanna]

Staff: Meghan Swain, Jodie Shaver

III. Approve Agenda

Motion by R. Burns, support by K. Hughes to approve the agenda. Motion carried.

IV. Approve Meeting Minutes

Motion by D. Bryan, support by R. Burns to approve the June 11, 2018 minutes. Motion carried.

V. Reports of Officers/Staff/Forums

President

Mercatante reported that nominations for the executive committee are open at this time. She presented the current list of positions available. She made a call to the board for additional nominations. There were no nominations from the floor. There is a call for a

maternal and child health funding formula workgroup. The following volunteered: B. Ridella, J. Rutherford, L. Peacock, R. Burns, and C. Austerberry. The MALPH resolution on the opposition to legalized marijuana is on the website for local health departments to use as they see fit. Motion by K. Hughes to approve the final version of the resolution, support by B. Ridella. Motion carried. She discussed that the executive committee is making recommendations to change the MALPH strategic plan to include goals of the Public Health Advisory Council, MDHHS strategic plan, and Public Health 3.0, etc. The draft product will be brought to the full board for additional input. The strategic plan will be incorporated into each board meeting. Nominations for the Roy Manty Distinguished Service, Jean Chabut Public Health Advocate, and the Public Health Community Achievement award are currently open for nomination. Please see the MALPH website for more information. She also reported that Dr. Eden Wells is reaching out to local health departments to fill in gaps of information regarding Kratom. Medical professionals or examiners may not be recording Kratom as a cause of illness or possible overdose.

Secretary/Treasurer

The financial reports from April and May are in the packet for your review. We are on track with expenses. The auditor had some final questions and those will be included in the review summary. Overall, the draft report from the auditor looks good. All dues have been paid, sans Cass Van Buren. Motion by S. Hall, support by K. Hughes to accept the financial reports.

Executive Director

M. Swain reported that she will be on vacation from July 23 – 27, 2018. The National Association of Local Boards of Health conference is August 7-10, and she will be attending. She reminded members of the training for new or recently appointed public health leaders in Rochester on July 20. The first training was done in the UP and feedback was positive. More trainings will take place around the state. Mark Miller is also working on the mentoring piece. The survey regarding the extra emergency preparedness dollars reflected that members wanted to have the money distributed to the local health departments to use as they see fit. Mary MacQueen will be in contact with your agency with more information. The legislature will not have session much this summer due to campaigning. She, along with PAA, is keeping up with legislative offices on legislation still pending. N. Britten from Berrien County will present on ACEs at the next board meeting. The registration brochure for the MPPHC should be out the beginning of August.

Lobbyist

No report at this time.

Forum Reports

Environmental Health: No report at this time.

Health Education and Promotion: J. Weisbrod reported that HEP is revising its bylaws. They have finished video review (based on national topics) to be put on the MALPH website. Priority areas for the forum include: making sure educational materials are up to date, representation on the CJS grants, and a Michigan public health endorsement for undergraduates (a collaborative project with universities), and completing a PIO survey.

Management Information System: No report given at this time.

Public Health Financing and Administration: B. Maas reported that the administrator's forum priority areas include: the annual accounting seminar in September that may include a billing component, Medicaid full cost reimbursement, and issues with EGrams.

Public Health Nursing: D. Reed reported they have updated the NAF bylaws and strategic plan. There have been a lot of retirements, and there are new people to fill those positions. Priority areas include: Hepatitis A outreach and awareness campaigns at outdoor events, record retention policy performed by the state and needed changes, and changes with the electronic medical record transitioning to new products.

Public Health Physicians: Priority areas include: meeting with Sue Moran (MDHHS), taking the Michigan State Medical Society gun violence resolution and using it as a policy as legislation emerges, Tobacco 21, and onboarding of new medical directors.

Michigan Association of Counties: The health and human services group does not meet during the summer. They will finish their legislative platform.

VI. Licensing and Regulatory Affairs (Marihuana Presentation)

B. Hanna and A. Chirio from LARA presented on their work regarding facilities licensing, tracking, and regulatory responsibilities.

VII. Reports from State Departments

Department of Agriculture and Rural Development (MDARD)

S. Dunleavy reported that they have sent LARA guidance documents regarding marijuana. FAQs will be sent out. At this time, MDARD is only providing guidance. They are looking at other states and how it has been managed. If recreational marijuana passes, MDARD may have to set up an inspection force. He will be sending a "who to call" list beyond a specific license type. They are updating 2006 Foodborne Illness memo including where to send information. It will no longer be faxed, instead sent to a mailbox that is monitored 24/7. He reported Jim Padden is replacing Sandra Walker. He stated they found errors on the record retention schedule, and they are working with MDHHS.

Department of Environmental Quality (MDEQ)

D. Debruyn reported that PFAS results will come in sometime today. There is a template letter that is in for review. Letters will go to providers and local health departments.

Information on the counties impacted will be on the MPART website. She also reported from Jeremy Hoeh regarding HBs 5752 and 5753 and a meeting on July 10 between the department and governor's office to discuss a substitute. There will be guidance issued on PA 271 (portable toilets for farms). Concern was expressed to her on passage of PA 268 (environmental permit panel) and industry having control over the permitting process of MDEQ. She also reported on an audit of the public water supply program.

Department of Health and Human Services (MDHHS)

O. Todd reported on the Hepatitis A outbreak. He also discussed PFAS public water supply testing and waiting for the data. The map on the MPART website has been updated with the new sites. There is an MPART meeting on July 24. He also reminded members of the upcoming public health law 2.0 trainings taking place around the state. Existing CJS recipients will again receive funding for projects. They are hoping to expand to other areas of the state in the future.

VIII. Public Comment / Announcements

M. Swain provided an update on the amicus brief. She is currently discussing with two different firms. She also reached out to NACCHO to see if they would be filing one similar to ASTHO and the Council of State and Territorial Epidemiologists. Typically, briefs are admitted at the appellate level, but there is nothing that precludes them from being filed at the district court level in Michigan. The cost is unknown at this time.

S. Hall announced that MCDC has hired Deborah Brown (New Jersey) as the new CEO. Keith Sherwood will remain CFO and Kim Singh will remain Director of Community and Governmental Affairs. The COO will be hired by Ms. Brown. He added that the goal is to improve the relationships with the local health departments as more of a partnership, as the mission is the same.

The meeting adjourned at 11:55am.



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MARK W. (MARCUS) CHEATHAM Health Officer

JENNIFER MORSE, MD, MPH, FAAFP Medical Director

BOARD OF HEALTH REGULAR MEETING

at

Mid-Michigan District Health Department Montcalm County Administrative Offices Stanton, Michigan

Conference Room A

Wednesday, July 25, 2018, 9:00 a.m.

MINUTES

We take action to protect, maintain, and improve the health of our community.

Members Present: Tom Lindeman, George Bailey, Betty Kellenberger; Dwight Washington (arrived at 9:16

a.m.); and Bruce DeLong, Chairperson

Members Absent: Sam Smith

Staff Present: Mark W. (Marcus) Cheatham, Ph.D., Health Officer; Melissa Bowerman, Director of

Administrative Services; Cynthia M. Partlo, Board Secretary

Staff Absent: Jennifer E. Morse, M.D., Medical Director; Liz Braddock, Director of Environmental

Health; Andrea Tabor, Director of Community Health and Education

Guests: Ross Pope, Quality Improvement Coordinator (arrived at 9:53 a.m.)

B. DeLong, Chairperson called the Regular Meeting of the Mid-Michigan District Board of Health (BOH) to order at 9:03 a.m., on Wednesday, July 25, 2018, at the Montcalm County Administrative Offices of the Mid-Michigan District Health Department (MMDHD), Stanton, Michigan.

Pledge of Allegiance was led by B. DeLong.

A. AGENDA NOTES, REVIEW, AND REVISIONS:

M. Cheatham requested that Promotion of Sara Thelen, Health Educator II to Prevention Coordinator be added to the Agenda as item E. 1. d.

Motion made by G. Bailey and seconded by B. Kellenberger to approve the Agenda as amended. Motion carried.

B. CONSENT ITEMS:

- 1. Meeting Minutes
 - a. Michigan Association for Local Public Health (MALPH) Board of Directors Meeting held June 11, 2018
 - b. Mid-Michigan District Board of Health Regular Meeting held June 27, 2018
 - c. Mid-Michigan District Board of Health Personnel Committee Meeting held July 16, 2018

Motion made by B. Kellenberger to accept and place on file Meeting Minutes B. 1. a. through c. Motion seconded by G. Bailey. Motion carried.

- 2. Communications
 - a. Letter dated July 6, 2018 to Marcus Cheatham from Orlando Todd, MBA, Director, Office of Local Health Services, Michigan Department of Health and Human Services (MDHHS) regarding Notice of Award in the amount of \$52,394 for the Cross-Jurisdictional Sharing (CJS) Grant "Local Health Department Collaboration and Exploration of Shared Approach to Delivery Services"
 - M. Cheatham said that the grant was a continuation of the original CJS grant received from the agency. The State is pleased with the work being done on the grant from all of the health departments involved.

Motion made by G. Bailey to accept and place on file Communications B. 2. a. Motion seconded by B. Kellenberger. Motion carried.

- E. PUBLIC COMMENTS: None.
- F. BRANCH OFFICE EMPLOYEES: None.
- G. COMMITTEE REPORTS:
 - 1. Finance Committee Tom Lindeman, Chair
 - a. MMDHD's Expenses for June 23 through July 20, 2018

Motion made by T. Lindeman to pay the MMDHD's Expenses for June 23 through July 20, 2018, totaling \$448,503.74. Motion seconded by B. Kellenberger. Motion carried.

b. MMDHD's Monthly Balance Sheet, Revenue and Expenditure Report for June 2018

Motion made by T. Lindeman to approve and place on file the MMDHD's Monthly Balance Sheet, Revenue and Expenditure Report for June 2018. Motion seconded by B. Kellenberger. Motion carried.

c. Adding Signatory to Agency Bank Accounts

Motion made by T. Lindeman and seconded by G. Bailey to authorize L. Braddock to be added as a signatory to all of the agency's bank accounts. Motion carried.

d. Promotion of Sara Thelen, Health Educator II to Prevention Coordinator

Motion made by T. Lindeman and seconded by B. Kellenberger to approve the promotion of Sara Thelen to Prevention Coordinator, retroactive to April 29, 2018 and authorize B. DeLong to sign the Letter of Understanding with the Teamsters Local 214 as proposed. Motion carried.

- 3. Personnel Committee Betty Kellenberger, Chair
 - a. Michigan Nurses Association (MNA) Contract Negotiations
 - B. Kellenberger reported that the initial meeting was held. She said additional meetings were scheduled for August 8 and 29 at 8:30 a.m. at the Clinton Branch Office, Saint Johns. M. Cheatham added that the agency and MNA are far apart on wages; and MNA also expressed concern regarding scheduling the clinics for maximum efficiency. He said that their contract states that that if they have operational concerns; they can call a special conference with Administration; and they have done so. G. Bailey commented that private sector salaries are increasing due to the good economy where government employees' salaries are not because the tax revenue is not increasing at the same level.
- 4. Program Committee Bruce DeLong, Chair No report.
- 5. Mid-Central Coordinating Committee Tom Lindeman, Vice Chair No report.
- 6. Well and Septic Stakeholders Committee Marcus Cheatham
 - M. Cheatham provided an update regarding the Well and Septic Stakeholders Committee, stating that the Committee reviewed a draft of the septic management regulations and requested edits. M. Cheatham added that the Committee presented the concept to the Gratiot County Board of Commissioners on July 17th. A meeting has been scheduled with Clinton County on July 31st, and because of the upcoming election, the Montcalm County Administrator has asked that we present the draft regulations at their Board of Commissioners meeting on August 27, 2018. B. DeLong mentioned that Ryan Wood, Administrator sent the draft to the Clinton County Townships for their review and feedback.
- F. MEDICAL DIRECTOR'S REPORT: Jennifer E. Morse, M.D.; M. Cheatham reported in Dr. Morse's absence.
 - 1. Second-Hand Vape
 - M. Cheatham said that he had received a request from the director of one of the Great Start Collaboratives to write an article on second-hand vaping. The director agreed to share the article on their website with other Great Start Collaboratives within the State. Dr. Morse used the article for her BOH report.

M. Cheatham explained that there are two main kinds of chemicals used to hold the nicotine in the vaping liquid: propylene glycol and glycerol. He said when burned, glycerol turns into propylene oxide, which has been found to cause cancer. Other concerning harmful chemical particles are found in the vapor and can be absorbed through the body of infants and young children when the particles settle on surfaces long after the e-cigarette was used. These children can experience long-term consequences to brain development potentially leading to anxiety disorders. Many calls have been received by poison control centers reporting children less than two years of age being exposed to e-cigarettes or e-cigarette liquids (burns, seizures, lactic acidosis, anoxic brain injury, and death).

M. Cheatham recommended the following be adopted as the BOH Monthly Healthy Living Recommendation for August:

- 1. Second- and third-hand vaping is not harmless and all the harms at this time are not known.
- 2. E-cigarettes and e-cigarette liquid should be kept out of reach of children as they can be a risk.
- 3. E-cigarette use by children and teens must be discouraged as it increases their likelihood of cigarette use.

Motion made by G. Bailey and seconded by B. Kellenberger to adopt the monthly BOH recommendation for August as proposed. Motion carried.

- G. HEALTH OFFICER'S REPORT: Mark W. (Marcus) Cheatham, Health Officer, Ph.D.
 - 1. FY 17/18 Quarterly Service Report (QSR), Third Quarter (April 1-June 30, 2018)

M. Cheatham reviewed the QSR for the third quarter of FY 17/18 indicating that tracking has been added for the International Board Certified Lactation Consultants (IBCLC) Program. He reported that services in Women, Infants, and Children (WIC), Family Planning (FP), and Immunizations (IMMS) were down; however, CSHCS, Hearing/Vision, and Fluoride Varnish were trending up.

For Environmental Health, M. Cheatham reported that the number of restaurant inspections was looking better than last year. Septic and well permits were on par with last year. Additionally, vacant land permits were at 413 for this year versus 130 for last fiscal year. He said that it was due in part to more residents building homes (improved economy), as well as better data collection with the new Hedgehog software.

2. Employee Survey Results

M. Cheatham reviewed the results of the Employee Survey, noting that last year, the survey was not conducted. The results showed that for the Agency Leadership questions, the responses decreased from prior years. For Agency Awareness, some of the results were at an all-time low. Regarding Strategic Planning, most of the results were good. Responses for Quality Improvement questions were all lower than prior years. He reported that Staff Focus responses were mixed with two areas holding steady and several lower than in prior years. M. Cheatham mentioned that the agency has had a lot of staff turnover, so new employees that might not know the answers to questions could be influencing the results. Regarding communication, M. Cheatham said that the leadership has been working on improvements, e.g., mini district-wide. He said that having two district-wide meetings a year instead of one might improve

communication and listening. He also said after Management Team meetings, management will send out a summary email to staff monthly (no attachment to open) updating staff.

3. Grant Update

M. Cheatham reviewed the grant update.

H. OLD BUSINESS:

1. Update on Hepatitis A Outbreak Response

M. Cheatham provided an update regarding the agency's Hepatitis A outbreak response stating that on July 31, 2018 the health department would be going to the suboxone clinic in Saint Johns to immunize their staff and patients. Handwashing stations were set up at the Carnival of Chaos at Moreland's Motocross in Montcalm County, as well as information distributed regarding Hepatitis A and how to get vaccinated.

2. MMDHD Rebranding Update

R. Pope provided an update regarding the agency's rebranding efforts stating that data collection was completed for the four surveys conducted (community partner, public, client, and staff). The committee will compile viable recommendations to move forward on through the month of August and prioritize them into short and long-term goals. Leslie Kinnee has received quotes regarding the website and logo redesigns. He indicated that a full rebranding report should be available by the end of August.

3. Ithaca Sanitary Landfill Investigation

M. Cheatham provided an update to the BOH regarding the Ithaca Sanitary Landfill investigation indicating that leather scraps from Wolverine Worldwide were dumped in the landfill. The MDEQ is investigating for possible contamination and plans to install six monitoring wells by September with testing to begin thereafter. He said he would keep the BOH updated regarding the test results.

D. Washington commented that some members of the Clinton County Parks and Recreation had expressed concern regarding PFAS in Clinton County. M. Cheatham mentioned that he could attend one of their upcoming meetings to discuss PFAS.

4. Agency Office Hours Proposal

M. Cheatham explained the proposal to change the posted office hours for the agency from 8 a.m. to 5 p.m. to now be 8 a.m. to 4:30 p.m. He clarified that posted hours are defined as when the doors will be open, although staff may be working hours different than the posted office hours. B. DeLong asked if the offices will be open during lunch. M. Bowerman mentioned that there will be one half hour when the agency would be closed – either 12 p.m. to 12:30 p.m. or from 12:30 p.m. to 1 p.m. M. Cheatham also mentioned that in the Community Health and Education Division, early and late clinics would continue to be held to serve the needs of the residents, although not necessarily posted on the building. The new hours and clinic schedules can be found on the agency's website, www.mmdhd.org, Community Health, Clinic Schedules.

Motion made by. G. Bailey and seconded by B. Kellenberger to approve the proposal to change the agency's office hours to 8 a.m. to 4:30 p.m., open one half hour at lunch as presented. Motion carried.

I. NEW BUSINESS:

1. Statewide PFAS Water Sampling Effort for Community Water Supplies and Schools

M. Cheatham explained the State's efforts to conduct PFAS water sampling in the schools and community water supplies. He reviewed the progress of the sampling indicating MDEQ was working in counties from the south to the north.

2. Montcalm County Resource Recovery Agreement

M. Cheatham explained that Montcalm County was interested in contracting again with the agency for resource recovery services for FY 18/19. However, he indicated that there was discussion in the Solid Waste Committee to consider submitting the resource recovery services out for bid. He said that the funding was critical to the agency as it supports one half of an Environmental Health Specialist's time. He reported that the Agreement expires September 30, 2018, and was hopeful to have a new Agreement in place by then.

- 3. Emerging Issues None.
- J. LEGISLATIVE ACTION: None.
- K. INFORMATIONAL ITEMS:
 - 1. Mid-Michigan District Board of Health Action Items, June 2018
 - 2. Staffing Report
- L. RELATED NEWS ARTICLES AND LINKS:
 - 1. MMDHD News Articles Available Online at: http://mmdhd.org/?q=node/141
- M. AGENCY NEWSLETTERS: None

There being no further business to come before the Board, the meeting adjourned at 10:03 a.m.

Respectfully Submitted,

Cynthia M. Partlo, Board Secretary For Bruce DeLong, Chairperson

Mid-Michigan District Board of Health



STATE OF MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY LANSING



July 20, 2018

Ms. Liz Braddock, M.S., R.S. Environmental Health Division Director Mid-Michigan District Health Department 615 North State Street Stanton, Michigan 48888-9702

Dear Ms. Braddock:

SUBJECT: Annual Self-Assessment of the Onsite Wastewater Treatment Management Program

This is to acknowledge receipt and acceptance by the Department of Environmental Quality (DEQ) of the annual self-assessment as completed by the Mid-Michigan District Health Department (MMDHD). The annual self-assessment was submitted in accordance with Section VI, Onsite Wastewater Treatment Management Program (OWTMP) of the Michigan Local Public Health Accreditation Program and the findings of our review are discussed in this correspondence.

The annual self-assessment report from MMDHD was received on January 16, 2018, and the initial review was conducted on April 16, 2018. The review was completed on June 5, 2018 after meeting with Mr. Lonnie Smith, R.S, of MMDHD at the Clinton Branch Office. During the meeting, it was conveyed that the DEQ agreed with your agency findings of compliance being "Met" for all Indicators. The review findings for several of the Indicators were discussed in detail during the meeting and pertinent comments are reiterated below.

<u>Indicator 2.1 – Site Evaluation Documentation:</u>

The agency self-assessment reported 88 percent compliance. The DEQ review resulted in agreement with the agency findings.

<u>Indicator 2.2 – Sewage Permit Documentation:</u>

The agency self-assessment reported 87 percent compliance. The DEQ review resulted in agreement with the agency findings.

<u>Indicator 2.3 – Organized Filing System:</u>

The agency self-assessment reported technology upgrades have implemented with permitting software to electronically manage all site evaluations, permits and inspections. The DEQ commends MMDHD in their efforts to explore and utilize available programs for document retention and data management for the Onsite Wastewater Program.

Ms. Liz Braddock Page 2 July 20, 2018

<u>Indicator 3.1 – Final Inspection Documentation:</u>

The agency self-assessment reported 97 percent compliance. The DEQ review resulted in agreement with the agency findings. Great staff consistency was demonstrated with this indicator and achieving 97 percent compliance is commendable.

In closing, thank you for participating in the self-assessment review option. The DEQ appreciates the efforts of MMDHD in the pursuit of ongoing quality assurance in this Program. The DEQ further recognizes Lonnie Smith as the key staff person within your agency assigned with the responsibility for implementing activities integral to the self-assessment process. The efforts of you and your staff have demonstrated excellent work in the OWTMP through oversite, monitoring, and reporting as part of the annual self-assessment and your involvement represents a commitment to ongoing quality assurance on behalf of your agency.

If you require further information, please contact me at 517-284-6534; ladouceurd@michigan.gov; or DEQ, Drinking Water and Municipal Assistance Division, P.O. Box 30817, Lansing, Michigan 48909-8311.

Sincerely,

Dale R. Ladouceur, R.S.

Environmental Quality Specialist

Onsite Wastewater Program

Environmental Health Programs Unit

Drinking Water and Municipal Assistance

Division 517-284-6534

cc: Mr. Marcus Cheatham, Health Officer, MMDHD

Mr. Lonnie Smith, EH Supervisor, MMDHD

Mr. Jeremy Hoeh, DEQ



STATE OF MICHIGAN DEPARTMENT OF ENVIRONMENTAL QUALITY LANSING



August 14, 2018

Marcus Cheatham, Ph.D. Health Officer Mid-Michigan District Health Department 615 North State Road, Suite 2 Stanton, Michigan 48888

Dear Dr. Cheatham:

SUBJECT: Noncommunity Public Water Supplies Program

Corrective Action Plan (CAP)

The Michigan Department of Environmental Quality (DEQ), Drinking Water and Municipal Assistance Division (DWMAD), has received the CAP for the Noncommunity Public Water Supplies Program for the Mid-Michigan District Health Department (MMDHD).

The CAP effectively addresses each of the concerns that the DEQ outlined in our report from the Fiscal Year 2017 annual evaluation. Taking the steps outlined in the CAP should bring the MMDHD into compliance with the DEQ's Minimum Program Requirements.

Thank you and your staff for preparing this CAP and for your continuing support of Michigan's drinking water supply program.

If you have any questions, please contact Mr. Connor Wickham, Noncommunity Water Supplies Unit, Environmental Health Section, DWMAD, at 517-388-9124; wickhamc@michigan.gov; or you may contact either of us by mail at DEQ, P.O. Box 30817, Lansing, Michigan, 48909-8311.

Sincerely.

Daniel J. Dettweiler, Supervisor Noncommunity Water Supplies Unit Environmental Health Section

Drinking Water and Municipal Assistance Division

dd/sw

cc: Ms. Liz Braddock, Environmental Health Director, MMDHD

Mr. Duane Schneider, Noncommunity Program Coordinator, MMDHD

Ms. Dana DeBruyn, DEQ Mr. Connor Wickham, DEQ

MONTHLY EXPENSES FOR July 21, 2018 - August 17, 2018

EV 1878 \$ 178,251.84

EV 1879 \$ 206,170.77

TOTAL \$ 384,422.61

Mid-Michigan District Health Department 615 North State Street, Suite 2 Stanton MI 48888 (989) 831-5237

СК#	EV 1878	_	8/3/2018
	Payables		
104401			
to 104423	Quantum Checks & AP Direct Deposits	\$	42,193.28
	Payroll		
	AFLAC Employee Deduction	\$	585.49
	MERS Employee Electronic Transfer	\$	3,403.79
	Chemical Bank Payroll-Ameriprise NBS	\$	200.00
	Chemical Bank Payroll-Nationwide	\$	1,230.00
	Chemical Bank Payroll-MERS 457	\$	515.00
	Chemical Bank Payroll Tax Electronic Trans	sfer	
	Federal	\$	27,396.82
	State	\$	4,356.32
	Direct Deposit Payroll	\$	96,627.14
	State of Michigan Unemployment 3Q2		1,744.00
	TOTAL	\$:	178,251.84

ACCOUNTS PAYABLE CHECK REGISTER

CHECK	CHECK\VOID	REMIT-TO NAME	INVOICE	INVOICE			,	AMOUNT	DISC	OUNT	CHECK
NO 	DATE 	VENDOR-# 	NO 	DATE				PAID		TAKEN	AMOUNT
235 08/	03/18 KEL038 KI	ELLENBERGER BETTY	101247 JULY PER	07/25/1 DIEM/TRA\	.8 17539 /EL		\$	241.73	\$	-	\$ 241.73
DIRECT	DEPOSIT		СНЕСК ТС	OTALS:			\$	241.73	\$	-	\$ 241.73
236 08/	03/18 LIN033 LI	NDEMAN TOM	101246 JULY PER	07/25/1 DIEM/TRA\	.8 17538 ⁄EL		\$	78.08	\$	-	\$ 78.08
DIRECT	DEPOSIT		СНЕСК ТС	OTALS:			\$	78.08	\$	-	\$ 78.08
237 08/	03/18 WASH83	WASHINGTON DWIGHT	101248 JULY PER	07/25/1 DIEM/TRA\	.8 17540 ⁄EL		\$	174.70	\$	-	\$ 174.70
DIRECT	DEPOSIT		CHECK TO	OTALS:			\$	174.70	\$	-	\$ 174.70
104401	08/03/18 ADAN	179 ADAMS OUTDOOR ADVERTISING		018 07/2 POSTERS-4	-	7	\$	1,250.00	\$	-	\$ 1,250.00
COMPU	TER CHECK		CHECK TO	OTALS:			\$	1,250.00	\$	-	\$ 1,250.00
104402	08/03/18 CAPOS	95 CAPITAL AREA UNITED WAY	101249 8/3/18 EN	08/03/1 MPLOYEE D	.8 17546 ONATION		\$	32.00	\$	-	\$ 32.00
COMPU	TER CHECK		CHECK TO	OTALS:			\$	32.00	\$	-	\$ 32.00
104403	08/03/18 CDW0	116 CDW GOVERNMENT, INC.	NJC8869 OFFICEJE	07/10/ T MOBILE P	18 17535 0 RINTER	95537-00	\$	265.99	\$	-	\$ 265.99
COMPU	TER CHECK		NJQ4095 APC 1500	07/12/ RACK MOU	'18 17534 (JNT)95538-00	\$	766.62	\$	-	\$ 766.62
			CHECK TO	OTALS:			\$	1,032.61	\$	-	\$ 1,032.61
104404	08/03/18 CENO2	21 CENTRAL MI DIST HEALTH DEPT	101242 JUNE MD		.8 17516		\$	4,145.72	\$	-	\$ 4,145.72
COMPU	TER CHECK		CHECK TO	OTALS:			\$	4,145.72	\$	-	\$ 4,145.72
104405	08/03/18 COH0	03 COHL, STOKER & TOSKEY	48963 JUNE LEG	07/11/1 AL	8 17518		\$	1,072.50	\$	-	\$ 1,072.50
COMPU	TER CHECK		48964 JUNE LEG	07/11/1 AL 1830.00			\$	171.00	\$	-	\$ 171.00
			CHECK TO	OTALS:			\$	1,243.50	\$	-	\$ 1,243.50
		78 COVENANT MEDICAL CENTER	101243 21654 LA		8 17524		\$	42.84	\$	-	\$ 42.84
COMPU	TER CHECK		101244 20940 LA		8 17525		\$	58.60	\$	-	\$ 58.60

CHECK TOTALS:

76.98 \$

76.98

COMPUTER CHECK

ACCOUNTS PAYABLE CHECK REGISTER

CHECK CHECK\VOID REMIT-TO NAME NO DATE VENDOR-#	INVOICE INVOICE VOUCH# P.ONO NO DATE	AMOUNT PAID	DISCOUNT TAKEN	CHECK AMOUNT
104416 08/03/18 SHR011 SHRED-IT USA LLC	8125149719 07/15/18 17520 CBO/GBO SHREDDING	\$ 217.62	\$ -	\$ 217.62
COMPUTER CHECK	CHECK TOTALS:	\$ 217.62	\$ -	\$ 217.62
104417 08/03/18 SPE210 SPECTRUM HEALTH HEALTHIER	1587 07/25/18 17529 ERIN MORGAN	\$ 65.00	\$ -	\$ 65.00
COMPUTER CHECK	CHECK TOTALS:	\$ 65.00	\$ -	\$ 65.00
104418 08/03/18 STA225 STATCOURIER	1019-895 06/30/18 17517 JUNE LAB COURIER FEES	\$ 800.00		\$ 800.00
COMPUTER CHECK	CHECK TOTALS:	\$ 800.00	\$ -	\$ 800.00
104419 08/03/18 UNI001 UNITED WAY OF MONTCALM CO	101249 08/03/18 17548 8/3/18 EMPLOYEE DONATION	\$ 93.00	\$ -	\$ 93.00
COMPUTER CHECK	CHECK TOTALS:	\$ 93.00	\$ -	\$ 93.00
104420 08/03/18 UNI009 UNITED WAY OF GRATIOT CO	101249 08/03/18 17547 8/3/18 EMPLOYEE DONATION	\$ 56.00	\$ -	\$ 56.00
COMPUTER CHECK	CHECK TOTALS:	\$ 56.00	\$ -	\$ 56.00
104421 08/03/18 UPS002 UNITED PARCEL SERVICE	423867268 06/30/18 17543 FOOD/CSHCS PACKAGES	\$ 19.61	\$ -	\$ 19.61
COMPUTER CHECK	423867288 07/14/18 17541 CD PACKAGE	\$ 7.40	\$ -	\$ 7.40
	423867298 07/21/18 17542 CD PACKAGE-EXTRA CHARGE	\$ 0.07	\$ -	\$ 0.07
	CHECK TOTALS:	\$ 27.08	\$ -	\$ 27.08
104422 08/03/18 WINN73 WINN TELECOM	2458519 07/15/18 17512 7/15-8/14 PHONE LINES/LONG DISTANCE	\$ 2,520.24	\$ -	\$ 2,520.24
COMPUTER CHECK	CHECK TOTALS:	\$ 2,520.24	\$ -	\$ 2,520.24
104423 08/03/18 WNEM90 WNEM TV5	877250-2 06/30/18 17521 HEP A ADVERTISING	\$ 6,000.00	\$ -	\$ 6,000.00
COMPUTER CHECK	877628-2 06/30/18 17522 FAMILY PLANNING ADVERTISING	\$ 4,000.00	\$ -	\$ 4,000.00
23 COMPUTER CHECKS 0 MANUAL PAYMENT CHECKS 0 VOID CHECKS - TRX 0 VOID CHECKS - STUBS 0 VOID CHECKS - ERROR 0 VOID CHECKS - FORM ALIGNMENT 3 DIRECT DEPOSITS 26 CHECKS TOTAL	BANK CODE TOTALS:	\$42,193.28	\$ -	\$42,193.28
		4.0.00.00		4.0.00.00

COMPANY TOTALS:

Page 22 of 109

\$42,193.28 \$ - \$42,193.28

Mid-Michigan District Health Department 615 North State Street, Suite 2 Stanton MI 48888 (989) 831-5237

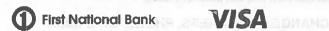
СК#	EV	1879			8/17/2018
	Payables				
104424					
to 104458		Quantum Checks & AP Direct Deposits		\$	47,858.44
	Payroll				
		AFLAC Employee Deduction		\$	585.49
		MERS Employee Electronic Transfer			3,412.43
		Chemical Bank Payroll-Ameriprise NBS		\$	200.00
		Chemical Bank Payroll-Nationwide		\$ \$ \$	1,280.00
		Chemical Bank Payroll-MERS 457		\$	515.00
		Chemical Bank Payroll Tax Electronic Transfer			
		Federal		\$	28,177.94
		State			4,468.02
		MERS Employer Electronic Transfer	18-Jun	\$ \$ \$	22,253.06
		Direct Deposit Payroll		\$	97,425.05
	Bank Fees				
		Chemical Bank Interest	18-Jul	\$	(4.66)
	TOTAL			\$	206,170.77

RUN DATE: AUG 14, 2018 - 13:56	Mid Michigan District Health Department		PAGE 0002
	ACCOUNTS PAYABLE CHECK REGISTER		
CHECK CHECK\VOID REMIT-TO NAME NO DATE VENDOR-#	INVOICE INVOICE VOUCH# P.ONO NO DATE	AMOUNT DISCOUNT PAID TAKEN	CHECK AMOUNT
104435 08/17/18 KEN014 KENT COUNTY HEALTH DEPART	EH073118-55555 08/03/18 17575 WATER LABS	\$ 1,804.00 \$ -	\$ 1,804.00
COMPUTER CHECK	CHECK TOTALS:	\$ 1,804.00 \$ -	\$ 1,804.00
104436 08/17/18 KEN051 KENT COUNTY MANAGEMENT	9418787 08/02/18 17567 095484-00 EH BANKER BOXES	\$ 309.40 \$ -	\$ 309.40
COMPUTER CHECK	CHECK TOTALS:	\$ 309.40 \$ -	\$ 309.40
104437 08/17/18 MAL033 MALEHA	1616 08/13/18 17579 LIZ JOHN-BRADDOCK	\$ 300.00 \$ -	\$ 300.00
COMPUTER CHECK	CHECK TOTALS:	\$ 300.00 \$ -	\$ 300.00
104438 08/17/18 MAL054 MALPH-ADMINSITRATORS FORUI	Л 1614 08/07/18 17583 DAWN WADLE	\$ 50.00 \$ -	\$ 50.00
COMPUTER CHECK	101255 08/08/18 17580 MELISSA BOWERMAN	\$ 50.00 \$ -	\$ 50.00
	101256 08/08/18 17581 SARAH DOAK	\$ 50.00 \$ -	\$ 50.00
	101257 08/08/18 17582 TRACEY LARABEL	\$ 40.00 \$ -	\$ 40.00
	CHECK TOTALS:	\$ 190.00 \$ -	\$ 190.00
104439 08/17/18 MER016 MERCK & CO INC	7011883635 07/10/18 17553 095532-00 20 DOSES GARDASIL VACCINE	\$ 3,855.64 \$ -	\$ 3,855.64
COMPUTER CHECK	CHECK TOTALS:	\$ 3,855.64 \$ -	\$ 3,855.64
104440 08/17/18 MIC006 MICHIGAN DEPT OF AGRICULTUR	791-10353703 06/21/18 17573 DISTRICT WIDE FOOD FEES	\$ 7,509.00 \$ -	\$ 7,509.00
COMPUTER CHECK	CHECK TOTALS:	\$ 7,509.00 \$ -	\$ 7,509.00
104441 08/17/18 MIC007 MICHIGAN PUBLIC HEALTH INST	53861 08/13/18 17577 JENNIFFER EFAW	\$ 190.00 \$ -	\$ 190.00
COMPUTER CHECK	JENNIFFER EFAW		
104441 08/17/18 MICO07 MICHIGAN PUBLIC HEALTH INST	53864 08/13/18 17578 MEGAN SCHULZ	\$ 190.00 \$ -	\$ 190.00
	CHECK TOTALS:	\$ 380.00 \$ -	\$ 380.00
104442 08/17/18 MISO04 MISDU-MONTCALM CO FRIEND	101258 08/14/18 17585 8/17/18 EMPLOYEE DEDUCTION	\$ 197.47 \$ -	\$ 197.47
COMPUTER CHECK	CHECK TOTALS:	\$ 197.47 \$ -	\$ 197.47

RUN DATE: AUG 14, 2018 - 13:56	Mid Michigan District Health Department			PAGE 0004
	ACCOUNTS PAYABLE CHECK REGISTER			
CHECK CHECK\VOID REMIT-TO NAME NO DATE VENDOR-#	INVOICE INVOICE VOUCH# P.ONO NO DATE	AMOUNT PAID	DISCOUNT TAKEN	CHECK AMOUNT
104454 08/17/18 WGLM93 WGLM AM-FM COMPUTER CHECK	18060159-180701 07/31/18 17569 JULY HEP A ADVERTISING	\$ 720.00	\$ -	\$ 720.00
COMPORTING TEXT	CHECK TOTALS:	\$ 720.00	\$ -	\$ 720.00
104455 08/17/18 WJSZ92 WJSZ-FM	1870017792 08/01/18 17568 JULY HEP A ADVERTISING	\$ 1,950.00	\$ -	\$ 1,950.00
COMPUTER CHECK	CHECK TOTALS:	\$ 1,950.00	\$ -	\$ 1,950.00
104456 08/17/18 WMLM91 WMLM-AM	1870008475 08/01/18 17570 JULY HEP A ADVERTISING	\$ 693.00	\$ -	\$ 693.00
COMPUTER CHECK	CHECK TOTALS:	\$ 693.00	\$ -	\$ 693.00
104457 08/17/18 WNEM90 WNEM TV5	877250-3 07/31/18 17560 HEP A ADVERTISING	\$ 6,000.00	\$ -	\$ 6,000.00
COMPUTER CHECK	877628-3 07/31/18 17561 095449-00 FAMILY PLANNING ADVERTISING	\$ 5,666.62	\$ -	\$ 5,666.62
	CHECK TOTALS:	\$11,666.62	\$ -	\$11,666.62
104458 08/17/18 FIR003 FIRST NATIONAL BANK OMAHA	101252 08/02/18 17571 LUNCH/PAGER/HOTEL REFUND/MEMORIAL	\$ 49.11	\$ -	\$ 49.11
COMPUTER CHECK	CHECK TOTALS:	\$ 49.11	\$ -	\$ 49.11
	BANK CODE TOTALS:	\$47,858.44	\$ -	\$47,858.44
35 COMPUTER CHECKS 0 MANUAL PAYMENT CHECKS 0 VOID CHECKS - TRX 0 VOID CHECKS - STUBS 0 VOID CHECKS - ERROR 0 VOID CHECKS - FORM ALIGNMENT 0 DIRECT DEPOSITS 35 CHECKS TOTAL				

COMPANY TOTALS:

\$47,858.44 \$ - \$47,858.44



2253

MID MICHIGAN DIST HEALTH MELISSA BOWERMAN 615 N STATE ST STE 2 STANTON MI 48888-9702

46405 S408

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Account Number:

New Balance: \$7,573.33 Minimum Payment Due: \$151.00

Payment Due Date: September 1, 2018

Make checks payable to First National Bank Omaha

Amount of Payment Enclosed



Change of Address? If yes, please complete reverse side.

PLEASE DETACH HERE AND RETURN TOP PORTION WITH YOUR PAYMENT

Business Edition® Visa®

Account Number:

Page 001 of 001



Account Summary

Previous Balance	\$8,486.05
Payments	\$8,486.05
Other Credits	
Purchases	+\$8,345.13
Balance Transfers	+\$0.00
Cash Advances	
Fees Charged	
Interest Charged	
New Balance	
Statement Closing Date .	08/02/18
Days in Billing Cycle	31
the second	
Total Credit Limit	
Available Credit	
Cash Limit	\$6,000.00
Available Cash	\$4,426.00



Payment Information

New Balance	\$7,573.33
Minimum Payment Due	
Past Due Amount	
Payment Due Date	September 1, 2018

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communications Device for the Deaf: 1-800-925-2833)

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Transaction Detail

Trans Date 7-05	Post Date 7-05	Reference Number 74418008186007186036658	Transaction Description ONLINE PAYMENT THANK YOU	Credits (CR) and Debits \$8,486.05 (CR)
7-10	7-11	24692168191100842169794 1	VISTAPR*VistaPrint.com 866-8936743 MA	\$65.71
7-11	7-11	24692168192100990149829 7	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA	\$1,498.00
7-11	7-12	244450081936000566957117	USPS.COM POSTAL STORE 800-782-6724 MO	\$5,992.05
7-12	7-13	246921681931009609698337	STAMPS.COM 855-608-2677 CA	\$89.97
7-12	7-16	246921681941004076320921	UNITED 0167162891147 800-932-2732 TX	\$692.60
7-13	7-16	74692168194100366960281	GAYLORD PALMS HOTEL FL 866-435-7627 FL	\$771.80 (CR)
7-20	7-23	24692168201100231365647 1	GAYLORD PALMS HOTEL FL 866-435-7627 FL	\$6.80

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

(v) Variable Rate (f) Fixed Rate

Charge Summary	Annual Percentage Rate (APR)	Special Offer or Eligible Purchase APR Expiration Date	Balance Subject to Interest Rate	Days Rate Used	Interest Charge
Purchases	15.99% (v)	N/A	\$6,225.60	31	\$0.00
Cash Advance	27.11% (v)	N/A	\$0.00	31	\$0.00

2018 Total Year-to-Date

Total fees charged in 2018	\$0.00
Total local straight at the little straight and the straight at the straight a	+-1
Total interest charged in 2018	\$0.00

Additional Information Regarding Your Account

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2253

MID MICHIGAN DIST HEALTH ANDREA TABOR 615 N STATE ST STANTON MI 48888-9702

46403

լիկնելիալիլՍՍԿ-իԱկիրթիրացնինին ինձակների

Account Number: New Balance: Minimum Payment Due: \$10.00 Payment Due Date: September 1, 2018

Make checks payable to First National Bank Omaha

Amount of Payment Enclosed

Change of Address? If yes, please complete reverse side.

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Business Edition® Visa®

Account Number:

Page 001 of 001



Account Summary

Previous Balance	\$191.49
Payments	\$191.49
Other Credits	\$0.00
Purchases	+\$31.11
Balance Transfers	+\$0.00
Cash Advances	+\$0.00
Fees Charged	+\$0.00
Interest Charged	+\$0.00
New Balance	
Statement Closing Date	
Days in Billing Cycle	31
Total Credit Limit	\$2,000.00
Available Credit	\$1,968.00
Cash Limit	\$0.00
Available Cash	



Payment Information

New Balance	\$31.11
Minimum Payment Due	
Past Due Amount	. \$0.00
Payment Due Date September	1, 2018

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Transaction Detail

Trans Date 7-05	Post Date 7-05	Reference Number 74418008186007186036633	Transaction Description ONLINE PAYMENT THANK YOU	Credits (CR) and Debits \$191.49 (CR)
7-25	7-26	24445008206300409860741	TWISTED ROOSTER GRAND RAPIDS MI	\$31.11

Your Annual Percentage Rate (APR) is the annual interest rate on your account. (v) Variable Rate (f) Fixed Rate

Charge Summary	Annual Percentage Rate (APR)	Special Offer or Eligible Purchase APR Expiration Date	Balance Subject to Interest Rate	Days Rate Used	Interest Charge
Purchases	15.99% (v)	N/A	\$21.55	31	\$0.00
Cash Advance	27.11% (v)	N/A	\$0.00	31	\$0.00

2018 Total Year-to-Date

Total fees charged in 2018	\$0.00
Total interest charged in 2018	\$0.00

Additional Information Regarding Your Account

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MID MICHIGAN DIST HEALTH MARCUS W CHEATHAM 615 N STATE ST STANTON MI 48888-9702

46404 540A

իրիայրիկիկիդրիլինինուրկնակունքնյանկիսինյանույիլ

Account Number: New Balance:

.. \$90.40

Minimum Payment Due: \$10.00 Payment Due Date: September 1, 2018

Make checks payable to First National Bank Omaha

Amount of Payment Enclosed

Change of Address? If yes, please complete reverse side.

PLEASE DETACH HERE AND RETURN TOP PORTION WITH YOUR PAYMENT

Business Edition® Visa®

Account Number:

Page 001 of 001



Account Summary

0000	
Previous Balance	
Payments	\$37.68
Other Credits	\$0.00
Purchases	+\$90.40
Balance Transfers	+\$0.00
Cash Advances	+\$0.00
Fees Charged	
Interest Charged	
New Balance	\$90.40
Statement Closing Date	08/02/18
Days in Billing Cycle	31
Total Credit Limit	\$2,000.00
Available Credit	\$1,909.00
Cash Limit	\$0.00
Available Cash	\$0.00



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Payment Information

New Balance	\$90.40
Minimum Payment Due	
Past Due Amount	
Payment Due Date September	1, 2018

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Transaction Detail

Trans Date 7-05	Post Date 7-05	Reference Number 74418008186007186036641	Transaction Description ONLINE PAYMENT THANK YOU	Credits (CR) and Debits \$37.68 (CR)
7-12	7-16	24121578194000193120537 2	NAVY-MARINE CORPS RELI 703-6964904 VA	\$40.00
7-31	8-01	246921682121002365426767	AMERICAN MESSAGING 888-247-7890 TX	\$50,40

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

(v) Variable Rate (f) Fixed Rate

Charge Summary	Annual Percentage Rate (APR)	Special Offer or Eligible Purchase APR Expiration Date	Balance Subject to Interest Rate	Days Rate Used	Interest Charge
Purchases	15.99% (v)	N/A	\$35.85	31	\$0.00
Cash Advance	27.11% (v)	N/A	\$0.00	31	\$0.00

2018 Total Year-to-Date

Total fees charged in 2018	\$0.00
Total interest charged in 2018	\$0.00

Additional Information Regarding Your Account

An Easier Way to Pay Your Bills!

Tired of writing checks and spending money on stamps every time you pay a bill? Pay your recurring monthly bills automatically with your credit card! No hassle. No forgetting to send a payment for phone, internet, even utilities. And, no worries about your payment being lost or intercepted in the mail. It's quick and convenient. Start paying your monthly bills with your credit card today!



MID MICHIGAN DIST HEALTH MARI E JOHN-BRADDOCK 615 N STATE ST STANTON MI 48888-9702

52320 S408

գինվորդոնիկիներինիումիկիունդեսներիունիներիկիներիների

Account Number: New Balance: \$0.00 Minimum Payment Due: \$0.00 Payment Due Date: September 1, 2018 Make checks payable to First National Bank Omaha

Change of Address? If yes, please complete reverse side.

Amount of Payment Enclosed

PLEASE DETACH HERE AND RETURN TOP PORTION WITH YOUR PAYMENT

Business Edition® Visa®

Account Name

Page 001 of 00's



Account Summary

And the part Control or section in the	
Previous Balance	\$984.36
Payments	
Other Credits	
Purchases	+\$0.00
Balance Transfers	+\$0.00
Cash Advances	+\$0.00
Fees Charged	
Interest Charged	+\$0.00
New Balance	\$0.00
Statement Closing Date	
Days in Billing Cycle	31
Total Credit Limit	\$2,000.00
Available Credit	\$2,000.00
Cash Limit	
Available Cash	
Available Casti	\$400.00



Payment Information

New Balance	\$0.00
Minimum Payment Due	
Past Due Amount	
Payment Due Date	September 1, 2018

Manage your business expenses with convenient online access.



- · Make secure online payments
- Access current and historical statements, up to 7 years old
- Monitor monthly expenses

Login today to explore all the online possibilities!

AUG 9 2018



Customer Service

Save Time and Stamps by Paying Online!

Call: Toll Free 1-800-819-4249

(TDD Telecommunications Device for the Deaf: 1-800-925-2833)

Visit: www.firstnational.com

Remit to: First National Bank Omaha, P.O. Box 2818, Omaha, NE 68103-2818

Important Information Regarding Your Account

This is a zero balance statement for your information only. No payment is required



Transaction Detail

Trans Date 7-05

Post Reference Date Number 7-05 74418008186007186036666 Transaction Description

ONLINE PAYMENT THANK YOU

Credits (CR) and Debits \$984.36 (CR)

Your Annual Percentage Rate (APR) is the annual interest rate on your account.

(v) Variable Rate (f) Fixed Rate

Charge Summary	Annual Percentage Rate (APR)	Special Offer or Eligible Purchase APR Expiration Date	Balance Subject to Interest Rate	Days Rate Used	Interest Charge
Purchases	15.99% (v)	N/A	\$64.33	31	\$0.00
Cash Advance	27.11% (v)	N/A	\$0.00	31	\$0.00

2018 Total Year-to-Date

Total fees charged in 2018	\$0.00
Total interest charged in 2018	\$0.00

Additional Information Regarding Your Account

An Easier Way to Pay Your Bills!

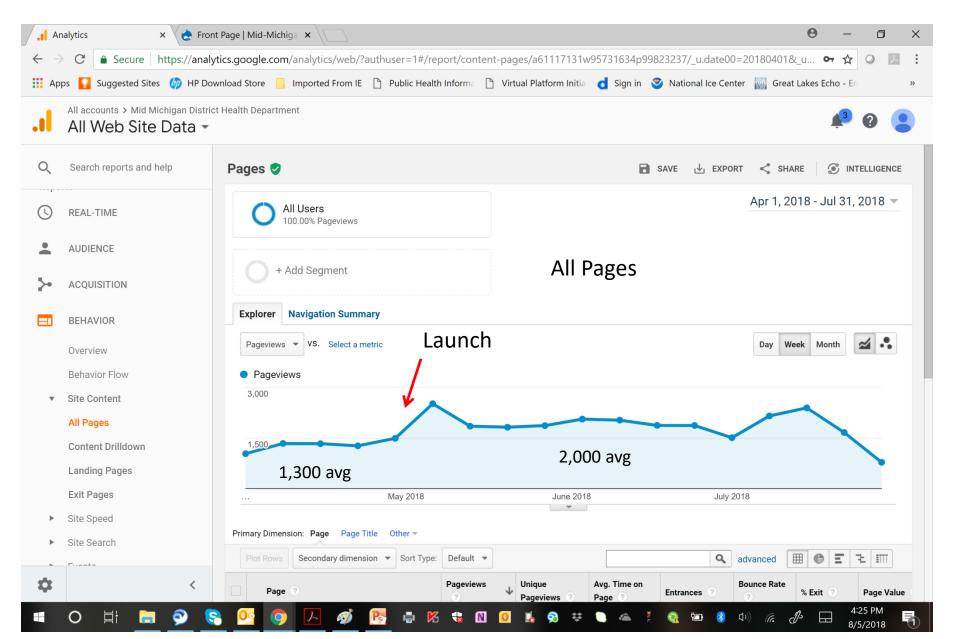
Tired of writing checks and spending money on stamps every time you pay a bill? Pay your recurring monthly bills automatically with your credit card! No hassle. No forgetting to send a payment for phone, internet, even utilities. And, no worries about your payment being lost or intercepted in the mail. It's quick and convenient. Start paying your monthly bills with your credit card today!

WNEM Social Media Campaigns

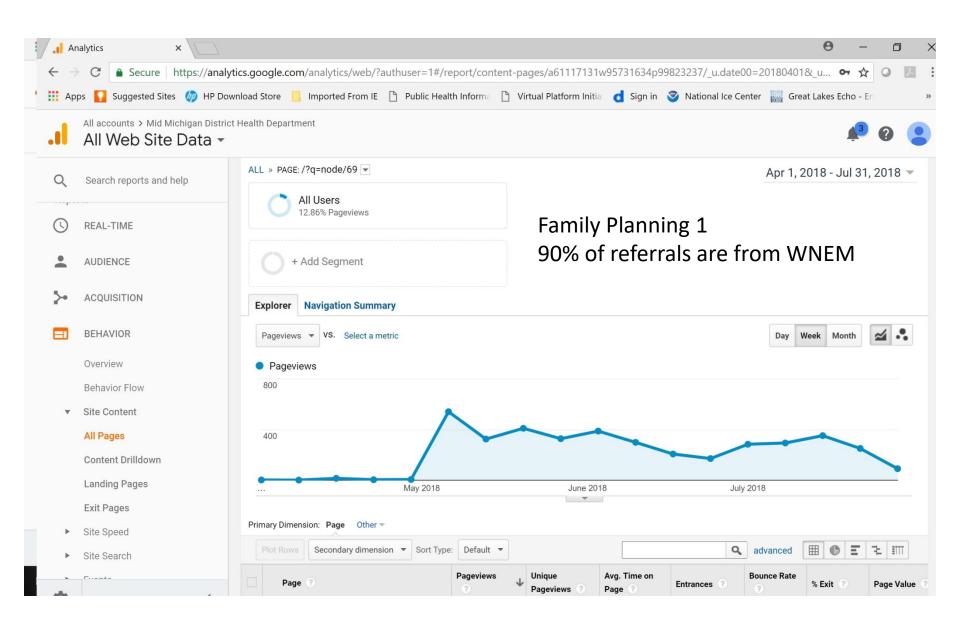
How are they working?

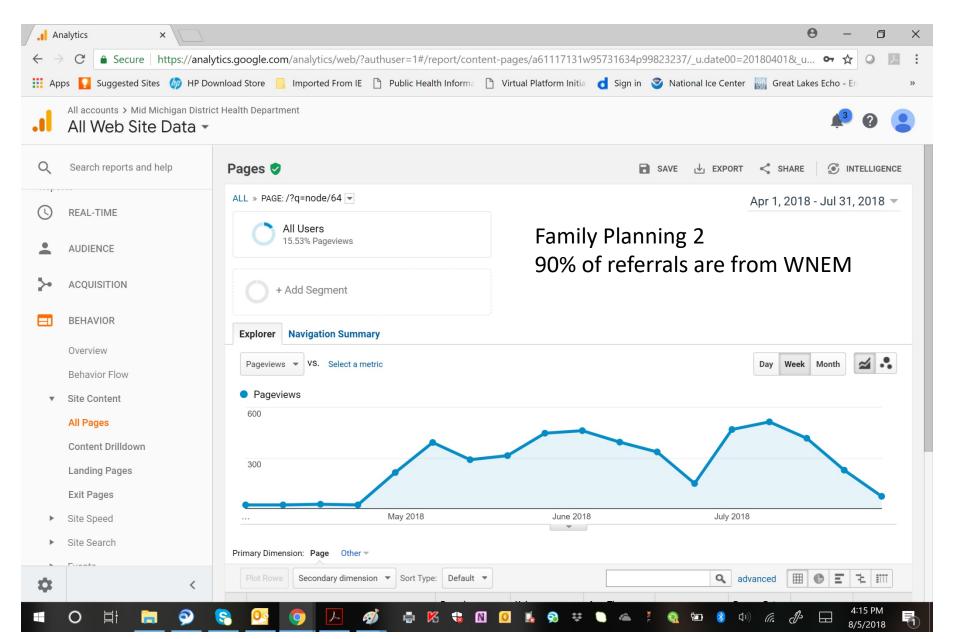




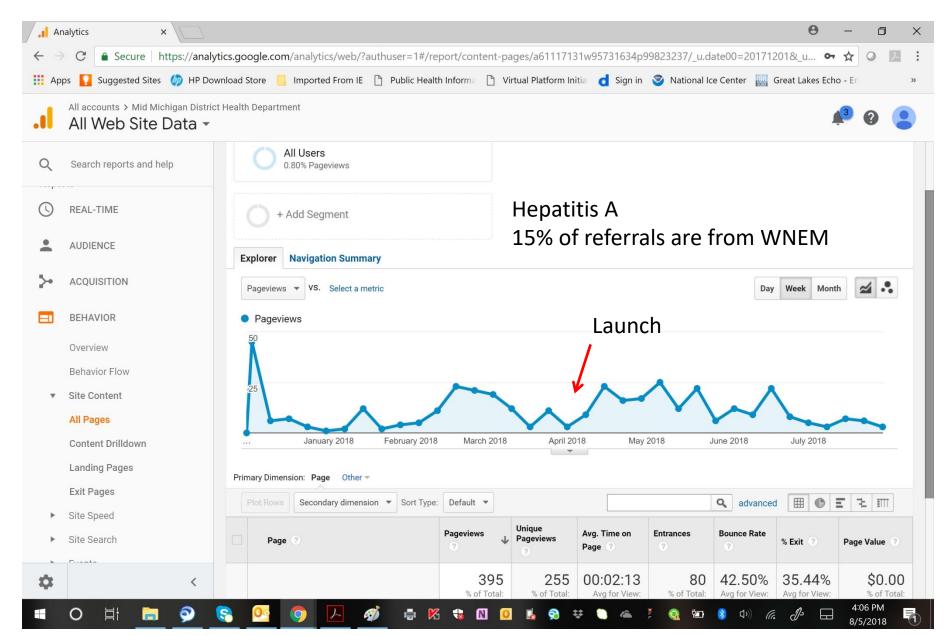


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Conclusions:

- A savy social media campaign can significantly boost traffic to our information.
- The Family Planning creative content is working well.
- The creative content of the Hepatitis A campaign is not working.
 - We will quickly schedule a discussion of the Hep A creative material with WNEM.



MID-MICHIGAN DISTRICT HEALTH DEPARTMENT

An Accredited Local Public Health Department

www.mmdhd.org

CLINTONBranch Office
1307 E. Townsend Rd.
St. Johns, MI 48879-9036
(989) 224-2195

GRATIOT
Branch Office
151 Commerce Drive
Ithaca, MI 48847-1627
(989) 875-3681

MONTCALM Branch Office 615 N. State St., Ste. 1 Stanton, MI 48888-9702 (989) 831-5237 ADMINISTRATIVE OFFICES 615 N. State St. Ste. 2 Stanton, MI 48888-9702 (989) 831-5237



BOARD OF HEALTH
George Bailey
Bruce DeLong
Betty Kellenberger
Tom Lindeman
Sam Smith
Dwight Washington, Ph.D.

MARK W. (MARCUS) CHEATHAM Health Officer

JENNIFER MORSE, MD, MPH, FAAFP Medical Director

Board of Health Action Sheet

Date:	August 22, 2018	Administrator:		werman, Director of tive Services
Subject:	Website Development Contract	☐ Information	Only	□ Action Needed

I. Authority For This Action:

- □ Local Policy 185.0 Purchasing Procedure
- □ Law or Rule Public Health Code, Act 368 of 1978, MCL 333.2433

II. Summarv:

(Previous board action relating to this item? Background information and if any future action anticipated.)

For the past few years, Mid-Michigan District Health Department (MMDHD) has been trying to enhance the agency website to make it more user-friendly for designated staff so that changes can be made easily when needed and makes an overall better experience for the community. The website and updating the logo were also priorities for the Rebranding Committee. The logo has been in existence for many years and really needs updating. Recently, MMDHD became aware of the new compliance regulations for the Americans with Disability Act (ADA) pertaining to websites for governmental agencies. Therefore, in conjunction with the enhancements already planned, as well as ensuring compliance with the new regulations, Administration felt it was time to contract out the website development together with the new logo design.

III. Strategic Objective, Health Issue, or other Need Addressed:

(What priority should be given in relation to goals? Include reason for recommending change in priorities and how the need will be introduced into planning process.)

A major factor in consideration of this was to be in compliance with the new regulations and also to connect with our communities in an easy-to-use format. The website contains useful information pertaining to our operations, public health services, outbreaks, clinic hours etc. People are directed to our website for the information that they are requesting and will help meet their needs.

IV. Fiscal Impact and Cost:

(Immediate, ongoing, and future impact.)

Designing the new logo and website is a one-time cost. In the prior year, we eliminated an Information Technology position which has put further time constraints on the existing Information Technology staff. This contract allows the agency to complete this project without ongoing costs or impact on the existing staff.

The cost for Inspiration Studio Designs is \$10,950 for the logo and website design. The website will be hosted by Inspiration Studio Designs at a cost of \$3.00 per month. In making the decision to choose them, cost was a major factor. Other considerations included their background and knowledge (including medical field logos), the fact that agency staff has worked with them to design the Drug Free Communities website in Clinton County, other website designs that we viewed, and ease of use for the website once it is designed.

V. Alternatives Considered:

(Scope of options reviewed. Reasons for rejecting alternatives.)

Pursuant to the agency's Purchasing Policy #185.0, the agency received two other competitive quotes:

Quote	Cost
Northbound Studio	\$12,000-\$20,000
'corePHP', LLC	\$17,085

VI. Recommendation:

(Advantages/benefits of proposal. Expected results. Possible problems or disadvantages of proposal. Effect of action on agency. Consequences of not approving recommendation or taking action.)

I recommend that the BOH authorize M. Cheatham to enter into a contract with Inspiration Studio Designs for agency web development and logo design at a cost of \$10,950, plus \$3.00 per month for web hosting.

VII. Monitoring and Reporting Time Line:

(Evaluation method and timeline. Next report to the Board.)

The agency will regularly update the Board of Health regarding the designs and implementation.

MID-MICHIGAN DISTRICT HEALTH DEPARTMENT LOGO, BRANDING + WEBSITE PROPOSAL

DATE: July 20, 2018

PREPARED FOR: MMDHD - Leslie Kinnee

CONTACT

AMY HANCOCK - PROJECT MANAGER

(616) 894-0901 amy@northboundstudiodesign.com

MALLORY BOLIN - ART DIRECTOR
(616) 808-1332
mallory@northboundstudiodesign.com

JORDAN HIEMSTRA- CREATIVE DIRECTOR
(616) 644-3768
jordan@northboundstudiodesign.com



401 Hall Street SW Suite 140B Grand Rapids, MI 49503 PROJECT OVERVIEW MMDHD: LOGO + BRANDING

LOGO + BRANDING PROJECT OVERVIEW

Northbound Studio will work with the Mid-Michigan District Health Department to build and develop a unique, professional and relevant brand image. This branding will be able to be utilized in all potential/future marketing efforts.

PROJECT GOALS & DELIVERABLES

In the development of the MMDHD logo, we will accomplish the following:

- Develop a unique, representative logo, that tells the story of MMDHD
- Create a look and feel that gives MMDHD a friendly and professional presence
 - Additional deliverables will include all logo files and assets
- · Create digital brand guide

COST ESTIMATE / OPTION #1

Below is the cost estimate and breakdown for <u>updating an existing logo</u>: Changes and additions outside of the scope with be billed at \$100/hr upon further approval.

PHASES	COST
PRELIMINARY CREATIVE Benchmarking of other businesses and similar organizations that will lead our initial direction	\$200.00
INITIAL DESIGN (3 UPDATED BRAND DIRECTIONS) Design of 3 unique logo/brand directions	\$1,000.00
FINALIZATION (3 HOURS OF REVISIONS BASED OFF CHOSEN DIRECTION) Based off of client feedback, revisions will be made to initial designs to create a final logo. Creation of additional logo files.	\$400.00
TOTAL	\$1,600.00

COST ESTIMATE / OPTION #2

Below is the cost estimate and breakdown for <u>creating a new logo</u>:

Changes and additions outside of the scope with be billed at \$100/hr upon further approval.

PHASES	COST
PRELIMINARY CREATIVE Benchmarking of other brands and competitors that will lead our initial direction	\$400.00
INITIAL DESIGN (3 UNIQUE BRAND DIRECTIONS) Design of 3 unique logo/brand directions	\$1,200.00
FINALIZATION (3 HOURS OF REVISIONS BASED OFF CHOSEN DIRECTION) Based off of client feedback, revisions will be made to initial designs to create a final logo. Creation of additional logo files.	\$400.00
Page 41 of 109 TOTAL	\$2,000.00

PROJECT OVERVIEW MMDHD: WEBSITE

WEBSITE PROJECT OVERVIEW

Northbound Studio will work with the Mid-Michigan District Health Department to create an ADA compliant, responsive, modern and on-brand website that gives MMDHD a professional online presence. The website will present pertinent information on the services that MMDHD offers, as well as current public health announcements. The website will use well written and engaging verbiage along with high quality photographs and graphics. The website will be designed and developed so that additional customization will be able to take place in the future by MMDHD staff.

PROJECT GOALS & DELIVERABLES

In the development of the MMDHD website, we will accomplish the following:

- Create a modern, responsive website (able to be used on all devices) using the Wordpress Content Management System (CMS).
- Work to develop a user friendly interface, page structure, and content structure that is simple and effective
 in providing current and potential clients with relevant information about MMDHD.
- · Develop a website that can be managed by MMDHD using an intuitive page builder.
- Create Search Engine Optimization (SEO) Profile for MMDHD.

COST ESTIMATE / OPTION #1- ECONOMICAL

WEBSITE

Below is the cost estimate and breakdown for developing a website: Additional changes outside the scope below will be billed at \$100/hr upon further approval.

PHASES	COST
PRELIMINARY CREATIVE Initial creative research and benchmarking	\$1,000.00
INITIAL DESIGN Development of a finalized website page structure flow-chart. Development of aesthetic design direction in the form of wireframes. Creation of other resources to be used on the website (i.e. icons, infographics, etc.)	\$4,000.00
INITIAL DEVELOPMENT Core web development of the responsive website based off of the approved aesthetic wireframes	\$3,000.00
FINALIZATION Initial site SEO work and optimization as well as changes to finalize the design and the page structures. Connection to applicable social media pages. Wordpress hosting setup and domain setup.	\$2,000.00
TOTAL	\$10,000.00

SUGGESTED TIMELINE MMDHD: WEBSITE

COST ESTIMATE / OPTION #2- PREMIUM

WEBSITE

Below is the cost estimate and breakdown for developing a website. Additional changes outside the scope below will be billed at \$100/hr upon further approval.

PHASES	COST
PRELIMINARY CREATIVE Initial creative research and benchmarking	\$2,000.00
INITIAL DESIGN Development of a finalized website page structure flow-chart. Development of aesthetic design direction in the form of wireframes. Creation of other resources to be used on the website (i.e. icons, infographics, etc.)	\$7,000.00
INITIAL DEVELOPMENT Core web development of the responsive website based off of the approved aesthetic wireframes	\$6,000.00
FINALIZATION Initial site SEO work and optimization as well as changes to finalize the design and the page structures. Connection to applicable social media pages. Wordpress hosting setup and domain setup.	\$3,000.00
TOTAL	\$18,000.00

SUGGESTED TIMELINE MMDHD: WEBSITE

WEBSITE TIMELINE

Define	 Initial Creative Research and Benchmarking Finalize Website Flowchart Any other relevant info including documents, photos, etc 	JULY 20-30
Preliminary Creative	 Development of Wireframes for website aesthetic Creation of other resources Initial Copywriting (if needed) 	JULY 31- AUG 10
	Progress Update Meeting - Tentative: Aug 13, 2018	
Initial Development	 Development of site and page structures Initial development of all website pages Integration of supplied and created copy 	AUG 14- 31
	Progress Update Meeting - Tentative: Sept 4, 2018	
Finalization	 Final development changes based on progress meeting Integration of all Social media Integration hosting and URL SEO Development 	SEPT 5-12
L	aunch - Tentative: September 17, 2018	

TERMS & CONDITIONS

PAYMENT TERMS

Northbound Studio requires one quarter of the total project paid upon acceptance of the proposal. Full payment of each invoice issued by Northbound Studio LLC is due Net-10 upon delivery of the invoice to the customer. The project will be invoiced monthly and upon completion. All payments shall be made in U.S. Dollars. Amounts due but not fully paid in 30 days will accrue interest at a rate equal to 2% above the prime rate published by the Wall Street Journal or at the highest rate permitted by law, if lower. Northbound Studio will be entitled to suspend performance of its duties under the Contract if any invoices are overdue. Northbound Studio reserves the right to require payments in advance of providing services under the Contract if it deems such advance payments to be desirable in its sole discretion. Customer will reimburse Northbound Studio for all expenses, including reasonable attorney's fees, incurred in the collection of any overdue balances or in enforcing Northbound Studio's rights under these Terms and Conditions.

COMPLETION DATES APPROXIMATE:

Completion dates are approximate only. Northbound Studio shall not be liable for any loss or expense (consequential or otherwise) incurred by Customer if Northbound Studio fails to meet the specified completion schedule for any reason.

SITUATIONS OUTSIDE OF NORTHBOUND STUDIO'S CONTROL:

In no event shall Northbound Studio be held responsible or liable for delay or failure to perform that arises out from causes beyond Northbound Studio's reasonable control and not due to Northbound Studio's own fault or negligence. Situations include: weather, acts of God, hard drive or computer failure, or any other unforeseen incidents.

TERMINATION:

Either the Customer or Northbound Studio may terminate the contract upon written notice to the other party; provided that if the Customer terminates the Contract it shall pay a termination charge determined solely by Northbound Studio, which shall include payment for work performed prior to the termination date, according to Northbound Studio's established prices, and all costs incurred and committed for, both direct and indirect.

PROJECT DESIGN AND INVESTMENT ACKNOWLEDGEMENT:

By accepting this proposal, as an authorized company representative, I hereby agree to the above terms and conditions. I agree that all design and development plans and investment figures are estimations. The project design and development details are subject to change in method, scope, and timeframe. As a result, any unforeseen variance to these values, I hereby certify that my company agrees to pay Northbound Studio LLC the total project cost outlined in the proposal and do not hold them responsible for reasonable project adjustments.

Please return this signed form to accept this proposal.

CUSTOMER ACCEPTANCE

Company / Organization		
Name (print)		
Title	Date	

Signature

Estimate

5863



'corePHP', LLC

245 Michigan Ave. W Battle Creek MI, 49017

EIN 26-2637022

Estimate For

Mid-Michigan District Health Department

615 N State Street Suite 2 Stanton MI, 48888-9702 Estimate Date : July 13, 2018

Sales associate : Jacob Paige

#	Item & Description	Hour(s)	Rate	Amount
1	Hourly Service https://www.mmdhd.org/ Accessbility Website Build	4.00 hours	85.00	340.00
	Development Setup Setup development environments - Setup Customer testing environments - Setup GIT repository and initialize all main aspects of the project- Establish a GIT flow / process.			
2	Hourly Service Setting up template and site set up for content	80.00 hours	85.00	6,800.00
	Themes we are looking at using:			
	https://themedemos.webmandesign.eu/polyclinic/ - WordPress Platform			
	https://themedemos.webmandesign.eu/icelander/? layout_site=fullwidth- WordPress Platform			
	https://templates.joomla-monster.com/joomla30/jm-commune-offices-wcag/en/ - Joomla Platform			
	CSS Developer: Roberto			
3	Hourly Service Content Migration from Drupal to WordPress or Joomla	32.00 hours	85.00	2,720.00
4	Hourly Service Code Review and Testing Security testing - Bug testing and fixing - Browser testing - Customer feedback testing and updates.	40.00 hours	85.00	3,400.00

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1

#	Item & Description	Hour(s)	Rate	Amount
5	Hourly Service Launching of Site, Optimization of server Go Live	12.00 hours	85.00	1,020.00
6	Project Management	30.00 hours	85.00	2,550.00
7	Account Management	3.00 hours	85.00	255.00
			Total	\$17,085.00

Terms & Conditions

'corePHP' Terms and Conditions are located: https://goo.gl/ZNiGY1



A CREATIVE DESIGN AGENCY



DIGITAL. PRINT. VISUAL.

WE SUCCEED BECAUSE NOT BECAUSE WE ARE BIG.

WE ARE GOOD,

A DIGITAL PARTNER

With almost two decades of experience, we are proud to be a creative agency with a multi-disciplinary approach that allows us to achieve each of our clients' (aka "partners") goals. We are experts in our field, we close the gap between strategy and creative services, building interactive experiences with leading innovation. The best part—being small-by-design puts us closer to the decisions that matter and gives us the freedom to work with the best talent.

We craft experiences that help our partners stand out as well as stand for something. We love innovation and we've earned a reputation for doing great work across multiple platforms. And even though we continue to grow each year, we still keep a family atmosphere. Passion is what brings us into the studio at night and on the weekends—work ethic is what keeps us there. We believe in being accessible, transparent and honest and expect the same from each of our partners.



CLIENT TESTIMONIAI

"I have worked with Inspiration Studio for many years now. They were instrumental in the re-branding of Pennock Health Services for both print and online media. They have been my savior many times. Inspiration Studio stays on top of new trends in website design and responsiveness, which is so important for businesses to be able to adapt as technology changes."

Janine Dalman, Executive Director Spectrum Health Pennock

WEB Development

Inspiration Studio has learned that the Mid-Michigan District Health Department (MMDHD) is looking for an updated, clean, responsive website. In addition, MMDHD will need their entire website and any online form integration to comply with the standards set forth by the Americans with Disabilities Act (ADA) and Health Insurance Portability and Accountability Act (HIPAA) best practices.

Inspiration Studio can meet these needs by providing MMDHD with a custom website that will be built on their preferred open-source platform of Wordpress for easy content management.

Inspiration Studio's custom theme coding will be completed in HTML5, CSS3 and JS framework. Additional database and application plug-ins/attachments will be coded in HTML5, CSS3, PHP, and MySQL. This new responsive site will be compatible with today's latest browsers, including a full bootstrap for future expansion and integration of search engine optimization.





ADA COMPLIANCE

At Inspiration Studio, we will implement and integrate your industry specific ADA-friendly protocols into your new website, online applications and digital marketing documents so you meet WCAG 2.0 (Level A to AAA) ADA / 508 compliance. Obtaining ADA compliance is a complicated process and we are here to help every step of the way!

RESPONSIVE WEBSITE (RWD)

At Inspiration Studio, all of our websites are built as RWD. 'RWD' stands for Responsive Website Design. A 'Responsive' website is a new dynamic site that responds to it's environment; essentially, it is one website that automatically adapts itself into both a desktop website, mobile website, netbook website, and tablet website, allowing for the viewer to basically see "one website for every screen.

DEVELOPMENT PHASES

INFORMATION GATHERING

Inspiration Studio will meet with Leslie or any other required members of the MMDHD team to discuss the project details and requirements for the redesign. I also request at this time full access to your current FTP (file transfer protocol), copies of electronic media housing your general text requested to be posted on your website, and any other electronic media materials to assist in easy design and development of your site.

DISCOVERY PROCESS

In order to build you with an outstanding website, we need to know about your business, your audience, your competition, your goals and what is and isn't working with what you currently do. Our goal is to drive success, and that requires a well thought-out strategy and a clear understanding of your objectives. During our discovery phase, we will shift through the documents you delivered during the Information Gathering phase, review your competition, review your brand and how your current marketing strategies need to be delivered, and uncover your audience.

DESIGN PHASE

This is where the creative part starts! During the design phase we will take all of the information gathered during our Information Gathering and Discovery Phases in order to establish prototypes for the functionality which will be developed throughout the site. (wireframes).

Once we also determine what the content is going to be and in what format it should exist, we apply the appropriate look and feel for your market and your brand identity and provide you with a Website Color Palette for review. Our goal is to create one singular design concept and apply that look to everything from your website or business cards to your print collateral. Our experience in both the online and offline space, allows us to maintain your brand identity from the web, to point of purchase and everywhere in between. After all, your website will be an extension of your branding and awareness!

DEVELOPMENT

Once the final vision has been surfaced and been agreed upon, we fire up our Adobe applications and start producing some outstanding work! As a general rule, our development phase is typically a straightforward phase as a direct result of the work done in our preceding phases. Creative designs are converted into HTML5 and CSS3 and online forms and applications are developed and produced to collect information from your audience. Tracking and measurement capabilities are implemented with media rich features to ensure your site is engaging and interactive.

DEPLOYMENT

Now that your website is fully in designed and built in 'demo mode' we take the site and launch it 'live' on the World Wide Web! Over the next few weeks and months we measure the success of the site to ensure we achieved the goals set-forth in our Discovery Phase and ensure no improvements or expansion is required. After all, our success if not possible without your success - and the final phase, like our relationship, never ends! At Inspiration Studio we will be here for you to make the small or large updates that keep your brand and site up-to-date!

PROJECT COSTS

All costs and estimates outlined are valid for 45 days from the date of this proposal. Upon acceptance of the proposal, a Web Design and Development Agreement along with a 50% starting deposit is required to begin your Project.

Custom Designed Wordpress Website

\$8,750

Build MMDHD with a new comprehensive ADA compliant, responsive Wordpress website. Development will include keeping the current 50+ page structure and/or trimming where information can be combined or trimmed down for better user interface. Development also includes addition of easy Content Management Drag n' Drop system into the custom theme with administrative levels for direct MMDHD colleagues being able to perform their own approved website updates/changes.

*Primary content, copywriting, international documents and internal photography will be supplied by MMDHD.

ADDITIONAL CONSIDERATIONS

SSL Certificate (average cost for one website is \$65-100 annually)

ADA and HIPAA Compliance with require an SSL Certificate with SHA-2 and 2048-bit encryption. If your current hosting provider doesn't offer this, an SSL Certificate can be purchased through our Hosting and Domain store.

Website Hosting and Domain Support (Plans start at \$3.00 a month+)

Our Studio provides secure, reliable website hosting, virtual dedicated servers, domain names, SSL Certificates, email accounts and more. To learn more and see general costs, we invite you to visit our website and click on 'Hosting & Domain Store.'

General Maintenance (\$125.00 an hour)

We understand it can be hard to find time to do your own website updates! Our studio can gladly assist with any general updates and requirements. General website maintenance and updates are charged at our hourly rate of \$125.00.

2

BRANDING Visual Identity





We apply the science and art of brand development to build a strategic platform that uniquely captures who you are. Our brands are built to last—they optimize for today and plan for tomorrow.

- Logo Design & Branding
- Corporate Identity Kits
- Creative Direction
- Print & Packaging Design
- Annual Report Design
- Social Media Assets
- Brand Guideline Books
- Custom Typography





BRAND Development

BRAND ANALYSIS

We understand that first impressions matter! And we also know that first impressions are almost 100% visual. Inspiration Studio will provide you with a brand analysis for your business that creates the image and lasting impression that you need. We ensure the story your brand tells is the one you want the world to hear!

BRAND AND IDEA RESEARCH

When we create a new Corporate Identity, we include the crucial feature of research. We will conduct a review of competing brands, online branding trends and your current brand assets and messaging to help identify opportunities for differentiation. Our goal is to provide you with a 'brand voice'- giving your organization a character and providing a tag line or messaging strategy that will set you apart from your competition.

BRAND GUIDELINES

When wrapping up your Corporate Branding, we provide you with a complete digital Brand Guidelines book. As you know, your brand is a reflection of everything you do and say, everything you print and broadcast, and you want to make sure both your colleagues and vendors portray your message in the proper fashion. Your Brand Guidelines will provide this blueprint. Each booklet contains the basics of your brand design, application use, color palette, the 'Do's and Don'ts' and much more.

BRAND PACKAGES

At Inspiration Studio, we are glad to offer general brand packages for those that prefer a bundled service. Our general packages are geared to fit an array of design needs and budgets.

Luxe Branding Package

\$3,000

Our luxe branding package provides you with a full visual suite to style your business and build your brand as well as continued support for integrating your new identity kit - from your website to social media, marketing, a physical location and more. Our Luxe Package provides all the visual elements to establish a brand as well as assistance in making it all come together!

- 5 custom logo concepts
- Logo edits
- Full range of logo files (vector + print + web)
- Horizontal and Vertical Logo Variations
- Additional Logo Versions in Black and White
- Logo creation with optional tag line
- Corporate (or Personal) Brand Guidelines Book
- Brand Color Palette (Web + CMYK + Pantone)
- Brand Font Selection + Font Suitcase
- Social Media Profile and Banner image
- Stationary Design: Business Card, Letterhead, Envelope, Presentation Folder

Crown Branding Package

\$2,200

Our crown branding package is a step down from our luxe package but still provides all of the visual elements needed to style your business and build your brand. The end result is an completed logo that you can apply anywhere and everywhere for a cohesive look.

- 3 custom logo concepts
- Logo edits
- Full range of logo files (vector + print + web)
- Horizontal and Vertical Logo Variations
- Additional Logo Versions in Black and White
- Brand Color Palette (Web + CMYK + Pantone)
- Brand Font Selection + Font Suitcase
- Stationary Design: Business Card, Letterhead and Envelope

Refresh Branding Package

\$1,200

Our brand refresh package is a special package that is perfect for growing organizations looking to upgrade their external branding and awareness. We can help you refresh your logo to seamlessly transition from kid to adult or from stale to modern and clean.

- 3 refreshed logo concepts built from your current logo and brand concept
- Logo edits
- Full range of final logo files (vector + print + web)
- Horizontal and Vertical Logo Variations
- Additional Logo Versions in Black and White
- Refreshed Brand Color Palette (Web + CMYK + Pantone)
- New Brand Font Selection + Font Suitcase

THANK YOU!

Thank you for letting us quote your web development and graphic design needs!

We look forward to the opportunity to partner with you!

Julia Leos, Digital Creative Director

Phone: 616-366-5496 | julia@inspiration-studio.com

www.inspiration-studio.com



Web Development and ADA Agreement

Web Development

- 1. Authorization. The client engages Inspiration Studio Designs Inc., its officers, agents, employees, and subcontractors (hereinafter collectively referred to as "Inspiration Studio Design(s),"), as an independent contractor for the specific purpose of development, designing or updating an online application on the World Wide Web site (hereinafter referred to as the "Project") to be published on the Client's account on an Internet Service Provider (ISP)/Web Presence Provider (WPP) computer, hereinafter refer to as "Hosting Service", or provided on such other media that the Client requests in writing. The Client hereby authorizes Inspiration Studio Designs to access this account, and authorizes the Hosting Service to provide Inspiration Studio Designs, with full controlling access to all levels of the Client's account, and any other programs needed for this Online Web Design Project that are included as part of the Client's service agreement/level.
- 2. Development. The online web design tools used to develop this Project will be determined at the sole discretion of Inspiration Studio Designs.
- 3. Browser Compatibility. Designing web pages to work identically in multiple browsers and browser versions can require considerable extra effort and expense as it could involve creating multiple versions of various code pieces and pages. Inspiration Studio Designs represents that the web pages it designs for function in Microsoft® Internet Explorer, Google Chrome, Firefox, and Apple®Safari, Responsive Web Designs will also be tested and designed for function in both iOS and Android operating systems. While Inspiration Studio Designs will make reasonable efforts to create designs that are fully "backward compatible" with older release internet versions, the Client acknowledges that such backward compatibility, especially with advanced function, will involve significant additional time and expense. Inspiration Studio Designs does not warrant full function on any browser or specific version/release.
- 4. Accessibility. Inspiration Studio Designs will make all reasonable efforts to ensure full accessibility for all visitors, limited at its sole discretion. Additional efforts directed by the Client in writing will be at the Client's additional expense.
- 5. Assignment. Inspiration Studio Designs may, at its sole discretion, assign portions of this Web Design Project without change to any of the basic terms and conditions of this Project Contract.
- 6. Copyrights and Trademarks. The Client unconditionally warrants that any elements of text, graphics, photos, designs, trademarks, or other artwork furnished to Inspiration Studio Designs for inclusion in the Project are owned by the Client, or that the Client has permission from the rightful owner to use each of these elements, and will hold harmless, protect, indemnify, and defend Inspiration Studio Designs from any liability (including attorney fees and court costs), including any claim or suit, threatened or actual, arising from the use of such elements furnished by the Client.

- 7. Completion Date and Client-supplied materials, Inspiration Studio Designs agrees to complete the Project on the said date after Client has submitted all necessary materials. If the Client does not supply Inspiration Studio Designs with complete text and graphics content for this Project within 45 days of the effective date of this agreement the entire deposit amount of the agreement may be retained by Inspiration Studio Designs, at its sole discretion, as liquidated damages and the contract shall become null and void.
- 8. Cancellation. The Project may be cancelled in writing by either party without prejudice and without liquidated damages, within 15 days of the effective date of this agreement. Deposits are refundable at the sole discretion of Inspiration Studio Designs.
- 9. Website Completion, Inspiration Studio Designs and Client, provided that neither shall incur any liability, penalty or additional cost due to delays caused by a state of war, riot, civil disorder, fire, labor trouble or strike, accidents, energy failure, equipment breakdown, delays in shipment by suppliers or carriers, action of government or civil authority, and acts of God or other causes beyond the control of the Client or the Designer. Where the Client does not adhere to production schedules, final delivery date or dates will be adjusted accordingly. By rendering final payment for the Project, Client acknowledges completion of all requirements of the Project.
- 10. Project Delivery and Hosting. The final project will be published to the Client's hosting service upon receipt of final payment or delivered via other media at the Client's request, upon receipt of full and final payment. The Client acknowledges that any hosting services provided to it by Inspiration Studio Designs as a liaison or directly are not part of this agreement, and are subject to a separate agreement. If hosting services are contracted from a source other than Inspiration Studio Designs, the Client agrees to contract with a hosting service that meets the server software requirements of the Project as determined by Inspiration Studio Designs including FTP and/or Macromedia Dreamweaver® or Wordpress. Client further agrees that Inspiration Studio Designs will have complete "root" access to the hosted domain. Client acknowledges that Inspiration Studio Design's efforts to resolve server software issues with non-Inspiration Studio Design servers, including Macromedia Dreamweaver® Server extensions, Wordpress and other required server software is subject to additional hourly charges of \$125.00. If the Client elects project delivery on other media of its choice the Client assumes all responsibility for the use and functionality of the Project.
- 11. Meta Tags and Search Engines. Adding of Meta Tags (Description, Title Tags, Header Tags and Content Inclusion) and the periodic submission and resubmission of the web design project to search engines and updating occur only after the full final payment is made, and are subject to potential additional charges depending on the chosen package by the Client.
- 12. Website Maintenance. Inspiration Studio Designs and the Client may enter into a separate agreement for specific website maintenance services after the completion of the Project, but none are contemplated in this Contract. Although, any website maintenance services can easily take place and will be at the normal hourly rate of \$125.00.
- 13. Electronic Commerce Laws. The Client acknowledges that it is solely responsible for complying with any laws, taxes, and tariffs applicable in any way to the Project and all services contemplated herein, and will hold harmless, protect, and defend Inspiration Studio Designs from any claim, suit, penalty, tax, fine, or tariff including attorney fees, arising from the Client's exercise of Internet electronic commerce and/or any failure on the part of Client to comply with any such laws, taxes, and tariffs.

14. Copyrights. Copyright to the finished overall design of the website produced by Inspiration Studio Designs will be the sole property of the Client once final payment under this agreement and any additional charges incurred have been paid unless the client chose a pre-designed template by Inspiration Studio Design. Copyright to any pre-designed templates will be the sole property of Inspiration Studio Designs and or their respective owners. Rights to photos, graphics, source code, work-up files, and computer programs are specifically not transferred to the Client, and remain the property of their respective owners. Inspiration Studio Designs and its subcontractors retain the right to display graphics and other Web design elements as examples of their work in their respective portfolios. The Project may contain a copyright and/or legal statement with links to Inspiration Studio Designs family of websites.

According to the Copy right Law of 1976, the rights to all design and art work, including but not limited to photography and or illustration created by independent photographers or illustrators retained by Inspiration Studio Designs, or purchased from a stock agency on Client's behalf, remain with the individual designer, artist, photographer or illustrator. Unless a purchase of "All Rights" (A Buyout) is negotiated with Inspiration Studio Designs and/or his/her authorized representative, you may not use or reproduce the design or the images therein for a purpose other than the one(s) originally stipulated. If you wish to use the design that Inspiration Studio Design's has created and/or the images within it for another purpose or project, including a reprint or exhibition. Client must contact Inspiration Studio Designs to arrange the transfer of rights and any additional fees before proceeding. If printing or other implementation is done through Client vendors, Client agrees to return to Inspiration Studio Designs all original mechanicals and artwork(slides, prints, drawings, separations, etc.) within two weeks, and to provide Inspiration Studio Designs with printed samples of each project. Inspiration Studio Design agrees to store computer disks for a period of 6 months beyond the delivery of a job. There upon, Inspiration Studio Designs reserves the right to discard them. Rights to photos, graphics, source code, work-up files, and computer programs are specifically not transferred to the Client, and remain the property of their respective owners. Inspiration Studio Designs and its subcontractors retain the right to display graphics, including mock-ups, comprehensive presentations, firm news letter, brochures, slide presentations and similar media and other Web design elements as examples of their work in their respective portfolios. The Project may contain a copyright and/or legal statement with links to Inspiration Studio Designs family of websites.

- 15. Errors and Omissions. It is the Client's responsibility to check proofs carefully for accuracy in all respects, ranging from spelling to technical illustrations. Inspiration Studio Designs is not liable for errors or omissions. Client's signature or that of Client's authorized representative is required on all mechanicals or artwork showing authorizing prior to release for printing or other Implementation.
- 16. Property and Supplier Performance. Inspiration Studio Designs will take all reasonable precautions to safeguard the property Client entrusts to Inspiration Studio Designs. In the absence of negligence on Inspiration Studio Design's part, however, Inspiration Studio Design is not responsible for loss, destruction or damage or unauthorized use by others of such property.
- 17. Arbitration. Any controversy or claim arising out of or relating to this agreement, or any breach thereof, shall be settled by arbitration in the state of Michigan, in accordance with the rules then obtaining of the American Arbitration Association, and judgment upon the award rendered may be

entered in any court having jurisdiction thereof.

- 18. Collection. Inspiration Studio Designs reserves the right, at its sole discretion, to remove any and all web content from view on the Internet when any legitimately incurred amount is outstanding and overdue from the Client to Inspiration Studio Designs, and will endeavor to restore such content promptly and without delay upon the receipt of such payment. In case collection proves necessary, the Client agrees to pay all fees (including all attorney fees and court costs) incurred by that process.
- 19. Venue. Regardless of the place of this agreement, the Client agrees that for purposes of venue, this agreement was entered into in Michigan, and any dispute will be litigated or arbitrated in Michigan, USA and the client hereby consents to the personal jurisdiction of the Michigan State Courts.
- 20. Legal Notice. Notwithstanding anything to the contrary contained in this contract, neither Inspiration Studio Designs nor any of its employees or agents or officers warrants that the functions contained in the web design project will be uninterrupted or error-free. The entire risk as to the quality and performance of the web design project rests with the Client. In no event will Inspiration Studio Designs be liable to the Client or any third party for any damages, including, but not limited to, service interruptions caused by Acts of God, the Hosting Service or any other circumstances beyond Inspiration Studio Design's reasonable control, any lost profits, lost savings or other incidental, consequential, punitive, or special damages arising out of the operation of or inability to operate this Project, failure of any service provider, of any telecommunications carrier, of the Internet backbone, of any Internet servers, the Client's or site visitor's computer or Internet software, even if Inspiration Studio Designs has been advised of the possibility of such damages.

Website Accessibility Design

- 21. Authorization, The client engages Inspiration Studio Designs Inc., its officers, agents, employees, and subcontractors (hereinafter collectively referred to as "Inspiration Studio Design(s) or ISD"), as an independent contractor for the specific purpose of development and designing a online application on the World Wide Web site (hereinafter referred to as the "Project") that is WCAG Level 1.0 to 3.0 (Level A-AAA) as requested and / or 508 Compliant under the World Wide Web Consortium's new Web Content Accessibility Guidelines to be published on the Client's account on an Internet Service Provider (ISP)/ Web Presence Provider (WPP) computer, hereinafter refer to as "Hosting Service", or provided on such other media that the Client requests in writing.
- 22. What is Accessibility. "Accessible" means a person with a disability is afforded the opportunity to acquire the same information, engage in the same interactions and enjoy the same services as a person without a disability in an equally effective and equally integrated manner, with substantially equivalent ease of use.

The Americans With Disabilities Act (ADA), originally passed in 1990, takes steps to ensure that people with physical and cognitive disabilities have access to the same services, accommodations, and facilities as the rest of the population. This set of regulations applies to both the public and private sectors, and includes specific stipulations for websites and eCommerce.

23. Accessibility. Inspiration Studio Designs will make all reasonable efforts to ensure full accessibility for all visitors, limited at its sole discretion to adhere to the Department of Justice's (DOJ) current WCAG Level 1.0 - 3.0 (Level A-AAA) requirements and 508 Compliance. The Client understands Inspiration Studio Design's is adhering to the DOJ's requirements to the best of it's ability and with their best due diligence as the current Web Accessibility Guidelines doest not have an 'official checklist' of all regulations and guidelines that must be met. Inspiration Studio Design's will be following the current best practices set forth by America's legislature to include and not be limited to:

- Ensuring that all Java-based elements are 100% compatible with assistive technologies and pass ADA's current Level A compliance through their online Validation tool.
- Giving alt tags to every image file, video file, audio file and plug-in.
- Providing clear alt descriptions to explain the purpose of objects above
- Making sure there are no images or graphics that could create a flashing strobe-like effect.
- Build "skip navigation" functionality where required for text reader programs.
- Deploy the ADA Accessibility Plug-In for Wordpress websites where color contrast and text font can be activated.
- Create and link to a special 'Accessibility' page for the Client that advises users that the Client is working towards ADA Accessibility and disability-accessible pages with appropriate resources and the user may also contact the Client direct for any other additional accommodations as requested or needed.
- Ensuring that all <area> tags contain appropriate alt attributes.
- Using the LABEL element when form controls require text input.
- Permits sufficient time to read and use controls before new elements active on a page.
- Include text content that is readable and understandable.

24. Errors and Omissions. It is the Client's responsibility to check their own DOJ ADA / WCAG degree of accessibility requirements for their level of organization / business. Inspiration Studio Designs is not liable for errors, omissions, or the Client's Accessibility requirements or whether those specific requirements have been met. If a Client needs assistance in finding a local American with Disabilities Act Lawyer to assist them, Inspiration Studio Designs recommends:

Wheeler Upham, Suite 100, Calder Plaza Building, 250 Monroe Avenue NW, Grand Rapids, MI 49503 Phone: (616) 459-7100

Willis Law, 491 W. South Street, Kalamazoo, MI 49007. Phone: (888) 461-7744

25. Electronic Commerce and Technology Laws. The Client acknowledges that it is solely responsible for complying with any ADA laws, technology laws, taxes, and tariffs applicable in any way to the Accessible Project and all services contemplated herein, and will hold harmless, protect, and defend Inspiration Studio Designs from any claim, suit, penalty, tax, fine, or tariff including attorney fees, arising from the Client's exercise of Accessibility or Internet electronic commerce and/or any failure on the part of Client to comply with any such laws, taxes, and tariffs.

General Graphic Design

- 26. Authorization. The client engages Inspiration Studio Designs Inc., its officers, agents, employees, and subcontractors (hereinafter collectively referred to as "Inspiration Studio Design(s) or ISD"), as an independent contractor for the specific purpose of designing an updated brand/logo (hereinafter referred to as the "Project").
- 27. Development. The graphic design tools used to develop this Project will be determined at the sole discretion of Inspiration Studio Designs. Typical programs for design include Adobe Illustrator, Adobe In-Design and Adobe Photoshop.
- 28. Ownership. You, the Client, have ownership of the final graphically designed piece and or logo design for use in any media application that is beneficial to your business. Inspiration Studio Design's retains the right to use the final logo or any graphically designed piece within printed, online portfolios, including promotional materials such as newsletters and advertisements. The Client also gives ISD permission to use the Client's full name, business address, and/or website address, for testimonial purposes, or other business related media. The Client understands that it is the Clients responsibility to copyright the logo or graphically designed piece (www.copyright.gov) and/or seek trademarks (www.uspto.gov/main/tradesmarks.htm).
- 29. Copyrights. Copyright to the finished overall design of the logo and or graphic design piece produced by Inspiration Studio Designs will be the sole property of the Client once final payment under this agreement and any additional charges incurred have been paid unless the client chose a pre-designed graphic or logo template. Copyright to any pre-designed graphic templates or pre-designed, non-custom logos will be the sole property of Inspiration Studio Designs and or their respective owners. Rights to photos, graphics, color palettes, and work-up files are specifically not transferred to the Client, and remain the property of their respective owners.
- 30. Errors and Omissions. It is the Client's responsibility to check graphic proofs carefully for accuracy in all respects, ranging from spelling to technical illustrations. Inspiration Studio Designs is not liable for errors or omissions. Client's signature or that of Client's authorized representative is required on all mechanicals or artwork showing authorizing prior to release for printing or other Implementation.
- 31. Collection. Inspiration Studio Designs reserves the right, at its sole discretion, to remove any and all graphic content, logos and Illustrations and or reserves the right to not deliver the final file delivery of digital files (.jpg, .pdf, and .eps graphic file formats) when any legitimately incurred amount is outstanding and overdue from the Client to Inspiration Studio Designs, and will endeavor to restore such content promptly and without delay upon the receipt of such payment. In case collection proves necessary, the Client agrees to pay all fees (including all attorney fees and court costs) incurred by that process.

Payments and Deposit

Payment for services provided hereby shall be made in accordance with the conditions contained in this contract agreement and any documents attached hereto and made a part of this agreement by inclusion. Notwithstanding any conflicting prices listed in literature or on Web pages as published from time to time. the Client and Inspiration Studio Designs agree that the services described in this contract and any attachment included by reference, shall be completed for said cost. For all web development projects and branding packages, the Client agrees to pay to Inspiration Studio Designs a non-refundable starting deposit of 50% of the web development project and / or the chosen branding package upon accepting Inspiration Studio Designs to design and develop the project. For every 31 days thereafter that Final payment is not rendered by the Client, the Client will be charged a late fee of 10% of the project total. All amounts to be paid in U.S. Dollars. ISD accepts all major forms of payment. Client may also keep a company credit card on file for monthly billings.

Sole Agreement. This agreement constitutes the sole agreement between Inspiration Studio Designs and the Client regarding this Project. The Client in this project is Mid-Michigan District Health Department. Leslie Kinnee.



MID-MICHIGAN DISTRICT HEALTH DEPARTMENT

An Accredited Local Public Health Department

www.mmdhd.org

CLINTON
Branch Office
1307 E. Townsend Rd.
St. Johns, MI 48879-9036
(989) 224-2195

GRATIOT
Branch Office
151 Commerce Drive
Ithaca, MI 48847-1627
(989) 875-3681

MONTCALM Branch Office 615 N. State St., Ste. 1 Stanton, MI 48888-9702 (989) 831-5237 ADMINISTRATIVE OFFICES 615 N. State St. Ste. 2 Stanton, MI 48888-9702 (989) 831-5237



BOARD OF HEALTH
George Bailey
Bruce DeLong
Betty Kellenberger
Tom Lindeman
Sam Smith
Dwight Washington, Ph.D.

MARK W. (MARCUS) CHEATHAM Health Officer

JENNIFER MORSE, MD, MPH, FAAFP Medical Director

Board of Health Action Sheet

Dat	te:	August 22, 2018	Admini	strator:		owerman, Director of ative Services
Suk	oject:	Non-Union Employees' Wage Proposal	☐ Info	ormation	Only	
I.	Authority	For This Action:				
	☐ Local I	Policy	⊠ I	Law or Ru	le <u>Michiga</u>	an Public Health Code
II.	Summary (Previous bo	: pard action relating to this item? Background inform	mation and	d if any futi	ıre action anti	icipated.)
	employee	inion employees wage agreement expires s with 8 being salaried and 7 being hourly e non-union cost of living wage increase a	. Additic			
	Non-union proposed	n employees would like to request a one-y request:	ear agre	ement w	ith the cons	ideration of the following
	• Re	questing a 1.25% wage increase for FY 18,	/19 (10/1	1/2018 –	09/30/2019	·).
	_	increase is consistent to the Teamsters Los expressed that they were in agreement v		_	-	
III.	(What prior	Objective, Health Issue, or other Need Add ity should be given in relation to goals? Include rea ed into planning process.)		commendir	g change in pi	riorities and how the need will
	Non-unio	n employees would be grateful for your su	ipport of	this prop	osal.	
IV.	•	act and Cost: . ongoing, and future impact.)				

V. Alternatives Considered:

(Scope of options reviewed. Reasons for rejecting alternatives.)

VI. Recommendation:

(Advantages/benefits of proposal. Expected results. Possible problems or disadvantages of proposal. Effect of action on agency. Consequences of not approving recommendation or taking action.)

VII. Monitoring and Reporting Time Line:

(Evaluation method and timeline. Next report to the Board.)

None

EMPLOYMENT AGREEMENT

This Employment Agreement is made and entered into this <u>22nd</u> day of <u>August</u>, 2018 effective <u>October 1</u>, 2018, by the MID-MICHIGAN DISTRICT HEALTH DEPARTMENT BOARD OF HEALTH ("the **Board**") and MARK W. (MARCUS) CHEATHAM, PhD ("the **Employee**").

1. <u>Employment</u>

In accordance with the terms of this Employment Agreement, the **Board** employs the **Employee** as the Health Officer for the Mid-Michigan District Health Department.

2. <u>Term of Employment</u>

Both parties recognize that the **Employee's** employment in the position of Health Officer shall be completely at the will and pleasure of the **Board**. The **Employee** and this Employment Agreement may be terminated by a vote of five of the six sitting members of the **Board**, with or without cause.

3. Education, Training and Certification

The **Employee** represents that they have all the education, training and certification that may be required for the position of Health Officer.

4. <u>Compensation</u>

The **Employee** shall be compensated on a bi-weekly basis based upon the wage band established by the **Board** of Health (see attached wage band). Any changes in compensation during the term of the contract will be consistent with non-union wage adjustments. A performance review will be completed by the **Board** of Health annually.

5. Fringe Benefits

The Health Officer shall receive the following fringe benefits:

- a) Health, dental, and life insurance equivalent to the benefits provided by the Department to non-unionized personnel;
- b) Bereavement leave pay and sick leave pay benefits equivalent to the benefits provided by the Department to non-unionized personnel;
- c) Vacation leave equivalent to the benefit provided by the Department to nonunionized personnel. The accrual of such vacation leave shall be calculated in the same manner as the method used for the Department's non-unionized personnel and the maximum accumulation of such leave shall also be calculated in the same manner as the method used for the Department's non-unionized personnel;
- d) Personal leave each year equivalent to the benefit provided by the Department to non-unionized personnel;

- e) Mileage, travel, meals and lodging reimbursement equivalent to the benefits provided by the Department to non-unionized personnel;
- f) Pension:
 - i) <u>Program</u>: Michigan Employees Retirement System Benefit B-3;
 - ii) <u>Benefit</u>: 2.25% of the member's final average compensation multiplied by years and months of credited service, but not to exceed 80% of the member's final average compensation;
 - iii) <u>Final Average Compensation</u>: Average of the highest 60 consecutive months of earnings;
 - iv) Employee Contribution: 3% of wages;
 - v) <u>Vesting</u>: 10 years, retirement age 60;
- g) Professional dues and subscriptions. The **Board** agrees, within budget limitations, and subject to the **Board's** approval, to pay for the professional dues and subscriptions of the **Employee** necessary for the **Employee's** continuation and full participation in national, state, regional, and local associations necessary and desirable for the **Employee's** continued professional participation, growth, and advancement, and for the good of the Department;
- h) Professional committees, conferences and trainings. Consistent with the job description, the **Employee** may attend professional meetings, conferences, and trainings. Reasonable expenses for such professional in-State travel attended by the Health Officer will be paid by the department. Payment for out-of-state professional travel is subject to **Board** approval. A summary of attendance at professional committees, conferences, and trainings shall be included in the Health Officer's report to the **Board**.

6. Notice of Termination

The **Board** reserves the right to terminate this Employment Agreement and to end the **Employee's** employment with or without cause of any nature to the **Employee**. If the **Board** gives less than sixty (60) days' notice that it intends to terminate this Employment Agreement and the **Employee's** employment, it will pay to the **Employee** the difference, if any, between sixty (60) days' pay at the **Employee's** then current salary and the salary amount attributable to the notice actually given to the **Employee**. Sixty (60) days of continued health insurance coverage will be granted, unless the **Board** terminates for just cause.

In the event termination of this Employment Agreement is initiated by the **Employee**, the **Employee** shall provide sixty (60) days' written notice to the **Board**. The **Employee's** failure to do so shall result in the forfeiture of any accumulated vacation pay.

7. <u>Return of Property</u>

Upon termination of employment, the **Employee** shall immediately return all Department documents, correspondence, files, papers, or property of any kind which the **Employee** may have in his possession or control.

8. <u>Supplemental Employment</u>

The **Employee** must receive written approval of the **Board** before engaging in outside or supplemental employment. In no case shall outside or supplemental employment conflict with or impair the **Employee's** responsibilities to the **Board**.

9. Job Duties

The **Employee** shall perform all duties as required by the **Board** and outlined in the **Employee's** job description. The **Employee** agrees that at all times they will, faithfully and to the best of their ability, experience, and talents, perform all the duties that may be required of them. The **Employee** shall report to the **Board** and/or such other representative as may be designated by the **Board**.

10. Insurance

The **Employee** shall be covered by the **Board's** existing general liability insurance policy.

11. Compliance With The Law

The **Employee** shall perform all of their duties and obligations in complete compliance with all applicable Federal, State, and local laws, ordinances, rules, and regulations, and shall adhere to all of the **Board's** policies and procedures.

12. <u>Invalid Provisions</u>

If any provision of this Employment Agreement is held to be invalid by a court of competent jurisdiction, the remainder of this Agreement shall not be affected thereby.

13. Modification of Agreement

This Employment Agreement may be modified only by the mutual written consent of both parties.

14. Complete Agreement

This Employment Agreement shall supercede any and all prior contractual arrangements between the parties and shall serve as the sole basis for the **Employee's** employment.

15. <u>Authorization To Enter Into Agreement</u>

This Employment Agreement has been approved by the **Board** on August 22, 2018 approving its terms and authorizing the **Board's** Chairperson to sign it on the **Board's** behalf. A copy of the Minutes of the Regular **Board** Meeting held August 22, 2018, is attached and incorporated by reference.

16. Expiration of Agreement

This Employment Agreement shall expire and terminate at 11:59 p.m., September 30, 2019.

MID-MICHIGAN DISTRICT HEALTH DEPARTMENT BOARD OF HEALTH

Dated:_______, 2018

By:_______
Bruce DeLong, Chairperson
"Board"

Dated:_______, 2018

By:_______

Mark W. (Marcus) Cheatham, PhD

Health Officer
"Employee"

Health Officer Wage Band

<u>Current Wage Band Effective October 1, 2018 through September 30, 2019 (1.25% increase-2,088 hours)</u> – Effective October 1, 2018 through September 30, 2019, the following wage schedule shall become effective:

P	1	2	3	4	5
\$96,048.00	\$99,388.80	\$102,729.60	\$106,091.28	\$109,452.96	\$112,793.76
\$46.00	\$47.60	\$49.20	\$50.81	\$52.42	\$54.02

Report to the Boards of Health

Jennifer Morse, MD, MPH, FAAFP, Medical Director



Mid-Michigan District Health Department, Wednesday, August 22, 2018 Central Michigan District Health Department, Wednesday, August 22, 2018 District Health Department 10, Friday, Friday 24, 2018

Skin Cancer

Skin cancer is the most commonly diagnosed cancer in the United States. There are three main types of skin cancer: melanoma, basal cell carcinoma, and squamous cell carcinoma.

Melanoma:

Melanoma is the most serious form of skin cancer and is the leading cause of death due to skin cancer. It can affect any race, though Caucasians are more commonly affected. Exposure to UV light is felt to be a risk factor, but not the only risk. About 10% of melanoma occurs in someone with a family history of melanoma and those who previously had a melanoma are at risk for developing another — only about one-third form from pre-existing moles. However, people with numerous moles or unusual appearing moles are at increased risk for melanoma. Keep an eye on moles following the "A, B, Cs" (see figure 1): A is for asymmetry; B is for border; C is for color; D is for diameter; E is for evolving or changing. Melanoma can affect any part of the body, including inside the eyeball (ocular melanoma) or the mucus membranes such as the lips, mouth, or vagina (mucosal melanoma). Though rare, children can also get melanoma.

• Basal Cell Carcinoma:

Basal Cell Carcinoma (BCC) is the most common skin cancer and is the most common cancer diagnosed world-wide. It is usually slow growing. It can be a red scaly patch or a pearly nodule (see figure 2). BCC rarely spreads through the body.

• Squamous Cell Carcinoma:

Squamous Cell Carcinoma (SCC) is the second most common skin cancer. SCC can be a scaly area, a firm nodule, or a growth with an ulcer that won't heal (see figure 2). SCC rarely spreads through the body. Rough, scaly patches called actinic keratosis may progress to SCC and can be destroyed or removed to prevent skin cancer.

Ultraviolet (UV) rays from sunlight are the most important risk for most skin cancers. These rays are a form of radiation and are damaging to the DNA, or genetic material, in skin cells just as other forms of radiation are damaging. When DNA is damaged, cells develop abnormally when they reproduce; and these abnormalities can lead to cancer. UVA and UVB are the two types of UV rays that make it through the atmosphere. UVB has a bit more energy and seems to be more damaging to DNA and is the main cause of sun burns. UVA causes long-term damage to skin such as wrinkles and can also damage DNA. Multiple studies have found that tanning beds, which primarily use UVA light, increase the rate of melanoma of the skin and the eye; and in 2009, the World Health Organization classified them as a human carcinogen. Melanomas are more associated with intense and intermittent sun exposure and sunburns and occur on areas of the body such as the back in men and the legs in women. Children and teens that have five or more severe sunburns are twice as likely to develop melanoma later in life. Non-melanoma skin cancer, such as BCC and SCC, are linked with overall sun exposure and mainly occur in areas of the body that get the most sun such as the face, back of the hands, and arms.

People with suppressed immune systems, such as those on immunosuppressing medications after an organ transplant, those with lymphoma, and those with HIV have increased rates of all types of skin cancer. Other risk factors for skin cancer include: fair skin; older age; being male; smoking (especially for SCC); HPV/warts (typically limited to SCC in oral/genital/anal areas); exposure to ionizing radiation; exposure to certain chemicals (tar, arsenic, coal, paraffin, certain oil); certain longstanding and rare skin diseases; scars from severe burns, and; genetics.

Prevention of skin cancer is ideal. This is done by protecting your skin from UV rays from the sun and indoor tanning. There are many ways you can do this:

- Seek shade when UV rays are strongest
 - o Typically 10 a.m. to 4 p.m. March through October and 9 a.m. to 3 p.m. November through February.
 - You can use "the shadow rule": if your shadow is shorter than you are, you are being exposed to more UV
 rays and should seek shade as well as skin and eye protection. If your shadow is taller than you, UV
 exposure is lower.
 - O Go to https://www.epa.gov/sunsafety/uv-index-1 to find the UV index forecast for your area. Low is 0 to 2; moderate is 3 to 5; high is 6 to 7; very high is 8 to 10; 11 or more is extreme.
- Wear clothing that covers arms and legs and a hat with a wide brim.
 - The typical T-shirt has an SPF rating lower than 15 so it alone is not enough protection. A wet T-shirt offers much less protection. Dark colors offer more protection.
 - For a list of sun protective clothing and other products approved by the Skin Cancer Foundation, so to https://www.skincancer.org/products/categories.
- Wear sunglasses that block both UVA and UVB.
- Use a broad spectrum sunscreen with SPF 30 or higher for protection from UVA and UVB rays.
 - Apply sunscreen 15 minutes before going outdoors and reapply every 2 hours and after swimming, sweating, or toweling off.
- Be extra cautious near reflective surfaces like water, snow, sand, and concrete.
- UV rays can still damage your skin when it is cool or cloudy.
- There is no such thing as a safe tan, getting a base tan to prevent burns, etc. Avoid tanning beds and burns.

Tips and facts about sunscreen:

- Sunscreens either reflect or absorb UV rays.
- SPF: this stands for Sun Protection Factor.
 - o SPF is a measure of the sunscreen's ability to protect against sunburn, primarily caused by UVB rays.
 - o SPF 15 blocks 93% of UVB rays, SPF 30 blocks 97%, SPF 50 blocks 98%, and SPF 100 blocks 99%.
 - The "15" in SPF 15 means, assuming the sunscreen didn't wear off, it would take 15 times longer for you to burn than if you did not have the sunscreen on. If you would normally burn in 20 minutes with no sunscreen, you would burn after 5 hrs. with SPF 15. Likewise, you would burn after 10 hours with SPF 30.
- It is recommended that broad-spectrum sunscreen with SPF 30 or higher is used when spending time outdoors. It is recommended that SPF 15 or higher is used daily.
- The average adult should use 1 oz. (a shot glass full) of sunscreen to adequately cover their skin.
 - An easy way to estimate this is to apply a teaspoon (about a marble size) of sunscreen to the face and neck, 2 teaspoons to the front and back of the trunk, 1 teaspoon to each arm, and 2 teaspoons to each leg.
- Sunscreens labeled broad-spectrum have passed the FDA test for protection against both UVA and UVB rays.
- Sunscreen labeled water-resistant or very water-resistant means that the SPF is maintained after 40 or 80 minutes in water or sweating, respectively.
- The American Academy of Pediatrics recommends not using sunscreen on children under six months of age unless there is no other option.
- Sunscreen is the #1 anti-aging treatment.

Recommendations:

- 1. Watch your skin for common signs of skin cancer such as new growths, changes in moles, or sores that don't heal. See your healthcare provider or dermatologist if you notice anything concerning.
- 2. UV rays are the main risk factor for the most common skin cancers. Protect yourself with sunscreen, covering skin, and avoiding high UV exposure.

- 3. Indoor tanning is not a safe alternative and should be discouraged, along with sunbathing. Children and teens should be taught this message early and repeatedly.
 - a. Michigan allows minors to use tanning devices as long as a parent provides in-person consent which is then valid for one year. In the U.S., 20 states and the District of Columbia have prohibited minors under 18 (17 in some cases) from using tanning devices, recognizing them as a health threat.

Sources:

- Centers for Disease Control and Prevention (CDC). Skin Cancer. https://www.cdc.gov/cancer/skin/
- National Council on Skin Cancer Prevention. https://www.skincancerprevention.org/
- Curiel-Lewandrowski, C. Risk factors for the development of melanoma. In: UpToDate, Atkins, M., Tsao, H., Corona, R. (ed), UpToDate Waltham, MA. (Accessed on August 12, 2018.)
- United States Environmental Protection Agency (EPA). UV Index. https://www.epa.gov/sunsafety/uv-index-1#day1
- AIM at Melanoma Foundation. Tanning Legislation 2018. State Laws with Tanning Restrictions for Minors. https://www.aimatmelanoma.org/global-

advocacy-and-engagement/melanoma-legislation/tanning-legislation-2018/

Figure 1: Is it a mole or melanoma?

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A is for asymmetry B is for border C is for color D is for diameter E is for evolving (or changing)

Normal mole Melanoma Sign Characteristic When half of the mole does Asymmetry not match the other half When the border or edges of the mole are not smooth When the mole has more Color If the mole's diameter or width Diameter is larger than a pencil eraser

Figure 2: Non-melanoma skin cancer

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- A. A raised or flat area of the skin with a sore that won't heal can be a sign of a basal cell skin cancer.
- B. Some basal cell skin cancers can look like flat, pink spots on the skin that do not go away.
- C. This red scaly spot is a squamous cell skin cancer.
- D. This pink, scaly bump is a squamous cell skin cancer.

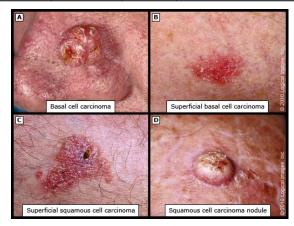


Figure 3: Actinic keratosis

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Multiple actinic keratoses presents as rough, scaly, red macules on sundamaged skin.



MICHIGAN'S PREMIER PUBLIC HEALTH CONFERENCE

REGISTRATION BROCHURE

October 9-11, 2018
DoubleTree by Hilton
Bay City, Michigan



MPPHC18

October 9-11, 2018
DoubleTree by Hilton, Bay City, Michigan

Partners in Planning:

Grand Valley State University
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Michigan Department of Agriculture and Rural Development
Michigan Department of Health and Human Services
Michigan Department of Environmental Quality
Michigan Public Health Association
Michigan Public Health Institute
Michigan State University
University of Michigan School of Public Health

REGISTRATION INFORMATION

CONFERENCE REGISTRATION

Includes Group Luncheons

Confirmations will be emailed to all registrants. Registration forms can be faxed or emailed in advance of payment to 517-485-6412 or jshaver@malph.org.

One Day \$ 99.00 **Full Conference** \$149.00 Late Fee after Sept. 28 \$ 20.00

Student & Retiree Rates Contact jshaver@malph.org

CONFERENCE LOCATION

DoubleTree by Hilton-Bay City 1 Wenonah Park Place Bay City, MI, 78708

HOTEL ACCOMMODATIONS

DoubleTree by Hilton - Bay City 989-891-6000

Group: Michigan Premier Public Health Conference- CODE: LPH

Discounted Hotel Rates: \$104.00 & Up

Reservations must be made by September 18, 2018 to receive discounted rate.

CANCELLATIONS

Cancellations must be received in writing by September 28, 2018. Fax to: 517-485-6412 or email to jshaver@malph. org. Cancellations are subject to a \$25.00 administrative fee.

EARLY CONFERENCE REGISTRATION BY SEPTEMBER 28

After September 28, 2018, add \$20

BECOME A CONFERENCE PARTNER

For more information on the benefits of supporting the conference, visit www.malph.org or email jshaver@malph.org.

SCHEDULE AT A GLANCE

TUESDAY, OCTOBER 9

Pre Conference Sessions......1:00 - 4:00 p.m.

WEDNESDAY, OCTOBER 10

Breakfast, Registration & Networking	7:30 - 8:30 a.m.
Welcome	8:30 - 8:45 a.m.
Keynote Address	9:00 - 10:00 a.m.
Breakout Sessions	10:15 - 11:15 a.m.
Networking Break, Poster Presentations, Exhibitors	11:30 - 12:00 p.m.
Lunch	12:00 - 12:45 p.m.
Awards	12:45 - 1:15 p.m.
Breakout Sessions	1:30 - 2:30 p.m.
Breakout Sessions	2:45 - 3:45 p.m.
Networking Break, Poster Presentations, Exhibitors	4:00 - 4:30 p.m.
Keynote Address	4:30 - 5:30 p.m.
Wrap Up & Adjourn	5:30 - 5:40 p.m.

THURSDAY, OCTOBER 11

Exercise Activity	7:00 - 7:45 a.m.
Breakfast, Registration & Networking	7:45 - 8:45 a.m.
Keynote Address	8:45 - 9:45 a.m.
Breakout Sessions	10:00 - 11:00 a.m.
Breakout Sessions, Poster Presentations,	
Exhibitors	11:15- 11:30 p.m.
Lunch	11:30 - 12:15 p.m.
Breakout Sessions	12:30- 1:30 p.m.
Networking Break	1:45 - 2:00 p.m.
Keynote Address	2:15 - 3:15 p.m.
Raffle (must be present to win)	3:15 - 3:30 p.m.

Continuing Education

Continuing Nursing Education (CNE) Contact Hours:

Criteria for successful completion include verified attendance at the event and submission of a completed evaluation form. A Continuing Education Certificate will be included after the evaluation is completed. The total contact hours will tally according to the sessions attended from the evaluation. The total potential nursing contact hours are as follows:

Day 1- October 10, 2018: 5.0 Day 2- October 11, 2018: 4.0

Disclosures:

- This event is jointly provided by the Michigan State University College of Nursing and the Michigan Association of Local Public Health (MALPH
- There is no conflict of interest for anyone with the ability to control content for this activity.

Michigan State University College of Nursing is a provider of continuing nursing education by Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

CHES/MCHES:

SOPHE, including its chapters, is a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designated for Certified Health Education Specialists (CHES) and/or Master Certified Health Education Specialists (MCHES) to receive up to 9 total Category I Continuing Education Contact Hours (CECH). Maximum Advanced-level continuing education contact hours available are 9.

TUESDAY, OCTOBER 9

PRE CONFERENCE SESSIONS

1:00 - 4:00 P.M.

P-101

EMBRACING QUALITY IN PUBLIC HEALTH: ALIGNING PERFORMANCE MANAGEMENT, QUALITY IMPROVEMENT, AND WORKFORCE DEVELOPMENT ACTIVITIES.

This free pre-session training provides an orientation to performance management, quality improvement, and workforce development in a public health context to build capacity to participate in national public health accreditation and the Michigan Accreditation Program's Quality Improvement Supplement. Attendees will receive information on building systems and implementing tools that improve quality; how performance management, quality improvement and workforce development all align with one another; and engage in sharing and hands-on activities.

Jessie Jones, MPA, ASQ-CQIA, Michigan Public Health Institute

Rachel Melody, MPH, ASQ-CQIA, ASQ-CQPA, Michigan Department of Health and Human Services

Jeanette Ball, MS, Michigan Public Health Institute

1:00-3:00PM

P-102

MOTHER INFANT HEALTH IMPROVEMENT PLAN: TOGETHER, SAVING LIVES

The current Infant Mortality Reduction Plan will be sunsetting next year; the new Mother Infant Health Improvement Plan (MIHIP) will strive to bridge efforts between private and public as well as maternal and infant stakeholders. During this presentation, we will demonstrate how the MIHIP will strategically align resources through collaboration. We will discuss the community recruitment strategies as we developed our regional town hall meetings. Finally, we will discuss implementation of the MIHIP and using QI projects to build momentum.

Lynette Biery, Michigan Department of Health and Human Services

1:00-4:00PM

P-103

LOCAL HEALTH DEPARTMENT COLLABORATION AND EXPLORATION OF SHARED APPROACH TO DELIVERY OF SERVICES

Earlier in the year, the Michigan Department of Health and Human Services (MDHHS) announced the availability of funds to continue the exploration of service sharing agreements and/or collaboration in the operations (role and function) of Michigan's local health departments. Collaboration and/or a shared approach to delivery of services, also known as Cross Jurisdictional Sharing (CJS), are significant concepts in public health service delivery in America. CJS is recognized by NACCHO and supported by the Center for Sharing Public Health Services. The Center serves as a national resource on CJS, building the evidence, and disseminating tools, methods and models to assist local health departments and policy makers as they consider and adopt CJS approaches. Ten local health departments received dollars to implement CJS projects. A panel of those health departments and MDHHS local health services staff will discuss their road map to include exploration. preparedness and planning, and finally implementation and improvement.

1:00-4:00PM

P-104

NETSMART USER GROUP MEETING & RECEPTION

Information to follow in onsite conference brochure.

9:00 - 10:00 A.M.

KEYNOTE ADDRESS

THE CHANGES NEEDED TO CONTINUE PUBLIC HEALTH'S PROUD HISTORY

Public health professionals need to adapt to remain relevant and effective. This isn't easy with shifting demographics, new health challenges, unpredictable federal policies and declining resources. To help, new approaches have been developed that provide a toolkit and a roadmap to the future. Sometimes referred to as Public Health 3.0, Chief Health Strategist or Foundational Capabilities, all share some common traits. The presentation will review them and propose how to take effective action steps.

John Auerbach, MBA, President and CEO, Trust for America's Health

10:15 - 11:15 A.M.

SESSION 101

ANTECEDENTS TO EFFECTIVE TAILORED COMMUNICATION FOR OBTAINING MORE LOCAL RESOURCES: PRELIMINARY FINDINGS

An account of an eclectic mix of behavioral economics, social psychology, political science, public policy, and old fashioned face-to-face advocacy by two Health Officers to get more resources from their local governing entities just so that they could make their communities safer.

Jon Gonzalez, MPP, Special Programs Coordinator, Michigan Department of Health and Human Services

Angelique Joynes, MPH, RN, Health Officer, Allegan County Health Department

Bryant Wilke, RS, MPH, Health Officer, Sanilac County Health Department

SESSION 102

LEVERAGING YOUR WORKFORCE TO EXTEND YOUR STRATEGIC LEADERSHIP REACH

Public Health 3.0 requires a health department workforce that is ready to strengthen its knowledge base, skills, and tools to meet the evolving challenges to population health and to think and act in a systems perspective. This presentation describes how to leverage a workforce development plan to expand and hone your workforce to extend your strategic leadership reach so that the role of Chief Health Strategist is the role of the department, not just the Health Officer.

Chelsea Lantto, MSPH, MCHES

SESSION 103

LIVING AN AHA! MOMENT: CLICK, CLICK, BOOM INTO A STRONGER REALITY

St. Clair County Health Department (SCCHD) presents how moving from the most popular community engagement model to the least actually worked! Increasing the use of community input was simultaneously occurring as SCCHD entered into the SE Michigan Hepatitis A Outbreak and leadership was engaged through both a large Community Health Assessment and the Maternal Child Health Needs Assessment. As the perfect storm was emerging for the "aha" moment, hepatitis vaccine uptake was poor. Through inter-professional coalitions and internal planning, the concept of Hepatitis ambassadors emerged.

Liz King, RN, BSN, Nursing & Community Health Director, St. Clair County Health Department

Margaret Sturgis, RN, MSA, Preventative Health & Immunizations Nursing Supervisor, St. Clair County Health Department

Jennifer Michaluk, M.Ed, CHES, Director of Health Education & Planning, St. Clair County Health Department

SESSION 104

HARNESSING DATA AND COLLABORATION TO IMPLEMENT PUBLIC HEALTH 3.0 IN OAKLAND COUNTY

Oakland County Health Division (OCHD), with the launch of their 2017-2022 Strategic Plan, commits to transforming public health by launching a Public Health 3.0 model. OCHD's strategic plan will be a roadmap for public health practice to evolve and focus on ensuring that the conditions exist for everyone to be healthy. This presentation will provide an overview of OCHD's strategies for adapting its public health infrastructure, increasing data use, and developing and strengthening its partnerships.

Carrie Hribar, MA, Planning & Evaluation Supervisor, Oakland County Health Division

Leigh-Anne Stafford, MSA, Health Officer, Oakland County Health Division

SESSION 105

MITRACKING: INTEGRATING ENVIRONMENTAL HAZARD AND HEALTH DATA

The Michigan Environmental Public Health Tracking Program (MiTracking), can help bridge the knowledge gap between environmental hazards and public health. MiTracking gathers existing Michigan-specific environmental and health data and provides them in one online location. The presentation will consist of a live demonstration of the MiTracking portal to inform potential users on how to access and use the publicly available data. The presentation will highlight collaborations and MiTracking's role in the process.

Jamie Florida, MPH, Health Educator, Michigan Department of Health and Human Services

Jill Maras, MPH, MiTracking Program Manager, Michigan Department of Health and Human Services

1:30 - 2:30 P.M.

SESSION 201

PROMOTING VACCINE CONFIDENCE: A NEW APPROACH TO VACCINE HESITANCY

This session will focus on evidence-based strategies regarding approaches to discussing immunizations with patients, parents and guardians and dispelling myths pertaining to vaccines. Strategies will be discussed on how to give a strong provider message that is a consistent office message and will help build vaccine confidence.

Annette Mercatante, MD, MPH, Medical Health Officer, St. Clair County Health Department

SESSION 202

GALVANIZING CROSS-SECTORAL APPROACHES TO ALZHEIMER'S AS A PUBLIC HEALTH ISSUE: THE ESSENTIAL ROLE OF HEALTH STRATEGISTS

In Michigan, Alzheimer's and other dementias is a fast-growing public health issue. The latest data related to Alzheimer's and dementia and the updated 2018 Michigan Dementia Plan will be shared during this presentation. Additionally, participants will learn how to effectively assist caregivers and persons living with dementia through local public health agencies and partnerships.

Jennifer Lepard, BA, President/CEO, Alzheimer's Association Greater Michigan Chapter

SESSION 203

SYRINGE SERVICE PROGRAMS (SSP) "A DISCUSSION"

The opioid crisis has impacted communities all over the United States. This session will provide insight on how four rural Health Departments have begun to fight the opioid crisis by implementing Syringe Service Programs in their respective communities. Through an open discussion, they will share their challenges and successes in getting their programs up and running.

Andre Truss (Moderator), BA, Community Planner, Michigan Department of Health and Human Services

Teresa Frankovich, MD, MPH, Medical Director, Dickinson-Iron District, Marquette County, Delta & Menominee Counties, and Western Upper Peninsula Health Departments

Jennifer Morse, MD, MPH, FAAFP, Medical Director, Central Michigan District, Mid-Michigan District, and District #10 Health Departments

Heather Villarreal, RN, Public Health Coordinator, District Health Department #2

Karen Senkus, MPA, LBSW, Health Officer, Chippewa County Health Department

SESSION 204

COMMUNICATING THE IMPACT AND VALUE OF LOCAL PUBLIC HEALTH IN MICHIGAN

There are such a diverse array of public health programs and services that finding clear and effective messages and tools is a challenge. The session will address how Michigan health departments can use a free toolkit to communicate the impact of local public health services and programs. Best practices in data visualization, information design, and message framing were used to develop a set of impact communications that are easy to read and understand.

Anne Barna, MA, Planning, Promotion, and Evaluation Manager, Barry-Eaton District Health Department

Susan Peters, DVM, MPH, Health Analyst, Barry-Eaton District Health Department

SESSION 205

THE PAST, PRESENT AND FUTURE OF LEAD ABATEMENT FROM THE LEAD SAFE HOMES PROGRAM

In Michigan, 5,700 (3.6%) children less than six years old were diagnosed with an elevated blood lead level. There is new opportunity for the expansion of lead hazard control services in communities and lead safe homes for families in Michigan. During this presentation we will share our experience and vision of the future of lead hazard control.

Melissa Steiner, MSA, CHES, Outreach Analyst, Michigan Department of Health and Human Services

Courtney Wisinski, MPH, Michigan Department of Health and Human Services

2:45 - 3:45 P.M.

SESSION 301

LEADING HIGH PERFORMANCE ENVIRONMENTAL HEALTH SERVICES

We hear the buzz words of engagement, benchmarking, stakeholders, customer focus, continuous improvement... How does a Public Health Leader bring this together in a meaningful way that goes beyond the "buzz" and develops a sustainable organizational culture? Allegan County will share its experience of engaging staff, community stakeholders and decision makers in the process of setting customer focused expectations for Environmental Health services.

Angelique Joynes, MPH, RN, Health Officer, Allegan County Health Department

Robert J. Sarro, Allegan County Administrator

Randy Rapp, RS, Environmental Health Services Manager, Allegan County Health Department

SESSION 302

LOCAL PUBLIC HEALTH PARTICIPATION IN RESEARCH AND DATA PRODUCTION: A NATIONAL SCIENCE FOUNDATION EXAMPLE

The presentation describes survey implementation using respondent driven sampling (RDS) in three Michigan counties (Wayne, Macomb and St. Clair) focusing on intravenous drug use, including opiate injection. Successful implementation of RDS and survey response rates (N=582) varied dramatically by county. This presentation highlights participation of the local public health departments in planning the survey questions, implementation, and data distribution from the perspective of a university researcher, a medical health officer and a student research assistant.

Juliette Roddy, MBA, PhD, Professor, University of Michigan Dearborn Annette Mercatante, MD, MPH, Medical Health Officer, St. Clair County Health Department

Paris Freeman, Student, University of Michigan Dearborn

SESSION 303

THE NORTHERN MICHIGAN PUBLIC HEALTH ALLIANCE: CHIEF HEALTH STRATEGIST IN THE NORTHERN MICHIGAN COMMUNITY HEALTH INNOVATION REGION AND BEYOND

The Northern Michigan Public Health Alliance embodies Public Health 3.0 and the role of Chief Health Strategist. Based on our experience in population health and clinical community linkages, MDHHS designated the Alliance as backbone for the Northern Michigan Community Health Innovation Region, one of five "CHIRs" in the Michigan SIM—and the only one led by public health. In this session, participants will learn about the Alliance experience as Chief Health Strategist across a large rural region.

Wendy Hirschenberger, MPH, Health Officer, Grand Traverse County Health Department

Jane Sundmacher, M.Ed, Executive Director, Northern Michigan Community Health Innovation Region

Lisa Peacock, MSN, WNP-BC, Health Officer, Health Department of Northwest Michigan and Benzie-Leelanau District Health Department

SESSION 304

GRASPING THE DREAM: FACILITATING THE ADOPTION OF "UNDETECTABLE" UNTRANSMITTABLE" IN PHILOSOPHY AND PRACTICE

The CDC has stated, "people (...living with HIV) who take antiretroviral therapy daily as prescribed and achieve and maintain an undetectable viral load have effectively no risk of sexually transmitting the virus..." This concept, Undetectable = Untransmittable (U=U), is a major paradigm shift, given that HIV has been synonymous with "death sentence", and "vector of disease" for several decades. Come explore, "what is the impact on public health if some people living with HIV cannot transmit HIV sexually?"

Amy S. Peterson, MPH, STD Program Specialist, Michigan Department of Health and Human Services

SESSION 305

OPIOIDS, DIABETES, AND KICKBALL — OH MY: RE-IMAGINEERING PUBLIC HEALTH THROUGH THE PRACTICE OF PARKS AND RECREATION

Re-Imagineering public health through parks and recreational practice invites the imagination to re-create healthy communities beyond traditional boundaries that are supported by public engagement. Through collaborative and cross-sector efforts, public health sectors can develop community-wide approaches that directly address broad social and environmental determinants of health to ensure conditions where all people can be healthy. Parks and recreation provide social and physical environments that drive health behaviors where people live, learn, work, and play.

Dwight Washington, PhD, M.Ed, Commissioner, Clinton County

4:30 - 5:30 P.M.

KEYNOTE ADDRESS

ETHICAL CHALLENGES AND DECISION MAKING FOR STRATEGIC PUBLIC HEALTH LEADERSHIP: IMPLEMENTING A PUBLIC HEALTH ETHICS INFRASTRUCTURE IN LOCAL HEALTH DEPARTMENTS

Future public health leaders will continue to grapple with decisions that present ethical challenges related to justice, health disparities and the social determinants of health. Identifying these challenges, analyzing the ethical conflicts, and developing alternatives for resolving ethical tensions will increasingly be a part of public health practice. This presentation will explore practical strategies for establishing a sustainable ethics infrastructure to improve decision making that can build public trust while meeting accreditation standards.

Alan Melnick, MD, MPH, CPH, Director/Health Officer, Clark County Public Health

THURSDAY, OCTOBER 11

7:00 - 7:45 A.M.

EXERCISE ACTIVITY

CARI DRAFT, PERSONAL FITNESS TRAINER, FOUNDER AND OWNER OF ECOTREK FITNESS

Back by popular demand! Cari Draft is one of the lakeshore's most active and community-involved personal fitness trainers. While she is founder and owner of EcoTrek Fitness (unique outdoor group workouts with several series all over Michigan) she also trains numerous fitness clients, ranging from marathon runners to men and women of all ages interested in losing weight or just feeling more fit.

8:45 - 9:45 A.M.

KEYNOTE ADDRESS

PREPARING FOR AND RESPONDING TO PUBLIC HEALTH AND MEDICAL EMERGENCIES/DISASTERS

With examples of actual past events spanning nearly 40 years, the presenter will discuss the public health and medical preparedness and response activities necessary because of both intentional and unintentional incidents creating the emergency or disaster. From Assessment to Rumor Control, 21 other public health and medical issues will be discussed using real experiences and pictures from the field.

Ronald C. Burger, CDC, Retired

10:00 - 11:00 A.M.

SESSION 401

SHARE TABLES AS AN INTERVENTION TO FOOD WASTE: A STUDY OF THREE ELEMENTARY SCHOOLS IN OTTAWA COUNTY, MICHIGAN

Food Waste is a sizeable issue in school cafeterias. The United States Department of Agriculture has promoted Share Tables as an intervention to Food Waste in School Cafeterias. Rebekah Folkert, MPH, REHS, will share her graduate student research project addressing school waste and share table use in elementary school cafeterias. Presentation will also include a description of the collaboration between Health Promotion and Environmental Health and references provided to schools to ensure food safety compliance.

Rebekah Folkert, MPH, REHS, Environmental Health Specialist, Ottawa County Health Department of Public Health

SESSION 402

A COMMUNITY'S RESPONSE TO THE 2017 FLOODING

This presentation will demonstrate one local health department's efforts to assist the community in maintaining life health and safety. Central Michigan District Health Department and Isabella County Emergency Management will describe the public health efforts and the importance of collaboration between entities during a response.

Melissa DeRoche, Emergency Preparedness Coordinator, Central Michigan District Health Department

McCarther Griffis, MA, PEM, CEM, ENP, Director of 911 and Emergency Management, Isabella County

THURSDAY, OCTOBER 11

SESSION 403

THE WURTSMITH STORY: LOCAL PUBLIC HEALTH'S RESPONSE TO AN UNKNOWN EMERGING CONTAMINANT

On February 26, 2016 a Health Advisory was issued for 24 groundwater drinking wells located near the former Wurtsmith Air Force Base in Oscoda Township in relation to elevated levels of perfluoroalkyl substances or PFAS. In the 2.5 years since the initial advisory, the affected area has grown to approximately 400 groundwater wells and two local townships with a response involving local public health, multiple state agencies and elected officials.

Denise M. Bryan, MPA, Health Officer, District Health Departments #2 & #4

Cori Upper, Emergency Preparedness Coordinator, District Health Department #2

Tracey Wood, MHA, Public Information Officer, District Health Department #2

SESSION 404

THE HERO(IN) WE NEED: CREATING AN INTEGRATED OPIATE SURVEILLANCE SYSTEM

Knowledge is power, especially when collective knowledge is shared to enact change. In response to the burgeoning opiate crisis, Macomb County engaged different disciplines interacting with the epidemic (police, EMS, hospitals, and Medical Examiners) to create an integrated surveillance system that provides monitoring, evaluation, and data visualization of geographically-specific non-fatal and fatal opioid-involved overdoses. We'll highlight the development process, ways to display data for community connection, and the synergistic benefits of such partnerships.

Em Maier, MPH, Epidemiologist, Macomb County Health Department Mirissa Bosch, BA, Public Health Associate, Macomb County Health Department

SESSION 405

EXTRA-DYADIC ENCOUNTERS & CONSENSUAL NON-MONOGAMY: A PUBLIC HEALTH NIGHTMARE?

This presentation deconstructs the myth of consensual non-monogamy (CNM) as invariably high risk in comparison to the idealized relationship configuration of monogamy. Looking at partner communication, safer sex practices, and planning of extradyadic encounters, this presentation critically analyzes both ostensible monogamy and CNM and factors related to actual risk. Factors that create a more nuanced picture of health and risk will be discussed.

Morgan Perry, BS, MPHc, Research Assistant, Michigan Alzheimer's Disease Center, Michigan Medicine

12:30 - 1:30 P.M.

SESSION 501

VOLUNTEER RECEPTION CENTERS: USING VOLUNTEERS TO GET MORE VOLUNTEERS

In Region 3, Public Health, County Emergency Managers and the Region 3 Healthcare Coalition have worked collaboratively with volunteer groups like Citizens Corps, CERT Teams, Medical Reserve Corps and other groups to create a regional Volunteer Reception Center Plan. Volunteer groups have been trained to operate the Volunteer Reception Center and are deployable throughout the region to assist emergency response personnel when they are overwhelmed by large scale emergencies.

Cori Upper, Emergency Preparedness Coordinator, District Health Department #2

Melissa DeRoche, Emergency Preparedness Coordinator, Central Michigan District Health Department

Melissa Maillette, Emergency Preparedness & Health Education Division Manager, Bay County Health Department

THURSDAY, OCTOBER 11

SESSION 502

BIRDS, BEES, & TREES: CHANGING CONVERSATION AND STRATEGY TO ADDRESS SEXUAL HEALTH

We've all heard of the birds & the bees... but trees, too? This presentation will explore how local data, constituent voice, and evidence-based programming (the tree's roots) provides a foundation to mobilize change. Observe how local public health in the role of chief health strategist (the tree's trunk), pulled together community partners (the tree's branches) and navigated pesky obstacles (bees) to make a collective impact on the sexual health of a community.

Katie Jourdan, MPH, CHES, Public Health Educator, District Health Department #10

Sarah Oleniczak, MPH, MCHES, Deputy Health Officer, District Health Department #10

Kate Donaldson, MPH, CHES, Public Health Educator, District Health Department #10

SESSION 503

MARQUETTE AREA CLIMATE ADAPTATION: A RURAL COMMUNITY DESIGNS A HEALTHY AND RESILIENT FUTURE

The Michigan Climate and Health Adaptation Program (MDHHS) teamed up with MSU Extension, the Marquette County Health Department, and Marquette County Climate Adaptation Task Force to address climate health threats in the county through changes in local policies and physical design. The team is engaging community members and local officials in a series of facilitated discussions and workshops. They will discuss how to bring health into community planning and get buy in for proposed solutions.

Lorraine Cameron, MPH, PhD, Senior Environmental Epidemiologist, Michigan Department of Health and Human Services

Gerald Messana, MPA, Health Officer, Marquette County Health Department

Wayne R. Beyea, JD, MPA, BS, AICP, Senior Specialist, Michigan State University

SESSION 504

BUILDING STRATEGIC PARTNERSHIPS THROUGH SHARED POPULATION HEALTH PRIORITIES

Partnerships involving public health agencies, health care systems, and researchers are necessary to create healthier communities. Unfortunately, differences over key terms, such as population health, can be a barrier to collaboration. Participants will learn about recent efforts of the MSU Department of Family Medicine regarding population health terminology and priorities. Participants will then discuss opportunities for collaboration among public health, primary care, and academics to achieve population health goals.

John vanSchagen, MD, FAAFP, Senior Associate Chair, Michigan State University Department of Family Medicine

Molly Polverento, MSEd, CPH, Outreach Specialist, Michigan State University, Department of Family Medicine

SESSION 505

OLD MCDONALD HAD A COUNTY FAIR: LIVINGSTON COUNTY'S SWINE FLU OUTBREAK

This will be a panel discussion. More details to follow in the onsite brochure.

2:15 - 3:15 P.M.

KEYNOTE ADDRESS

EMERGING VECTOR-BORNE DISEASES IN MICHIGAN: POTENTIAL IMPACTS OF CLIMATE CHANGE AND THE CASE FOR ENHANCED SURVEILLANCE

Surveillance and control of emerging vector-borne diseases is an important function of public health agencies. The recent expansion of Lyme disease in Michigan, and the global emergence of Zika virus highlight the potentially rapid changes in potential risk faced by the public. With looming global climate change, it is critical to understand the relationship between weather, climate, and vector-borne disease risk.

Erik Foster, MS, Medical Entomologist, Michigan Department of Health and Human Services

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Midland County Health Department

MICHIGAN'S PREMIER PUBLIC HEALTH CONFERENCE

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MID-MICHIGAN DISTRICT HEALTH DEPARTMENT

An Accredited Local Public Health Department

www.mmdhd.org

CLINTON
Branch Office
1307 E. Townsend Rd.
St. Johns, MI 48879-9036
(989) 224-2195

GRATIOT
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(989) 875-3681

MONTCALM Branch Office 615 N. State St., Ste. 1 Stanton, MI 48888-9702 (989) 831-5237 ADMINISTRATIVE OFFICES 615 N. State St. Ste. 2 Stanton, MI 48888-9702 (989) 831-5237



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Board of Health (BOH) Action Sheet

Date:	August 22, 2018	Administrator:	Liz Braddoo Environme	ck, Director of ntal Health
Subject:	Draft Septic Management Ordinance	☐ Information	Only	
I. Autho	ority For This Action:			
□ Lo	ocal Policy			

II. Summary:

(Previous board action relating to this item? Background information and if any future action anticipated.)

At the May 2018 BOH meeting, the Mid-Michigan District Health Department (MMDHD) was directed to develop a draft district-wide Septic Management Ordinance. MMDHD collaborated with community partners who participated on the 2018 Mid-Michigan Water Quality Committee to develop a septic management program for the District. The draft Septic Management Ordinance is to be incorporated into the current MMDHD Environmental Health Regulations. Policy and procedures will be developed to provide uniformity and consistency to the program, along with software enhancements to ensure timeliness and efficiency in enforcing the ordinance.

III. Strategic Objective, Health Issue, or other Need Addressed:

Law or Rule Public Health Code, Act 368 of 1978, MCL 333.2441

(What priority should be given in relation to goals? Include reason for recommending change in priorities and how the need will be introduced into planning process.)

Septic systems can effectively treat wastewater when properly maintained, but when systems are not operating as designed, they pose a significant risk to human health and the environment. The District's Environmental Health (EH) Regulations (Sanitary Code) specifies construction and location requirements for installation of on-site sewage disposal systems. The current regulations do not provide for a mechanism to inspect septic systems after installation or inspect premises to ensure an adequate septic disposal system serves a dwelling. The proposed septic ordinance will address the public health concerns associated with dwellings and structures that operate without a septic system. Demonstration of adequate septic systems serving dwellings will be necessary as part of this ordinance in order to identify dwellings that are served by septic systems that detrimentally impact watersheds in our District.

IV. Fiscal Impact and Cost:

(Immediate, ongoing, and future impact.)

The program would be fee based with a low fee charged by MMDHD for each discharge permit issued. The fee would cover the Administrative cost of the Health Department implementing the program.

V. Alternatives Considered:

(Scope of options reviewed. Reasons for rejecting alternatives.)

The committee reviewed a "time of sale model" that would require septic systems to be inspected when a property transaction occurred. This approach would not fully capture the public health concern of the district since many homes in the region do not sell frequently; and only a limited number of properties would be inspected. Additionally, there is also no mechanism in this type of program to ensure that there is ongoing maintenance that occurs after the sale.

VI. Recommendation:

(Advantages/benefits of proposal. Expected results. Possible problems or disadvantages of proposal. Effect of action on agency. Consequences of not approving recommendation or taking action.)

I recommend that the BOH support the attached draft septic ordinance that will be included in our current Environmental Health Regulations that will address public health concerns associated with existing onsite septic systems within the MMDHD district. If the BOH supports the draft ordinance, the document will be presented to the three County Boards of Commissioners for approval and inclusion in the MMDHD EH Regulations.

VII. Monitoring and Reporting Time Line:

(Evaluation method and timeline. Next report to the Board.)

An effective date of October 1, 2019 is proposed for the ordinance. I will report back to the BOH regarding the progress and public acceptance of the Septic Management Ordinance.

Section 1 - discharge permit for any premises

- 1.1 The Health Officer shall require all sewage disposal systems in the District to operate under the requirements of a discharge permit.
- 1.2 The Health Officer is authorized to require an inspection of any premises to ensure that it has a sewage disposal system that is operating as designed and that prevents sewage from entering the watersheds of the District. The Health Officer shall issue a discharge permit to any sewage disposal system that meets the requirements of this code (Sections 3 and 7).
- 1.3 Application for Permits: An application for a discharge permit shall be made by the property owner or authorized representative to the Health Officer at the following times:
 - a) When notified in writing by the Health Officer
 - Upon submittal of a septic system inspection report or
 - c) As requested by the property owner
- 1.4 A discharge permit shall be issued automatically with the issuance of a final inspection of a sewage disposal system permit.
- 1.5 Application Exemption: The Health Officer may exempt an owner from making an application for a discharge permit if documentation can be provided that demonstrates the property has been vacant or unused for a period of 36 consecutive months in a 5 year period.
- 1.6 A discharge permit shall be issued upon review and approval of a discharge permit application and a septic system inspection report submitted with a pass designation by a Registered Septic System Inspector as described in Section 3 of this chapter.
- 1.7 Transfer of Permits: Should the ownership for the property for which a permit has been issued change, the permit maybe transferred to the new owner. Such transfer must be requested in writing on forms to be provided by the Health Officer.
- 1.8 Rescinding of Permits: If conditions exist that indicate an imminent health hazard, the Health Officer shall rescind a permit. A permit may be reinstated if corrective actions are completed and verified by the Health Officer.
- 1.9 Denial of Permits: The Health Officer may deny the issuance of a permit under one or more of the following conditions that has been identified by a Registered Septic System Inspector and reported to MMDHD;
 - a) No sewage disposal system can be located that serves the dwelling
 - b) A portion of the sewage disposal system is not located on the property
 - c) The condition of the sewage disposal system is a hazard and a threat to public safety

- d) Evidence of effluent discharging to the ground or in to any lake, river, waterway, county drain or storm drain
- e) Evidence of a sewage disposal field or tile system that will not effectively treat wastewater
- f) Evidence of a direct connection between a septic tank and a waterway
- g) Sewage failure exists at a location where public sewer connection is available
- h) Imminent health hazard exists at a location where public sewer connection is available
- i) The permit application contains false information that is material to the decision to issue a permit
- 1.10 Correction Notice: The Health Officer may issue corrective orders where conditions exist that prevent the issuance of a discharge permit.
- 1.11 Expiration of Permits: Any permit issued pursuant to the requirements of the preceding sections shall be valid for the term of 10 years from the date of issuance, unless rescinded as provided in Section 1.5 of these regulations. The Health Office shall issue a permit for a period of less than 10 years if an inspection indicates marginal site conditions for supporting onsite wastewater disposal or the system is at risk for failure.

Section 2 – System Maintenance

- 2.1 Pumper's Reports: Licensed Septage Haulers shall provide pumper's inspection reports to the Health Department on a form provided by the Health Department when septic tanks are pumped as part of periodic maintenance.
- 2.2 The Health Officer shall require a septic system inspection if a pumper's report suggests a sewage disposal system failure.
- 2.3 Alternative Sewage Disposal Systems: Existing Alternative Sewage Disposal Systems that continue to meet Chapter 3, Section 5.2 of these Regulations shall not be required to obtain an additional septic system inspection but will be required to apply for a discharge permit.
- 2.4 Properties that have a deed restriction indicating yearly maintenance requirements shall provide copies of yearly maintenance to MMDHD. Maintenance reports shall be reviewed as part of the property's application for a discharge permit.

Section 3 - Inspection and Registration

3.1 Registration: All individuals performing work under this Regulation within the counties of Clinton, Gratiot and Montcalm shall apply for and pay a registration fee to be registered with the Mid-

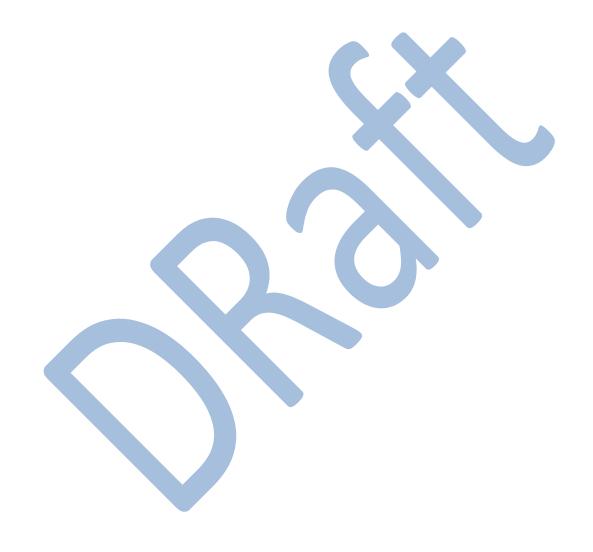
Michigan District Health Department as a Registered Septic System Inspector. Registration shall be valid for 5 years from date of issuance.

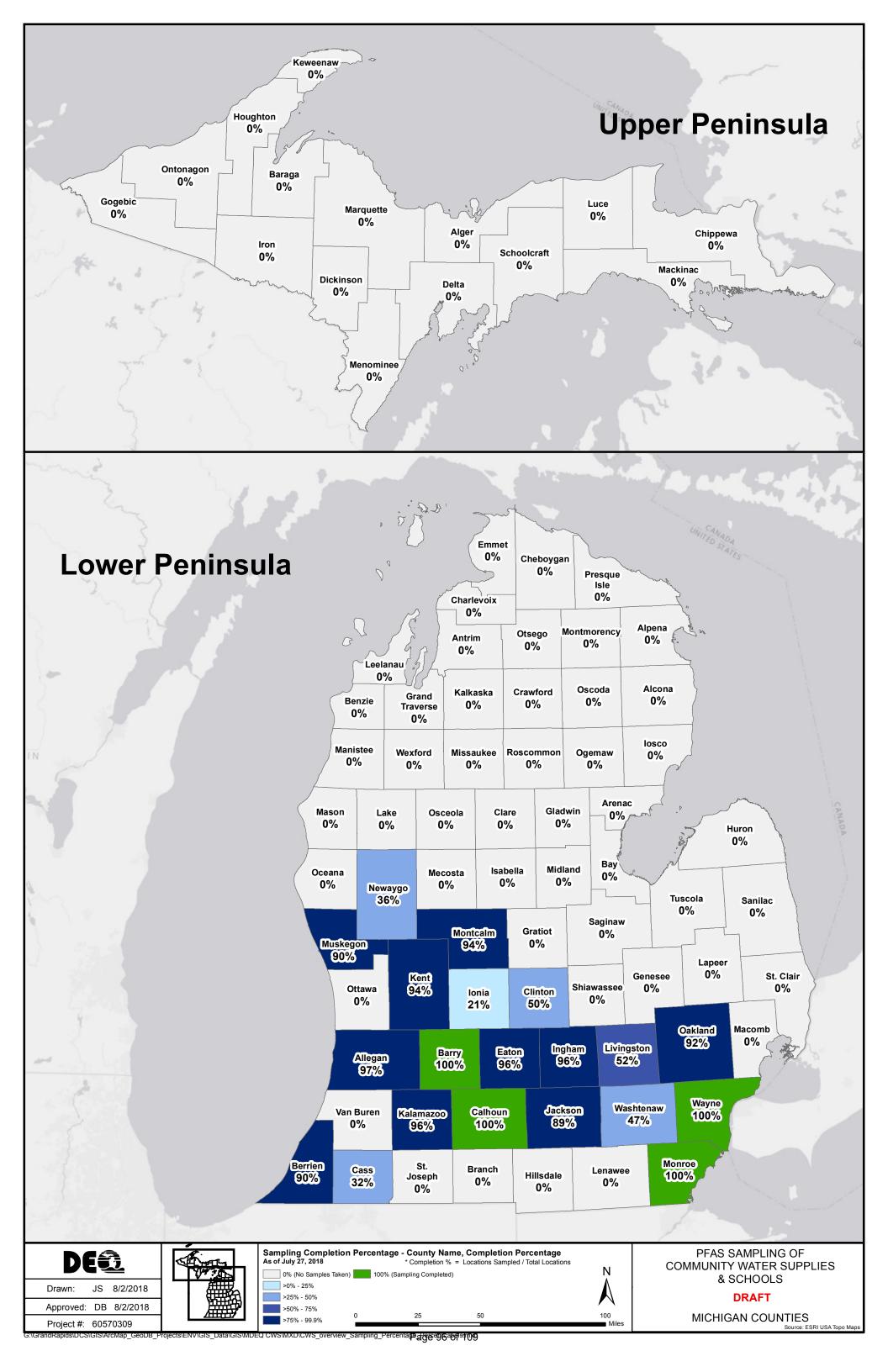
- 3.2 The Health Department shall maintain a list of Registered Septic System Inspectors.
- 3.3 The Health officer may revoke the registration of a Registered Septic System Inspector when failure to abide by Environmental Health Regulations occurs.
- 3.4 Persons seeking to become a Registered Septic System Inspector must demonstrate knowledge of construction practices, operational standards and know the causes and indicators of On-site sewage disposal system failures. Documentation of successful completion of a current training course approved by the Health Department shall be presented to the Health Officer at time of Registration.
- 3.5 Candidates that meet the registration requirements will be required to attend a consultation meeting with the Health Officer prior to the issuance of a Registration.
- 3.6 Periodically during each registration period, the Health Department shall conduct Quality Assurance and Quality Control review of Registered Septic System Inspectors files and field work review.
- 3.7 Designated representatives of the Health Department who hold an RS or REHS credential or are endorsed by the Health Officer may conduct septic system inspection as directed by the Health Officer.

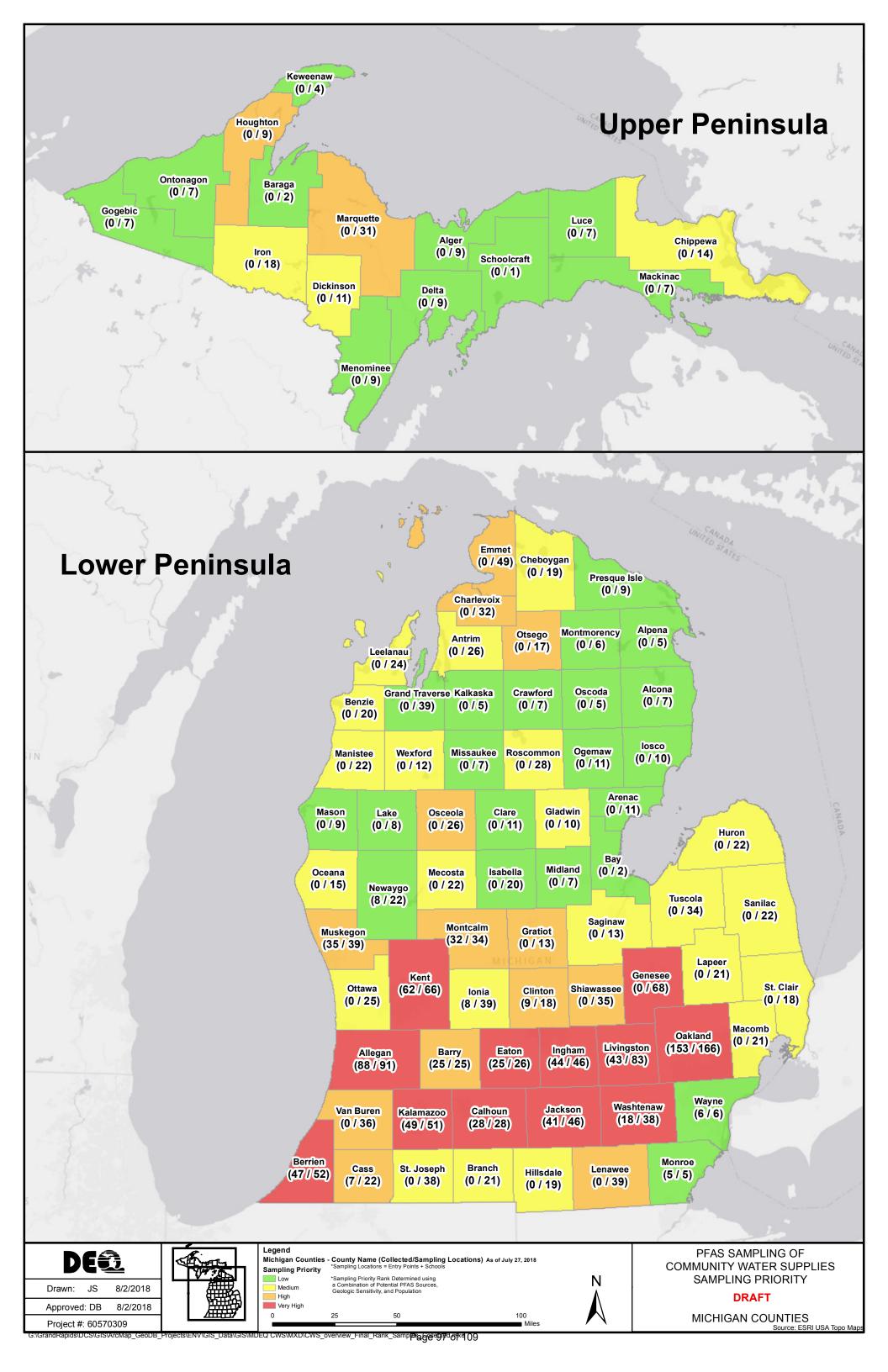
3.8

- 3.9 A Registered Septic System Inspector shall collect sufficient information through a site inspection to determine whether a sewage disposal system is properly treating sewage effluent. The Health Department will review this information and issue a pass or fail determination.
- 3.10 A Registered Septic System Inspector shall report the results of their inspection electronically to the Health Department promptly following the date of inspection.
- 3.11 A Registered Septic System Inspector shall notify the Health Officer within 5 days if an imminent public health hazards exists at a property being inspected.
- 3.12 A Registered Septic System Inspector who is also registered as a septic installer at MMDHD shall not install a replacement septic system on a property without the homeowner or authorized representative applying for a permit to construct, alter or extend a sewage disposal system
- 3.13 A Registered Septic System Inspector who is also registered as a Septic Installer at MMDHD shall not install a replacement sewage disposal system on the same property in an effort to obtain a discharge permit.

3.14 A Registered Septic System Inspector may perform limited work during an inspection at the discretion of the homeowner with or without being a septic installer in MMDHD as long as such work is limited to above ground or tank enhancement.







LOCAL HEALTH DEPARTMENT SITUATION REPORT (SITREP) Updated 11/17/17

Workplan (WP) activities are referenced in this document according to the WP Objective and Activity Number (i.e., WP #2.1)

SECTION 1: CURRENT STATUS

Report Type		Report Status		Report Creation Date	
☐ INITIAL	☐ UPDATE #	Advisory: No Action Required Alert: Action Required see "Critical Issues"		Report Date:	
Incident / Event	Information			User Information	
Region:		Local Health Jurisdiction:		Report Creator:	
Incident / Event Na	me:	Incident Date: Incident Time:		Position:	
Incident Location / /	Address:	Incident City:	Phone:		
Incident Type:		Estimated Population Affected:		Cell Phone:	
Status:				Email:	
NO CHA	NGE IMPROVING W	ORSENING			
Current Local F	Public Health System Condi	tion:			
			SIGNIFICANT Assistance required from outside the jurisdiction		
Under Control: Assistance Re		SOME Assistance required from outside the jurisdiction Conducting Assessments		Conducting Assessments	
Activations:					
LHD ECC or	EOC Active	County EOC Active			
OTHER: (exp	olain in Current Situation)	County EOC Behavioral Health Branch Active			

SECTION 1: CURRENT STATUS (Continued)

O (O) (C) (Describe detailed O(treational Assessment Information)
Current Situation: (Provide detailed Situational Awareness Information)
Current Priorities: (i.e., vaccination plan to high risk populations. "NONE" or Nothing to Report is acceptable) (WP #2.1)
Critical Issues or Actions Taken to Date: ("NONE" or "Nothing to Report" is acceptable.)
Grinda receipt of Actions Function to Butter (1997)
Resource Requests:

SECTION 1: CURRENT STATUS (Continued)

Proc	lamations	Dac	larations

Local Emergency PH Hazard

PH Emergency Other

Behavioral Health Involvement:

Health Advisories/Orders Issued:

Behavioral Health Primary Point of Contact (POC) Name:

Disease Outbreak

Cold

Isolation/Quarantine Boil Water
School Closures Air Quality

Behavioral Health POC Telephone:

Food Hazard

Beach Closure

Vector Radiation

Behavioral Health POC Email: Heat Other

Hazard Specific Activities:

Summary of Impact: (WP #1.9)

Total Case Count: # (If known)

Confirmed: # ED Visits: #
Probable: # Hospitalizations: #
Suspected: # Fatalities #

Estimated Population at Risk: #

SECTION 2: PUBLIC INFORMATION

Outreach/Communication Strategy and Initiatives (WP #1.9, 2.5, 3.1)
This field is required for LHDs that receive the Surge Capacity for Targeted Intervention of Hepatitis A Local Health Department Workpla Funding
Public Information Key Messages
Public Information Outreach Channels (provide links to materials if available) (WP #3.2)
Public Information Barriers/Challenges
Resource Requests to MDHHS

SECTION 3: MASS CARE

Congregate Shelters	None	<u>Open</u>	Planned	No Report
General Needs Shelter Support Lead				
Number Opened:				
Medical Special Needs Shelters Support Lead				
Number Opened: Population Served:				
PODs				
Open				
Closed				
Other				

SECTION 4: VACCINATION ACTIVITY (WP #2.2, 2.3, 2.11, 2.12)

017 Hepatitis A Outbreak	
Post Exposure Prophylaxis	
Number of adults who received Hepatitis A vaccine for	
post exposure prophylaxis at health department clinics:	
Number of adults who received immunoglobulin (lgG) for	
post exposure prophylaxis at health department clinics:	
Number of adults who received both Hepatitis A vaccine	
And IgG post exposure prophylaxis at health department clinics:	
Vaccination Clinics Conducted by the local health department	
Target Populations	ļ
Strategies (WP #2.3)	ļ
umber of clinics conducted to date:	
umber of people vaccinated:	
umber of doses administered Private: Public:	
Location of clinics:	
Planned Vaccination Clinics	
Clinic Host (WP #2.4):	
Target Population:	
Dates:	
Locations: Projected Vaccine Use (WP #2.2):	

SECTION 5: VOLUNTEER UTILIZATION

Volunteer Hillingtion (M/D #2.6)	
Volunteer Utilization (WP #2.6)	
Volunteer Activity Overview (what)	
Purpose (why)	
Location (where)	
Expected Duration (how long)	
Organization(s) Involved (i.e., MI Volunteer	
Registry, Medical Reserve Corps, American Red	
Cross)	
Types of Volunteers	Number of Volunteers
Registered Nurses	
Pharmacists	
Behavioral/Behavioral Health	
General	
Other (please list):	
	<u> </u>

SECTION 6: General and/or Additional Information (i.e., local analysis, new initiatives and anything that does not appear elsewhere in this report) (WP #1.9)

Breastfeeding

Support Services



Breastfeeding may not always be easy, but it's worth it!

- Providing expert breastfeeding support and education.
- Serving pregnant and breastfeeding women with and without insurance.
- Clients can be seen in the office or in the comfort of their own home.
- Lactation consultant has personal breastfeeding experience.

The Breast is Best!



Angie Martin Registered Dietitian, International Board Certified Lactation Consultant



MID-MICHIGAN DISTRICT HEALTH DEPARTMENT Ithaca · Stanton · St. Johns



For more information or to make an appointment, call

989-763-2384



The Surgeon General's Call to Action to Support Breastfeeding

FACT SHEET

The Surgeon General's Call to Action to Support Breastfeeding outlines steps that can be taken to remove some of the obstacles faced by women who want to breastfeed their babies.

How many American women breastfeed their babies?

- Three out of four mothers (75%) in the U.S. start out breastfeeding, according to the Centers for Disease Control and Prevention's 2010 Breastfeeding Report Card.
- At the end of six months, breastfeeding rates fall to 43%, and only 13% of babies are exclusively breastfeed.
- Among African-American babies, the rates are significantly lower, 58% start out breastfeeding, and 28% breastfeed at six months, with 8% exclusively breastfed at six months.
- The Healthy People 2020 objectives for breastfeeding are: 82% ever breastfed, 61% at 6 months, and 34% at 1 year.

What are the health benefits of breastfeeding?

- Breastfeeding protects babies from infections and illnesses that include diarrhea, ear infections and pneumonia.
- Breastfed babies are less likely to develop asthma.
- Children who are breastfed for six months are less likely to become obese.
- Breastfeeding also reduces the risk of sudden infant death syndrome (SIDS).
- Mothers who breastfeed have a decreased risk of breast and ovarian cancers.

What are the economic benefits of breastfeeding?

- Families who follow optimal breastfeeding practices can save between \$1,200-\$1,500 in expenditures on infant formula in the first year alone.
- A study published last year in the journal *Pediatrics* estimated that if 90% of U.S. families followed guidelines to breastfeed exclusively for six months, the U.S. would annually save \$13 billion from reduced medical and other costs.
- For both employers and employees, better infant health means fewer health insurance claims, less employee time off to care for sick children, and higher productivity.
- Mutual of Omaha found that health care costs for newborns are three times lower for babies whose mothers participate in the company's
 employee maternity and lactation program.

What obstacles do mothers encounter when they attempt to breastfeed?

- Lack of experience or understanding among family members of how best to support mothers and babies.
- Not enough opportunities to communicate with other breastfeeding mothers.
- Lack of up-to-date instruction and information from health care professionals.
- Hospital practices that make it hard to get started with successful breastfeeding.
- Lack of accommodation to breastfeed or express milk at the workplace.

What can the health care community do?

- More hospitals can incorporate the recommendations of UNICEF/WHO's Baby-Friendly Hospital Initiative.
- Provide breastfeeding education for health clinicians who care for women and children.
- Ensure access to International Board Certified Lactation Consultants.

What can employers do?

- Start and maintain high-quality lactation support programs for employees.
- Provide clean places for mothers to breastfeed.

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• Work toward establishing paid maternity leave for employed mothers.

What can community leaders do?

- Strengthen programs that provide mother-to-mother support and peer counseling.
- Use community organizations to promote and support breastfeeding.

What can families and friends of mothers do?

- Give mothers the support and encouragement they need to breastfeed.
- Take advantage of programs to educate fathers and grandmothers about breastfeeding.

What can policymakers do?

- Support small nonprofit organizations that promote breastfeeding in African-American communities.
- Support compliance with the *International Code of Marketing of Breast-milk Substitutes*.
- Increase funding of high-quality research on breastfeeding.
- Support better tracking of breastfeeding rates as well as factors that affect breastfeeding.

To order a printed copy of *The Surgeon General's Call to Action to Support Breastfeeding*, call 1-800-CDC-INFO or email cdcinfo@cdc.gov and reference the publication title. For a downloadable copy, visit www.surgeongeneral.gov.

Prepared January 20, 2011

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O Yes	
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Next	

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MID-MICHIGAN DISTRICT BOARD OF HEALTH

Action Items July 2018



- The Board of Health (BOH) authorized Liz Braddock, Director of Environmental Health, to be added as a signatory to all of the agency's bank accounts.
- The BOH approved the promotion of Sara Thelen to Prevention Coordinator, retroactive to April 289, 2018 and authorized B. DeLong to sign the Letter of Understanding with the Teamsters Local 214 as proposed.
- The BOH approved the proposal to change the agency's office hours to 8 a.m. to 4:30 p.m., closed for lunch between 12 p.m. and 12:30 p.m. in Stanton and Saint Johns, and 12 p.m. to 12:30 p.m. in Ithaca for Community Health services and 12:30 p.m. to 1 p.m. for Environmental Health services in Ithaca.
- The BOH adopted the following Monthly Healthy Living Recommendation for August 2018:
 - 1. Second- and third-hand vaping is not harmless and all the harms at this time are not known.
 - 2. E-cigarettes and e-cigarette liquid should be kept out of reach of children as they can be a risk.
 - 3. E-cigarette use by children and teens must be discouraged as it increases their likelihood of cigarette use.



STAFFING CHANGES AUGUST- 2018

AS

STATUS	POSITION	BRANCH OFFICE
	No changes	

CHED

STATUS	POSITION	BRANCH OFFICE
PROMOTION	Sara Thelen, PT (0.6 FTE) Health Educator II, Clinton Branch Office to PT (0.6 FTE) Prevention Coordinator, Clinton Branch Office effective retroactively to April 29, 2018	Clinton
NEW HIRE	Allison Stec, FT Community Health Worker, Gratiot Branch Office effective August 13, 2018	Gratiot
RECALL	Stacey Peterman, PT (0.7 FTE) Hearing/Vision Technician, Montcalm Branch Office effective August 27, 2018	Montcalm
RECALL	Mary Wallen, PT (0.7 FTE) Hearing/Vision Technician, Clinton Branch Office effective August 27, 2018	Clinton
RECALL	Jeannette Sternhagen, PT (0.7 FTE) Hearing/Vision Technician, Gratiot Branch Office effective August 27, 2018	Gratiot

EH

STATUS	POSITION	BRANCH OFFICE
	No changes	