

Allegan County Board of Commissioners



County Services Building
3283 – 122nd Avenue
Allegan, MI 49010
269-673-0203 Main Office
269-686-5331 Main Fax
<http://www.allegancounty.org>

*Jim Storey, Chairperson
Dean Kapenga, Vice Chairperson*

BOARD PLANNING SESSION-AGENDA *REVISION #1 - 11/8/22

Thursday, November 10, 2022, @ 9:00AM
County Services Building, Board Room
Virtual Meeting Options - Instructions **Attached**

DISTRICT 1
Dean Kapenga
616-218-2599
dkapenga@
allegancounty.org

9:00AM **CALL TO ORDER:**

ROLL CALL:

OPENING PRAYER: Commissioner Tom Jessup

PLEDGE OF ALLEGIANCE:

PUBLIC PARTICIPATION:

ADDITIONAL AGENDA ITEMS:

APPROVAL OF AGENDA:

DISTRICT 2
Jim Storey
616-848-9767
jstorey@
allegancounty.org

DISTRICT 3
Max R. Thiele
269-673-4514
mthiele@
allegancounty.org

DISCUSSION ITEMS:

1. *Public Health Quarterly Report–Angelique Joynes, Health Officer
2. Solar Energy Presentations (Commissioner Thiele)
 - a. *Consumers Energy–Eric Clinton, Director of Renewable Products
 - b. *Michigan State University Extension–M. Charles Gould, Extension Bioenergy Educator
3. Review Donation Section (TABLED 10/27/22-Commissioner Thiele)
4. Schedule Organizational Meeting
5. Administrative Update

DISTRICT 4
Mark DeYoung
616-318-9612
mdeyoung@
allegancounty.org

DISTRICT 5
Tom Jessup
269-637-3374
tjessup@
allegancounty.org

OTHER ITEMS:

PUBLIC PARTICIPATION:

CLOSED SESSION: Written Attorney Opinion

FUTURE AGENDA TOPICS:

1. CLOSED SESSION: Tax Reversion
2. Boards & Commissions Appointments/Elections
3. Administrative Update

DISTRICT 7
Rick Cain
269-744-7918
rcain@
allegancounty.org

ADJOURNMENT: Next Meeting–Thursday, December 8, 2022, 9:00AM @ COUNTY SERVICES BUILDING, BOARD ROOM.

Mission Statement

“The Allegan County Board of Commissioners shall plan, develop, and evaluate the necessary policies and resources to ensure our county continues to progress and prosper”



Allegan County Board of Commissioners

STEP 1: Connect to the Meeting

- OPTION 1: Zoom over Telephone

- Call (929) 205-6099 -or- (312) 626-6799 -or- (253) 215-8782
- Type in Meeting ID: 891 6032 7098, then #, then # again
- Type in Meeting Password: 111022, then #

- To raise your hand to speak, press *9
- To Mute and Unmute, press *6

<STOP here>

You do not have to continue reading the rest of the instructions.

- OPTION 2: Youtube

- Open Internet Explorer or Chrome
- Navigate to <https://www.youtube.com/channel/UCQIiZQstN2Pa57QAItAWdKA>
- Click on image of “Live” video

<STOP here>

You do not have to continue reading the rest of the instructions.

- OPTION 3: Zoom over Web browser

- Open Internet Explorer or Chrome
- Navigate to <https://zoom.us/j/89160327098>
- Meeting Password: 111022

<Continue with the rest of the instructions>

STEP 2: Enter registration information

Webinar Registration - Zoom

zoom.us/webinar/register/WN_YneHxuk_SjqfnMwchbtUEg

Webinar Registration

Topic: BOC Meeting - 4/9/2020

Time: Apr 9, 2020 01:00 PM in Eastern Time (US and Canada)


* Required information

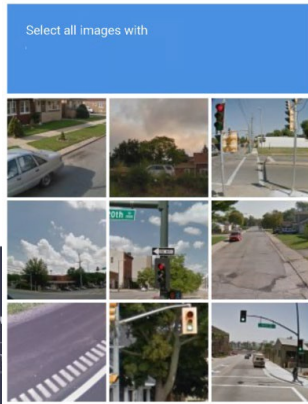
First Name *

Last Name *

Email Address *

Confirm Email Address *

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- About
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 - Integrations
 - Partners
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- Download
 - Meetings Client
 - Zoom Rooms Client
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 - Outlook Plug-in
 - Lync Plug-in
 - iPhone/iPad App
 - Android App
- Sales
 - 1.888.799.9666
 - Contact Sales
 - Plans & Pricing
 - Request a Demo
 - Webinars and Events
- Support
 - Test Zoom
 - Account
 - Support Center
 - Live Training
 - Feedback
 - Contact Us
 - Accessibility

1. Enter name and email

2. Click this box

4. Click when done.

3. Answer challenge question

STEP 3: This Window will appear when connected.



STEP 4: Adjust audio settings (if needed)

The image shows a Zoom meeting interface with the 'Settings' window open to the 'Audio' tab. A vertical black bar on the left side of the screen has a blue arrow labeled '1' pointing to it. A blue arrow labeled '2' points from the 'Audio' tab in the settings window to the meeting agenda below. The agenda includes contact information for Greg King, Director of Economic Development, and a list of consent items.

Settings - Audio

- Speaker: Test Speaker, Remote Audio
- Output Level: [Slider]
- Volume: [Slider]
- Microphone: Test Mic
- Input Level: [Slider]
- Volume: [Slider]
- Automatically adjust volume
- Use separate audio device to play ringtone simultaneously
- Automatically join audio by computer when joining a meeting
- Mute my microphone when joining a meeting
- Press and hold SPACE key to temporarily unmute yourself
- Sync buttons on headset

Meeting Agenda:

269-673-4514
mthiele@allegancounty.org

Economic Development — Greg King, Director
ADMINISTRATIVE REPORTS:

DISTRICT 4
Mark DeYoung
616-318-9612
mdeyoung@allegancounty.org

CONSENT ITEMS:

1. Motion to approve of claims paid and to incorporate into proceedings of the Board (3/20/20 & 3/27/20)

Audio Settings ^

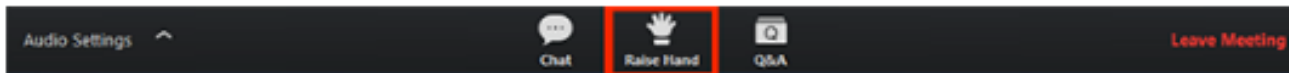
Chat Raise Hand Q&A

STEP 5: Raise hand to be recognized to speak.

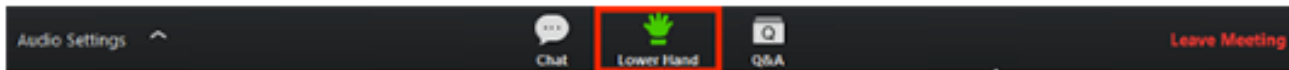
- Once “Raise Hand” is clicked, the Board Chairperson will receive notice and may UNMUTE your microphone when ready and verbally recognize you to speak.

On bottom of screen.

1. Click **Raise Hand** in the Webinar Controls.



2. The host will be notified that you've raised your hand.
3. Click **Lower Hand** to lower it if needed.



STEP 6: To leave the meeting

The screenshot shows a Zoom meeting interface. At the top, a green banner reads "You are viewing Allegan County Administration's screen" with a "View Options" dropdown. In the top right corner, there is an "Enter Full Screen" button. The main content is a document viewer displaying a Microsoft Word document titled "BOC20200409_agenda [Compatibility Mode] - Word". The document header includes the "Allegan County Board of Commissioners" logo and contact information for Jim Storey and Gale Dugan. The agenda items are listed under "BOARD OF COMMISSIONERS MEETING - AGENDA", including District 1 through 4 details and a central list of items like "CALL TO ORDER", "ROLL CALL", "OPENING PRAYER", etc. At the bottom of the Zoom window, there is a control bar with "Audio Settings", "Chat", "Raise Hand", "Q&A", and a red "Leave Meeting" button. A large blue arrow points to the "Leave Meeting" button.



HEALTH Department

QUARTERLY UPDATE

- Angelique Joynes, MPH, RN, Health Officer
- Randy Rapp, , RS, Environmental Health Services Manager
- Lisa Letts, BSN, RN, Personal Health Services Manager
- Lindsay Maunz, , MPH, Planning and Preparedness Manager
- Dr. Richard Tooker, MD, MPH, Medical Director

Quarter 4 Presentation
November 10, 2022

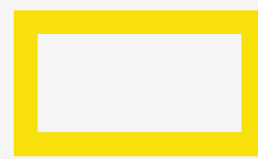
Today's Takeaways:

1. CHIP Report (Last update: August 25, 2022 Q3 BOC Update and October 13, 2022 Administrative Update)
2. Discuss Internet access as a Public Health Issue and Public Health funding
3. Update on ACHD Division's Priority Activities and Emerging Concerns for 2022
4. Answer questions and elicit feedback from the Board of Commissioners

Information Review:



Slides with the blue circle indicate slides we are covering during our allotted presentation time.



Slides with yellow boxes indicate specific material we are covering during our allotted presentation time.



Slides are posted after the Presentation to www.allegancounty.org/health/data-and-reports



HEALTH
Department



ADMINISTRATION

- Supports the department as a whole
- Issues Advisories, Cease and Desist letters, etc.
- Collect and evaluate data needed to support efficient public health service delivery and share data with the community

RESOURCE RECOVERY

- Coordinate Resource Recovery Program for participating LUG's
- Facilitate Solid Waste Planning Committee

PERSONAL HEALTH

- Provides services such as STI/HIV, Immunizations, Lead, Hearing and Vision, Communicable Disease, and Children's Special Health Care Services (CSHCS)
- Provides education, in-services, and on-site inspections for medical providers who participate in Vaccine for Children (VFC) and Adult Vaccine Program (AVP)
 - Safe storage and handling
 - Inventory management
 - Patient education

ENVIRONMENTAL HEALTH

- Provides services such as well and septic permits, soil erosion permits, restaurant inspections, ground water contamination surveillance, beach sampling, etc.
- Identifies opportunities for environmental health education and work with Planning and Preparedness to develop materials

PLANNING AND PREPAREDNESS

- Provides services such as community health needs assessment and community health improvement plans, emergency preparedness, and other planning and health education services that improve community health and quality of life in Allegan County.
- Interacts with the community through social media and media interviews.



HEALTH Department

Allegan County Health Department: Organization Chart

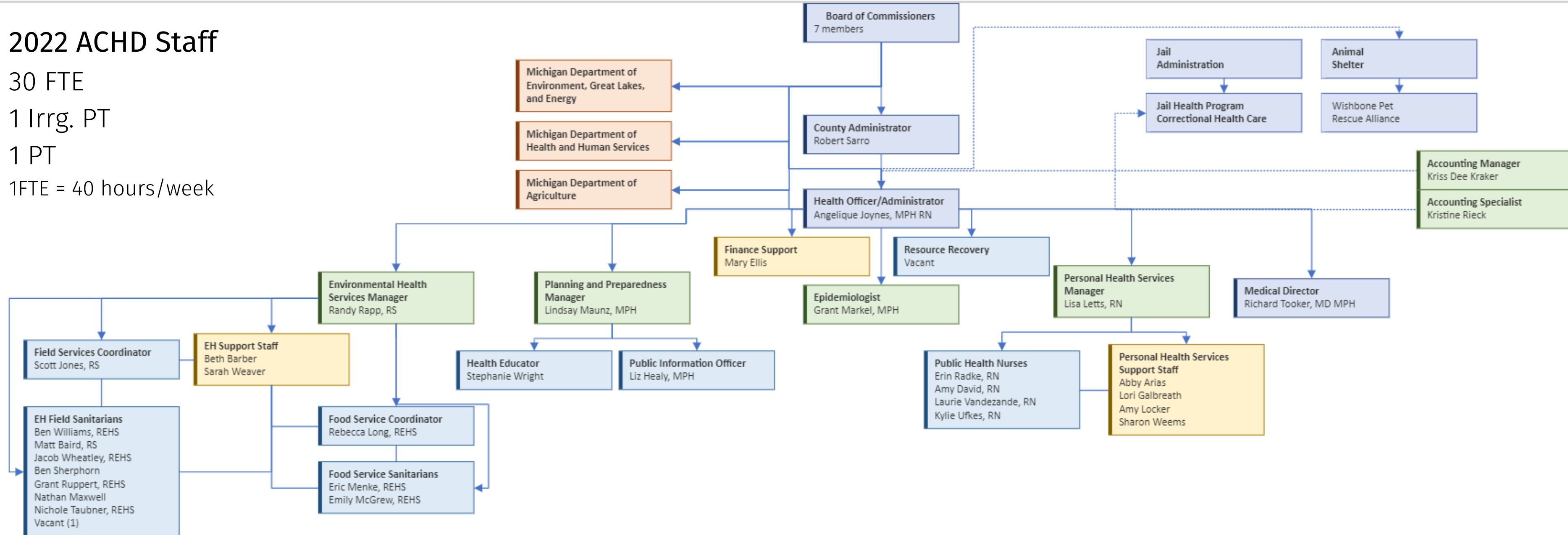
2022 ACHD Staff

30 FTE

1 Irrg. PT

1 PT

1FTE = 40 hours/week



Community Health Improvement Plan



Access to Medical Care

Why is it important?

Access to health services affects a person's health and well-being. Regular and reliable access to health services can:

- Prevent disease and disability
- Detect and treat illnesses & other health conditions
- Increase quality of life
- Reduce the likelihood of premature (early) death
- Increase life expectancy

Source: [CDC Healthy People](#)

Our Goal: Increase capacity and use of a patient-centered, community-integrated, and quality system of care for Allegan County residents.



Allegan County Organization, including ACHD, Activities

- Expand equitable broadband internet access across Allegan County to support innovative health care, including telehealth.
- Use the Allegan County Community Links program to help individuals identify PCPs, sign up for Medicaid or find solutions to meet their health insurance needs
- Implement a Behavior Risk Factor Survey that is representative and identifies inequities in subpopulations.
- Work with school partners to expand child and adolescent health services with a school-based health model

Housing

Why is it important?

Our homes, and those of our neighbors, play a critical role in shaping our health and the health of the whole community. Housing is related to health through several pathways, and the safety and quality of our homes are correlated with health.

Source: [County Health Rankings](#)

Our Goal: Strengthen the housing sector within Allegan County and increase collaborative solutions.



Allegan County Organization, including ACHD, Activities

- Expand access to quality water (private and municipal supply)
- Utilize Allegan County Community Links program to support agencies in connecting residents to available housing services

Food Security

Why is it important?

Lacking consistent access to food is related to negative health outcomes such as weight gain, premature mortality, asthma, and activity limitations, as well as increased health care costs.

- There is evidence food deserts are correlated with a high prevalence of overweight, obesity, and premature death.
- Those with low income may face barriers to accessing a consistent source of healthy food.

Source: [County Health Rankings and Roadmaps 2021](#)

Our Goal: Increase availability of healthy food options for residents, while also expanding supplemental food resources in Allegan County.



Allegan County Organization, including ACHD, Activities

- Use the Allegan County Community Links program to connect individuals to healthy food options
- Build a partnership with Help Me Grow Allegan Family Coaches to align and integrate efforts related to families who are expecting or who have children ages 0-5. This will help reduce silos and duplication of efforts

Behavioral Health

Why is it important?

Behavioral Health is fundamental to our collective and individual ability as humans to think, emote, interact with each other, earn a living and enjoy life.

Source: [World Health Organization](#)

Our Goal: Increase recognition and treatment of behavioral health conditions



Allegan County and HD Activities

- Implement a Behavior Risk Factor Survey that is representative and identifies inequities in subpopulations.
- Expand equitable broadband internet access across Allegan County to support innovative behavioral health care, including telehealth.
- Utilize Allegan County Community Links program to support agencies in connecting residents to available behavioral health services

Internet Access as a Public Health Issue



Allegan County, MI:

- Households with a computer, percent, 2016-2020: **90.6%**
- Households with a broadband Internet subscription, percent, 2016-2022: **84.5%**

Source: U.S. Census

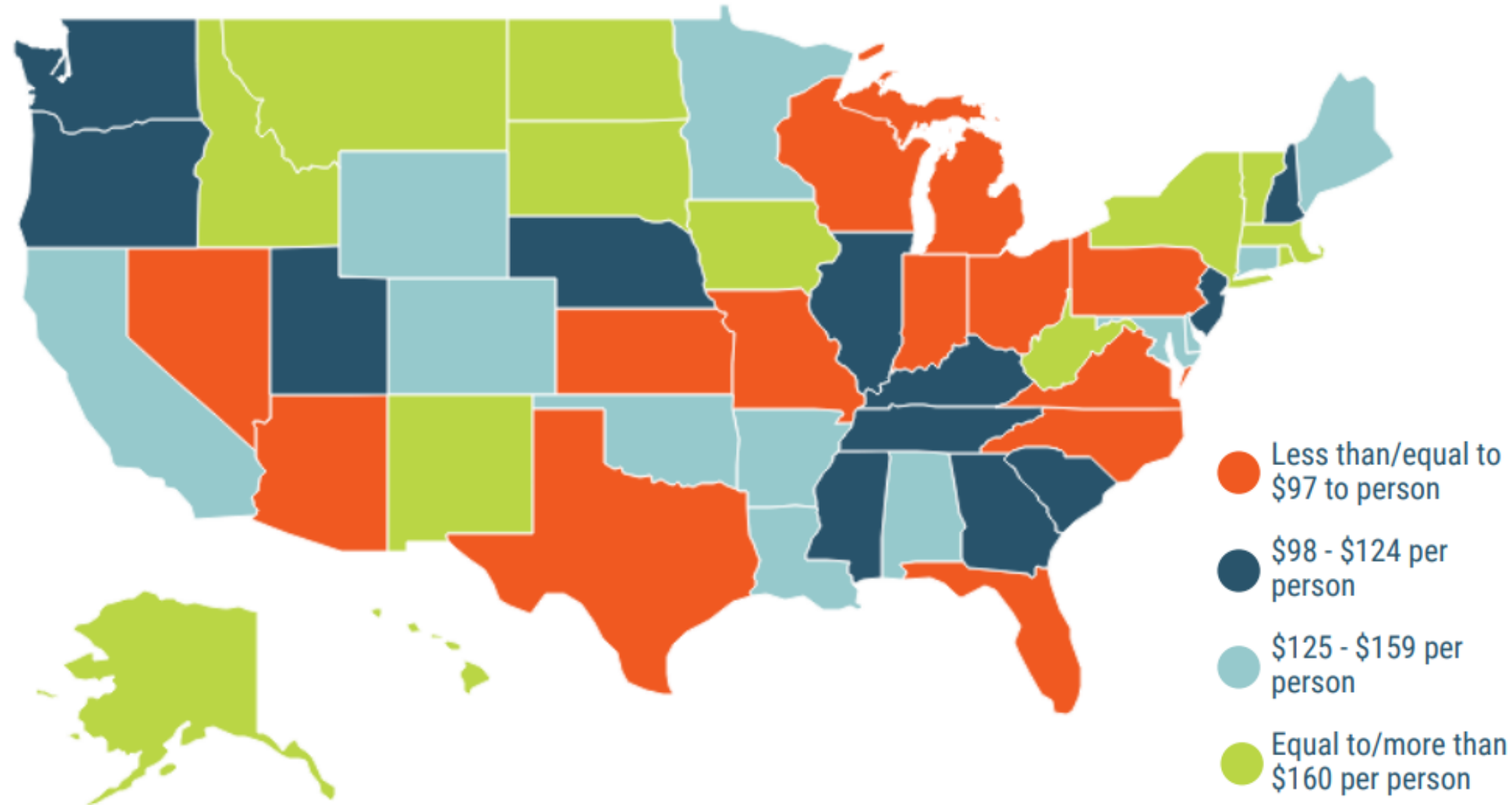
- Survey respondents who rated Affordable High-Speed Internet Access in Allegan County as "excellent" or "good": **25%**

Source: NCS 2022, Allegan County

- The COVID-19 pandemic exposed the impacts of high-speed internet and issues for those who lacked service.
 - Lack of internet access impacted work, school, and access to information for those without internet.
- The National Institute of Health (NIH) states high-speed internet should be recognized as a social determinant of health (SDOH) as it affects where people live, learn, work and play.
- The more people who have access to high-quality internet, the better prepared we will all be for the future.

Public Health Funding Trends

Michigan ranks 40th for per-capita public health funding, at \$83, which is below the national average of \$116 (Figure 2)



Source: America's Health Rankings. "Public Health Funding: Edition Year 2021." Accessed March 16, 2022. Trust for America's Health, Centers for Disease Control and Prevention and Health Resources and Services Administration, 2019-2020. Retrieved from americashealthrankings.org. Note: \$97 per person = 25th percentile; \$124 per person = 50th percentile; and \$160 per person = 75th percentile. Public health funding includes state dollars dedicated to public health and federal dollars directed to states by the CDC and HRSA. District of Columbia not included in chart or state rankings. D.C.'s per-capita public health spending is \$874.

- "Currently, much of Michigan's total public health funding comes from federal dollars. For more than the past decade, over half of Michigan's annual public health funding (within MDHHS) has come from federal sources, while approximately 1/4 comes from the state's general fund."
- "Federal funding is critical and important to protect, but without sufficient state spending, Michigan is left sensitive to changes in federal funding—including influxes that can support one-time investments—and less able to flexibly provide sufficient and sustainable state resources to address public health concerns as they arise."

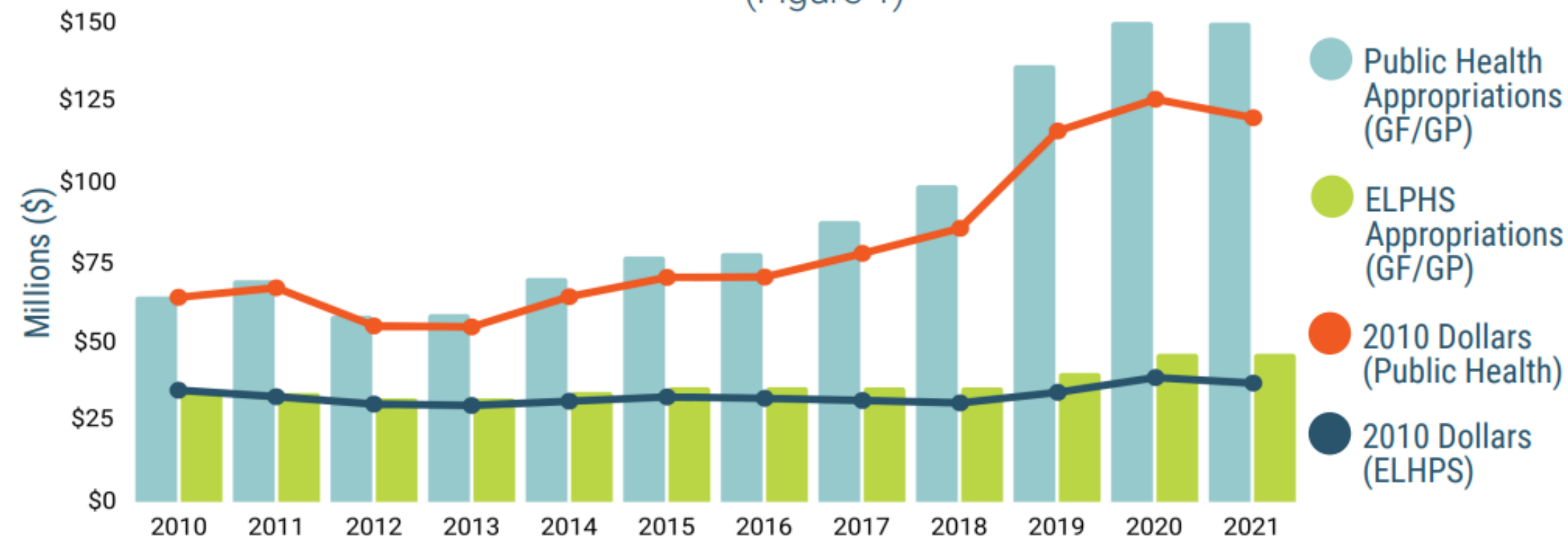
Michigan League for Public Policy (MLPP):

[Local Public Health Funding in Michigan: An Evergreen Need, Even in Our "New Normal"](#)

Public Health Funding Trends

Aside from boosts in 2019 and 2020, Essential Local Public Health Services (ELPHS) funding has remained fairly flat despite consistent increases in overall public health funding

(Figure 1)



Source: Michigan League for Public Policy analysis of House Fiscal Agency Community Health Archives using Consumer Price Index Retroactive Series (2010=100). Accessed March 16, 2022.

Michigan League for Public Policy (MLPP):

[Local Public Health Funding in Michigan: An Evergreen Need, Even in Our "New Normal"](#)

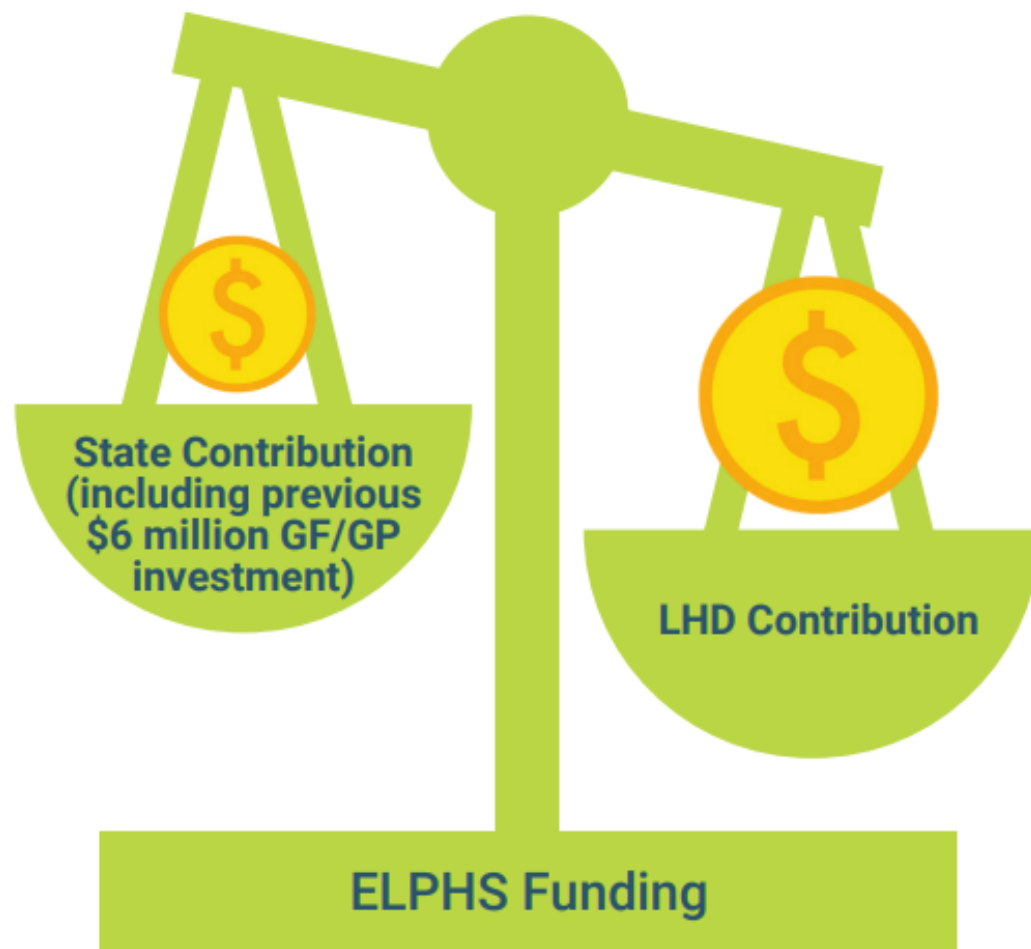
- Over the last decade, gross public health funding within MDHHS has remained at about \$600 million per fiscal year.
- Across this same time frame, there have been increases in state spending for key state and local health functions like laboratory services, epidemiology and some local health services; there has also been investment in both child and adolescent health services and prenatal care outreach and support.

- From 2010 to 2021, GF/GP funding for public health within MDHHS has increased by 88% when adjusted for inflation, driven largely by significant increases in recent years
- "Just \$2.2 million of investment above 2010 funding levels for ELPHS is minimal considering that overall public health spending has increased more substantially over the last decade."

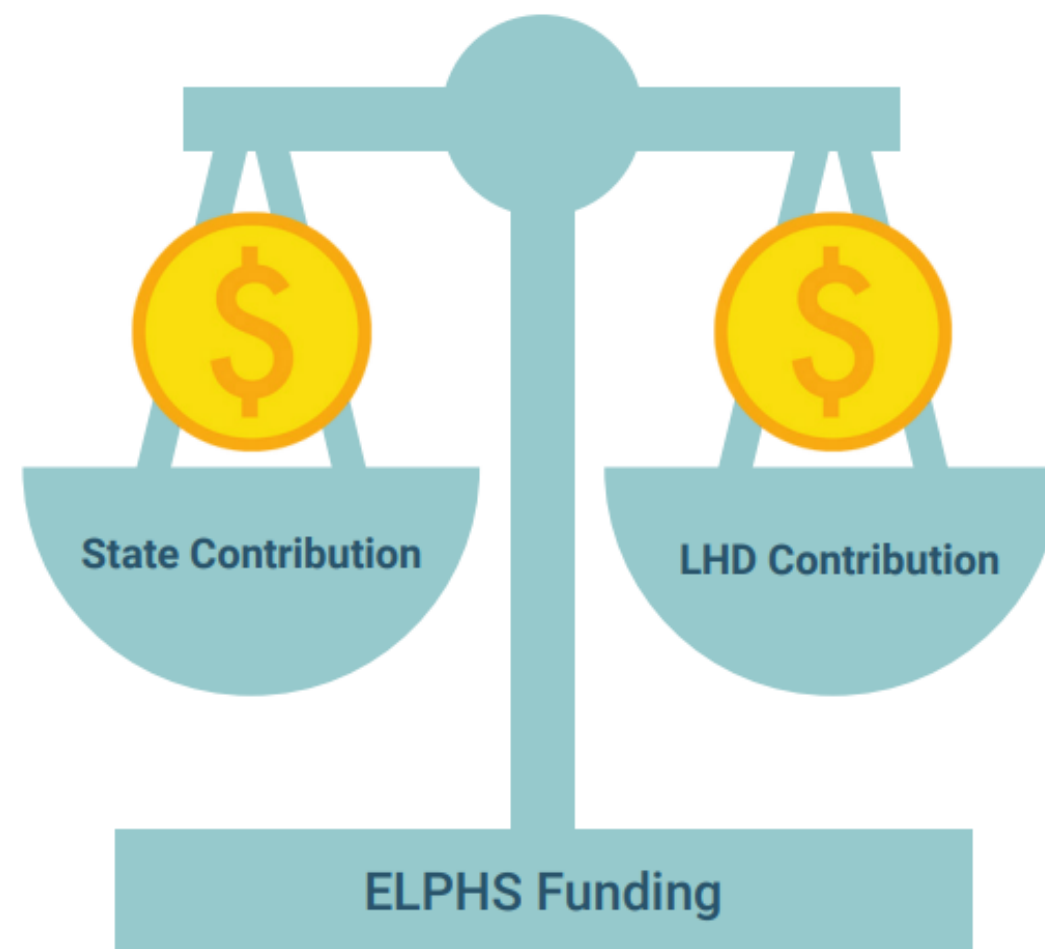
Public Health Funding Trends

Despite a \$6 million investment in Essential Local Public Health Services in 2020, the state is not adequately matching Local Health Departments for their essential services.

Today:



Goal: 50-50 Cost Share



- Per the Michigan Public Health Code, the money that LHDs spend on ELPHS should be reimbursed by the state at a 50% match.

- However, a 2019 internal review by the ELPHS Funding Committee of the Public Health Advisory Council found that the state has not been meeting this 50-50 cost-sharing requirement.
- The analysis found that to meet this statutory requirement, the state would need to contribute an additional \$36 million to ELPHS.
- Although ELPHS funding increased by \$6 million in 2020, LHDs have continued to go without tens of millions of additional state dollars that they are entitled to, which would support the delivery of ELPHS across Michigan. The limited general fund investment coupled with the lack of adequate state matching funds for ELPHS means that more support is needed to ensure that LHDs are equipped to provide necessary services, programming and care to Michigan residents.

Michigan League for Public Policy (MLPP):

[Local Public Health Funding in Michigan: An Evergreen Need, Even in Our "New Normal"](#)



Finance: Updated Staffing Resources



HEALTH
Department

- Master Task List currently being updated for each position to identify resources available vs. resources needed
 - Ensure the correct tasks are assigned to the right position (DBM)

- Holding on backfilling Sanitarian position to evaluate trends in EH services
- Resource Recovery position vacant
- Working with HR to post Personal Health Coordinator position

	A	B	C	E	F	G	H	I	J	K
	ADMINISTRATIVE	Performance Management Task	Policy #	Assigned to party	Primary Back up	Back up Secondary	Out of Service Area	Frequency	Estimated Time Commitment (min)	Training time (minutes)
1		PGU Reimbursements	Policy 529.1.1	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	15	15
2		221-601.529 Budget		Program Coordinator - Rosemary	Kristine R. Finance			Annual	45	30
3		226-528 PGU Budgets		Program Coordinator - Rosemary	Kristine R. Finance			Annual	270	90
4		PGU End of Month Surcharge Balance Tracking/FBR	529.4.1	Program Coordinator - Rosemary	Kristine R. Finance			Monthly	15 to 60	60
5		PGU Invoicing and Account Statements	529.4.2-3; 529.4.6	Program Coordinator - Rosemary	Kristine R. Finance	Kriss D.		Monthly	0 to 120	60
6		County Treasurer Receipting in Process	Policy 529.4.4	Program Coordinator - Rosemary	Treasurer's Office	Mary or Kristine		Annually	60	30
7		Proposed County Treasurer Interest Receipting in Process	Policy 529.4.3	Program Coordinator - Rosemary	Treasurer's Office	Mary or Kristine		Annually	0	15
8		Annual Treasurer's Interest distribution to PGUs	529.4.5	Program Coordinator - Rosemary	Kristine R.			Annually	30	15
9		Surcharge Collection Timeline and Amount Tracking	529.2.1	Program Coordinator - Rosemary	EH Clerical			Annually	30 to 60	30
10		Processing Monthly Contract Invoice Payments	Policy 529.3.1	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	30	15
11		Overhead and Usage Invoice Model	Policy 529.3.2	Program Coordinator - Rosemary	Finance			Annually	15	15
12		Invoice Cost Allocations Example	Policy 529.3.3	Program Coordinator - Rosemary	Finance			Annually	15	15
13		Approving PGU Requests for Reimbursement	Policy 529.3.4	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	10; 90	60
14		Approving PGU Curbside Invoices	Policy 529.3.5	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	60	30
15	Finance	Approving PGU Drop-site Invoices	Policy 529.3.6	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	60	30
16		Approving HHW Invoices	529.3.14	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	90	90
17		Sharps Container Invoices	529.3.10	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Semi-Annually; Annually	15	15
18		Approving RRDS Invoices	529.3.7	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	60	60
19		Approving Tire Invoices	529.3.11	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	15 to 60	30
20		Approving Electronics Invoices	529.3.12	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	15 to 60	30
21		Advertising Invoices	529.3.8	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Quarterly; Semi-Annually	30	15
22		Resource Recovery Card Invoice	529.3.9	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Annually	30	15
23		Purchase Orders	529.4.7	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		As needed	30+	15
24		Polystyrene/Styrofoam/Foam	529.3.15	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Quarterly; Semi-Annually	15	15
25		Leighton Township Recycling Bag Order/Invoice	529.3.13	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Annually	15	15
26		PGU Surcharge Account Statements from EDEN	Policy 529.4.1 (needs updating)	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly; Quarterly	30	30
27		Fuel Surcharge Calculations	Policy 529.2.4	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	120	60
28		Administrative fee calculation						Annually	120+	60
29		Updating Contract Cost Sheet	Policy 529.2.5	Program Coordinator - Rosemary	Mary Ellis			As needed	15	15
30		Request for proposal and contract management	529.2.10	Program Coordinator - Rosemary	Project Management	Randy Rapp		As needed	240 to 480	45
31		Diversel Contract Management HHW		Program Coordinator - Rosemary	Project Management	Randy Rapp		Annually	30 to 60	30
32	Contract Management	General agreement management						As needed	15+	60
33										
34										
35										
36										
37	Elections	Requests for Surcharge Voting/Ballot Proposals		Program Coordinator - Rosemary	Administration	Clerk's Office		As needed	480+	60
38										
39										
40		Annual Report		Program Coordinator - Rosemary	Liz Healy	Lindsay Maunz		Annually	480	60
41		Semi-Annual Reports		Program Coordinator - Rosemary	Liz Healy	Lindsay Maunz		Annually	240	45
42										
43	Reports	Collection Volumes Tracking	529.2.3	Program Coordinator - Rosemary	EH Clerical	Sharon Weems		Monthly	45	15
44										
45										

Example of Master Task List



Finance: 2022 Activities

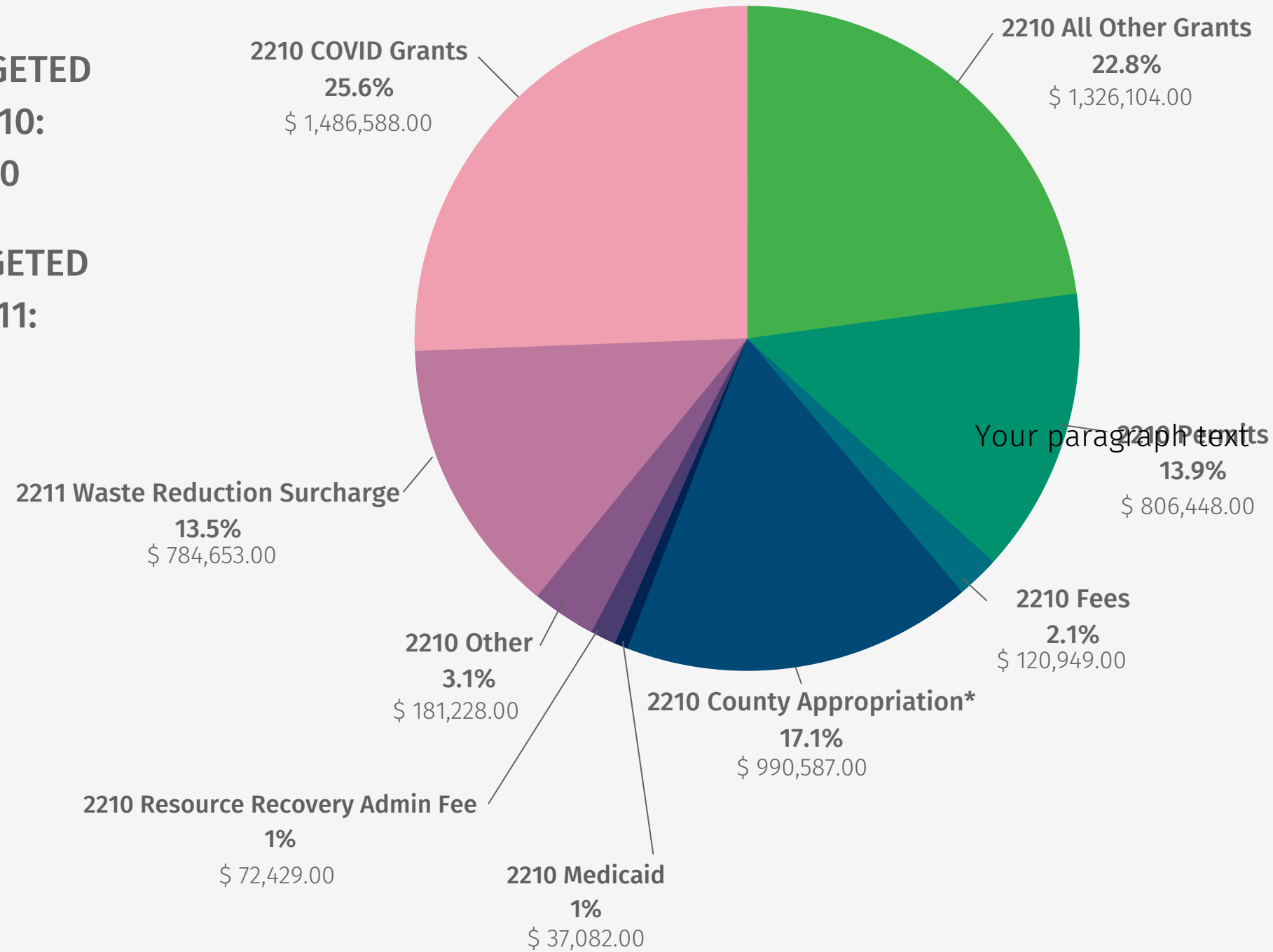


HEALTH
Department

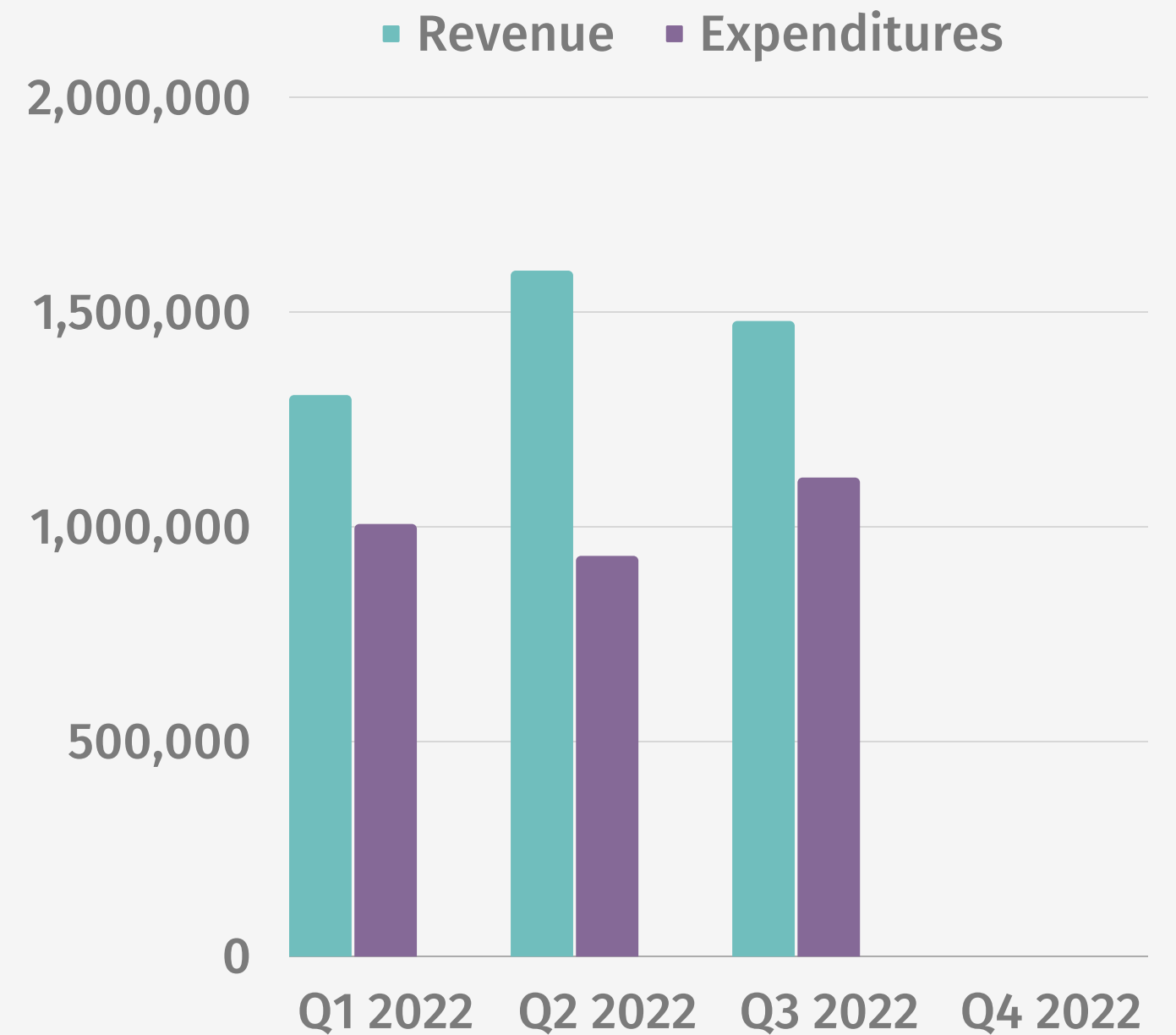
2022 BUDGETED REVENUE

TOTAL BUDGETED
REVENUE 2210:
\$5,021,415.00

TOTAL BUDGETED
REVENUE 2211:
\$784,653.00



REVENUE & EXPENDITURES BY QUARTER



Increase in revenue vs. expenditure is related to COVID-19 vaccine funding that is not able to use for other activities and seasonal services.

ADMINISTRATION

25,652

Total Public Health Services Provided (excluding jail health, MCDC, and animal shelter)

8



Inquiries responded to

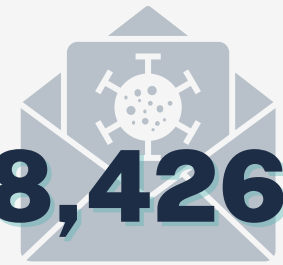


of those who filled out the Customer Satisfaction survey for ACHD services responded "Agree or Strongly Agree" to being satisfied with the services they received (n=89)

362.25

Hours spent on Professional Development by team members

8,426



Advisories & Recommendations issued (quarantine, isolation, water advisory, exposure letters)



27

Learning and Growth meetings with team members completed

31

Full time team members



1

Part time team member

1

Irregular part time team member

2,031

Hours pf PTO taken by team members

15

Contracted team members



15

CDCF team members

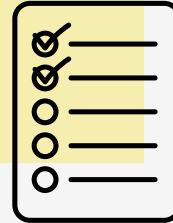


Administration: 2022 Activities (Quarter 3)

CUSTOMERS

Community Health Needs Assessment and Community Health Improvement Plan (CHNA/CHIP)

- MET: Q2 Activities include:
 - Community Health Survey Report: <https://bit.ly/38yaUdT>
 - CHNA Report to be shared with Ascension Borgess Allegan's Board, United Way's, and Board of Commissioners by June 30, 2022
 - CHIP timeline developed by June 30, 2022



FINANCIAL STABILITY

Explore Grant Funding Opportunities Aligning with County-wide Efforts

- MET: Michigan Rural Health Grant for 2 Community Health Workers
- MET: Extension of funding for HRA positions

Optimize Grant Funding to Minimize County funding

- MET: Continue reviewing Financial Statement Reports (FSRs) regularly
- MET: Reallocation of essential local public health services funding as needed to maximize utilization of all grant funding

Additional State Funding: HB5523

- MET: Workforce Development Grant: ACHD received approximately \$115,000. The award letter was received on April 22, 2022. Funds must be spent by September 30, 2022. Funds must be specific to COVID-19 workforce activities. We are working with finance to use these funds in place of any general funds related to COVID-19 activities

ENGAGED WORKFORCE

Workforce Development Plan

- ONGOING: Continue ensuring staff get updated on training and requirements to provide public health services (Training Plans & Learning and Growth's)

Training Opportunities Identified

- Microsoft Excel
 - Exploring trainings for staff
- Funding for Compassion Fatigue training
 - Establishing wellness in a Changed World
- ONGOING: Implicit bias training is required for sanitarians, nurses, etc. [Rule 338.7001\(c\)](#) for 1 hour/recertification year

IMPROVED PROCESSES

CI Project: Contracts/Agreements

- Over 150 agreements (MOUs, Contracts, etc.) to manage with Project Management. Working collaboratively on identifying efficiencies for each type of agreement process
 - Q2 Activity includes:
 - MET: Meeting with Project Management to establish process that meets the goal of this CI project

ACHD Strategic Plan Overview

- MET: Technical Assistance provided by MPHI to develop handout for various plans Public Health has in place and how it relates to the County Organization Strategic Goals



Administration: 2022 Activities (Q4)

CUSTOMERS

Community Health Needs Assessment and Community Health Improvement Plan (CHNA/CHIP)

- Activities for this quarter include:
 - Present strategies to MACC for approval (10/7)
 - Create and Publish Joint Press Release
 - Finalize report -- Publish by 11/15

School-Based Health Center Discussions

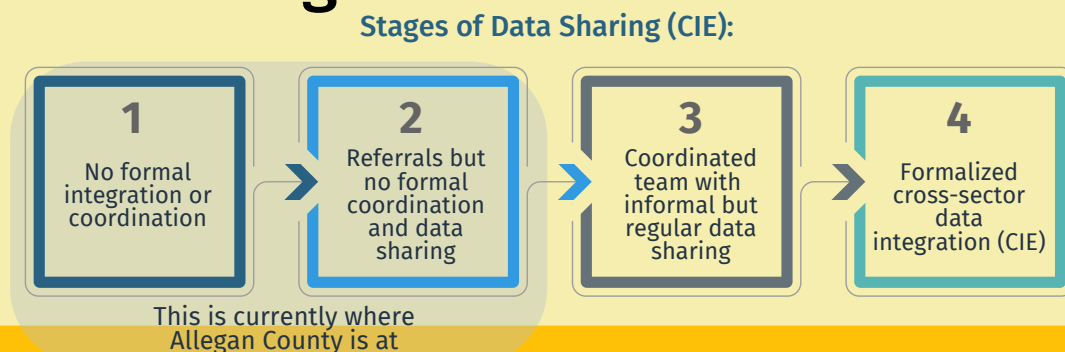
- Meet with interested school districts (www.michigan.gov/cahc)

Health in All Policies (HIAP)

- Develop a Health in All Policies survey to send out to all LUG to understand current knowledge and use of HIAP in their planning processes

Community Information Exchange and CHNA

- Secure vendor/consultant for CIE work plan and vendor for representative sample for BRFS.



FINANCIAL STABILITY

Optimize Grant Funding to Minimize County funding

- Continue reviewing Financial Statement Reports (FSRs) regularly
- Explore funding sustainability for the Community Health Workers with community partners

ENGAGED WORKFORCE

Update Master Task List for Each Position

- This list assesses tasks, procedures attached to that task, back up, approximate frequency of task, and time to accomplish task.
- This will allow us to assess capacity and determine where and what public health staff are needed

WFD Plan Review and Revision

- Review PHWINS, MPHI, and Annual Public Health data and use that data to update WFD for 2023/2024.

Resume Engagement Traditions

- Resuming activities such as Thanksgiving Meal and Soup Exchange

IMPROVED PROCESSES

ACHD Strategic Plan Review/Revision

- Update CHIP objectives and metrics

CI Plan Review/Revision

- Review if 2022 objectives were met and establish new, needed objectives for 2023/2024.

Michigan Local Public Health Accreditation Self-Assessment

- Complete Michigan Local Public Health Accreditation Self-Assessment and determine action plans for any gaps noted in meeting minimum program requirements. MLPHA will resume in 2023. ACHD's onsite accreditation review is scheduled for 9/9/24, with our next Plan of Organization due in June 2023 to MDHHS.

Explore Grant Funding Options Aligning with County-wide Efforts

- Social Determinants of Health Planning funding

Administration: Community Perspective on EH Hazards

4Q MDHHS/MSU Research Project

Funded to expand a research project to the Otsego area of Allegan County regarding area health concerns and environmental hazards.

The proposed activities will be guided by three aims:

- To listen to Otsego community members by collecting perspectives regarding salient environmental health vulnerabilities.
- To empower Otsego community members to make informed prevention decisions through a series of health education interventions that explicitly address salient community vulnerabilities
- To evaluate the impact of these engagement activities with the goal of fostering iterative improvement.

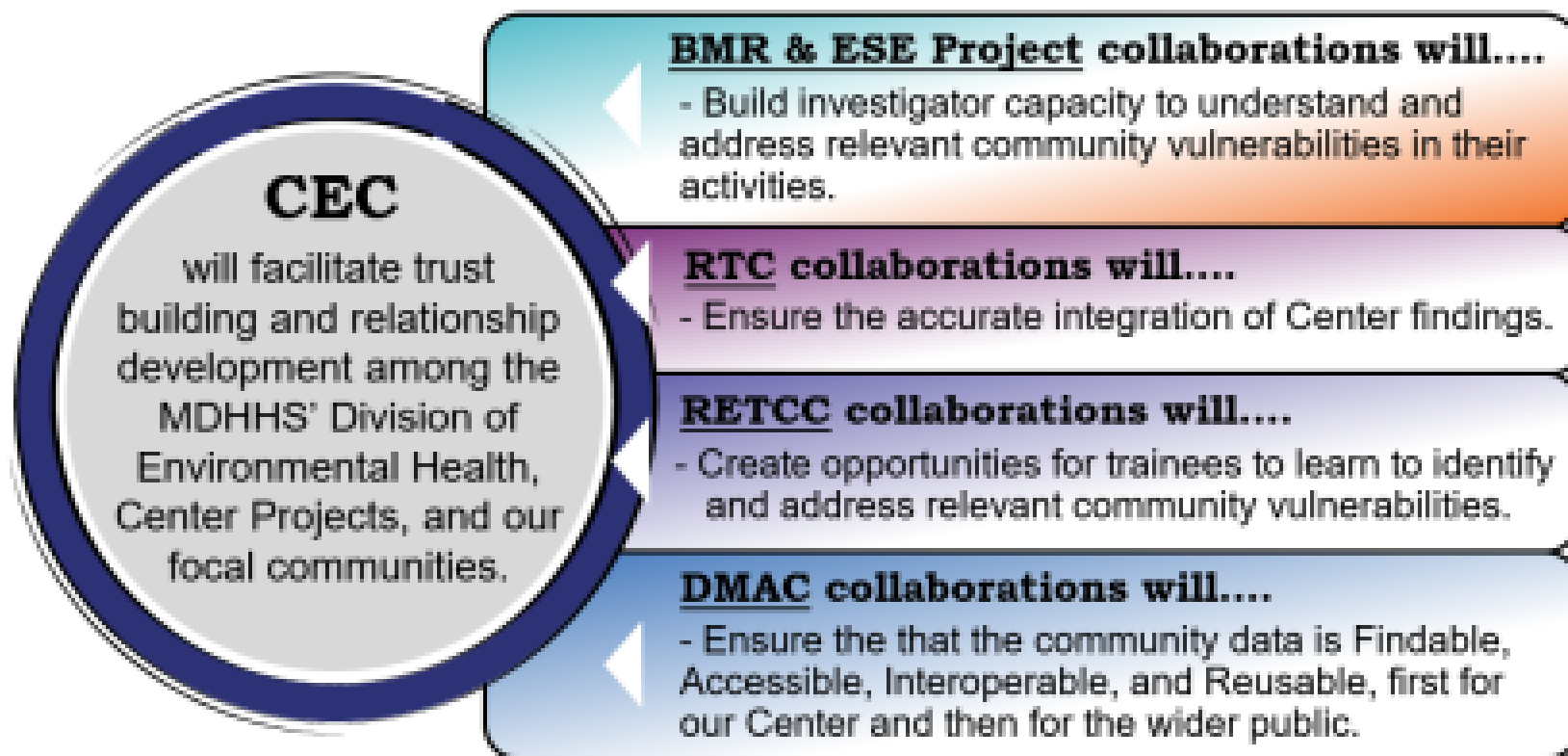
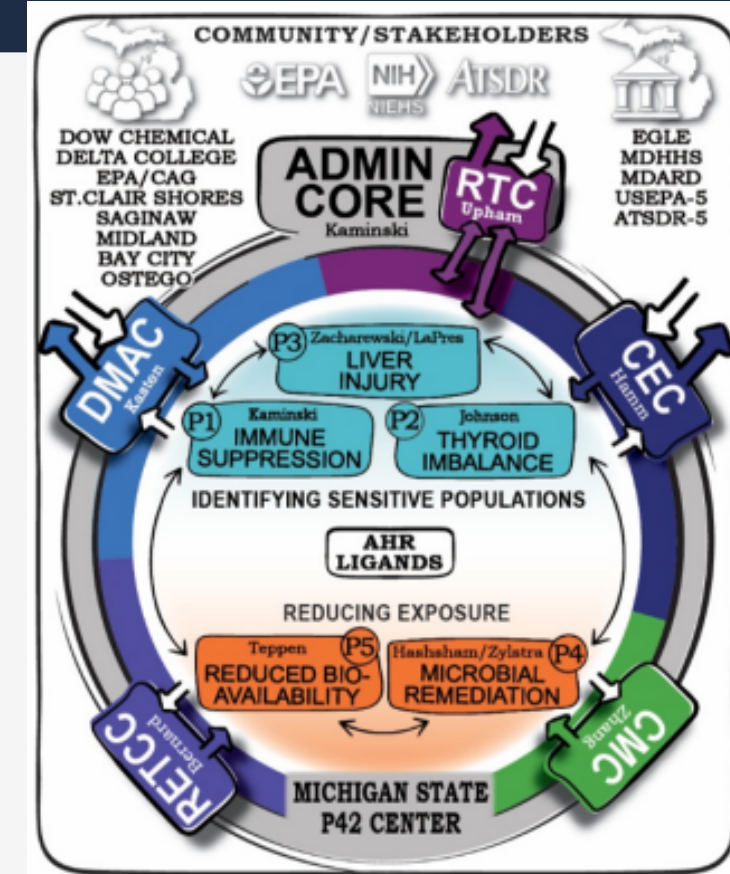


Fig 2: Synopsis of CEC collaborations.

Public Health Inquiry Form Updates

P42 Superfund Research Center. Collaboration overview amongst the Biomedical Research (▶BMR) and Environmental Science and Engineering (▶ESE) Projects, Center Cores as well as key community & stakeholder groups.

Planning presentation/releasing updated presentation to educating the community on submitting the inquiry forms.

- Intended outcome is to collect health concerns from community members and follow a standard consistent process of evaluating and sharing data with MDHHS.
- The inquiry form was updated to include health concerns and requires an address to submit.
- The presentation and link to the form will be highlighted in the community members' newsletter and social media.

An Overview of Strategic Goals: Supporting a united and engaged workforce



Workforce Development Plan

Fundamental to employ and retain high-performing quality employees is identifying required training and gaps in knowledge, skills, and abilities through the assessment of both organizational and individual needs. It also includes addressing those gaps through targeted training and development opportunities. These are outlined in the Workforce Development Plan.

Goals and Objectives in the WFD plan that align with Strategic Goal #1 include (ONGOING):

Goal 1: Integrate public health core competencies and public health emergency preparedness competencies into ACHD workforce	Objective 1: By December 31, 2023, complete an assessment of core competencies for public health staff every 3 years (2023). The last one was completed in 2020. (Currently being done)
	Objective 2: Determine based on assessment data what Professional Development opportunities are needed for the next 3 years (training plans).
	Objective 3: Develop internal job descriptions and integrate them with core competencies by 2024.
	Objective 4: By December 2022, complete NIMS training for compliance.
Goal 2: Maintain Excellence as a Public Health Agency	Objective 1: By May 31, 2023, provide training on Performance Management.
	Objective 2: By September 2023, complete the online Performance Management Primer, annually.
	Objective 3: By December 2022, complete 4 CQI projects.

Continuous Improvement Plan

Allegan County Health Department (ACHD) is committed to the ongoing improvement of the quality of services its clients receive, as evidenced by the outcomes of those services. The CI plan is reviewed annually by the Public Health Administration Team (PHAT) to ensure goals and objectives are aligned with Allegan County Health Department's Strategic Plan.

Goals and Objectives in the CI plan that align with Strategic Goal #1 include (ONGOING):

Goal 1: Re-establish a culture of quality in ACHD	Objective 1 (ONGOING): The CI Committee will meet a minimum of 6 times in 2022.
	Objective 3 (ONGOING): All team members (ACHD staff, non-contracted) of ACHD will complete 100% of L & G per Allegan County Organization guidelines.

An Overview of Strategic Goals: Continuously improve our process



Continuous Improvement Plan

Allegan County Health Department (ACHD) is committed to the ongoing improvement of the quality of services its clients receive, as evidenced by the outcomes of those services. The CI plan is reviewed annually by the Public Health Administration Team (PHAT) to ensure goals and objectives are aligned with Allegan County Health Department's Strategic Plan.

Goals and Objectives in the CI plan that align with Strategic Goal #2 include:

Goal 1: Re-establish a culture of quality in ACHD

Objective 2 (MET): Implement a department-wide survey to understand the current status of CI understanding, etc.

Goal 2: Maintain a department-wide client satisfaction survey and increase client feedback.

Objective 2 (ONGOING): Utilize program client satisfaction data in strategic planning and other needs assessments.

The Continuous Improvement Committee resumed meetings in June 2022

An Overview of Strategic Goals: Financial Stability



Service Area Strategic Action Plan

Allegan County Health Department (ACHD) reviews our strategic action plan annually. This plan highlights goals from the Allegan County Strategy Map and what we plan to do within our service area, and the timeframe we will work in.

Goals and Objectives in the Strategic Action plan that align with Strategic Goal #3 include:

Goal 1: Develop/ maintain a balanced operational budget.

- Objectives:
- 1a. Optimize Eden to improve budgets.
 - 1b. Utilize business data to drive long-term budgeting and planning.

Goal 2: Maintain reserve funds

- Objectives:
- 2a. Comprehensive regular budget review on an annual basis
 - 2b. Ensure annual review of fees versus the cost of providing services.

Goal 3: Execute long-term financial planning

- Objectives:
- 3a. Include Public Health Team in long-term financial planning
 - 3b. Seek alternative funding sources.

An Overview of Strategic Goals:

Provide valuable and necessary quality services to our customers



Community Health Improvement Plan

A community health improvement process uses CHA data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which are often outlined in the form of a community health improvement plan (CHIP). The next Community Health Improvement Plan (CHIP) will be published 11/15/22

Goals and Objectives in the Community Health Improvement Plan (CHIP): 4 areas of focus (behavioral health, housing, access to care, food security)

Behavioral Health

Goal: Increase recognition and treatment of behavioral health conditions.

Objective 1: Increase utilization of behavioral health services for those in need.

Objective 2: Decrease the percentage of youth and adults who are experiencing "poor" behavioral health

Objective 3: Decrease percentage of youth who use substances.

Housing

Goal: Strengthen the housing sector within Allegan County and increase collaborative solutions.

Objective 1: Increase the percentage of residents with access to attainable and safe housing options.

Objective 2: Increase awareness and use of housing resources available in Allegan County.

Objective 3: Strengthen the Allegan County Homeless Response System.

An Overview of Strategic Goals:

Provide valuable and necessary quality services to our customers



Community Health Improvement Plan

A community health improvement process uses CHA data to identify priority issues, develop and implement strategies for action, and establish accountability to ensure measurable health improvement, which are often outlined in the form of a community health improvement plan (CHIP). The next Community Health Improvement Plan (CHIP) will be published 11/15/22

Goals and Objectives in the Community Health Improvement Plan (CHIP): 4 areas of focus (behavioral health, housing, access to care, food security)

Access to Care

Goal: Increase capacity & use of patient-centered, community-integrated, & quality system of care for Allegan County residents.

Objective 1: Decrease the percentage of adults and youth who are experiencing "poor" physical health.

Objective 2: Increase the use of non-traditional services to meet health care needs for Allegan County residents, such as use of the mobile clinic and collaborating with other agencies to provide more comprehensive screenings and health education

Food Security

Goal: Increase availability of healthy food options for residents; while also expanding supplemental food resources in Allegan County.

Objective 1: Increase the percentage of affordable and attainable healthy food resources for residents in Allegan County.

Objective 2: Increase awareness of healthy food resources available for residents in Allegan County.

An Overview of Strategic Goals:

Provide Valuable and necessary quality services to our customers



Continuous Improvement Plan

Allegan County Health Department (ACHD) is committed to the ongoing improvement of the quality of services its clients receive, as evidenced by the outcomes of those services. The QI plan is reviewed annually by the Public Health Administration Team (PHAT) to ensure goals and objectives are aligned with Allegan County Health Department's Strategic Plan.

Goals and Objectives in the QI plan that align with Strategic Goal #4 include:

Goal 2: Maintain a department-wide client satisfaction survey and increase client feedback.

Objective 1: Department Wide survey process will be re-established for 2022 for all programs at ACHD.

Communication Plan

In 2018, Allegan County Health Department (ACHD) identified the need to enhance its marketing and communication activities. The goal – to improve health outcomes through increased communication methods with Allegan County residents, stakeholders, and organizations. The Communication Plan is currently under revision.

Goals and Objectives in the Communication plan that align with Strategic Goal #4 include:

Goal 3: The ACHD will use various public health communication strategies to promote healthy living and healthy communities.

Objective (ONGOING): Use various communication channels to increase awareness of risks to health, ways to reduce health risk factors and increase health protective factors, promote healthy behaviors, advocate organization and community changes to support healthy living, increase demand and support for health services, building a culture where health is valued, and creating support for health policies, programs, and practices.

Administration: Potential Emerging Public Health Concerns

- Being able to respond to any public health event with limited resources and effectively integrating technology
 - Current technology utilization assessment for tasks provided.
 - Can efficiencies be gained by implementing technology? Is current technology still efficient?
 - Limited ability to integrate data between human services and health providers
 - Our current surveillance system platform is over 20 years old
 - No way to share data in real time between health systems and public health for most LHDs in Michigan
 - Limited access and impact on chronic diseases and health outcomes for residents
 - Community Adolescent Health Centers (School-based)
 - Health Resource Advocates (School-based)
 - Telehealth opportunities
 - Community Health Workers
 - Social Determinants of Health (SDoH) and Equity and impact on health outcomes.
 - SDoH/Social and Economic factors have the greatest impact on health outcomes
 - **Community Information Exchange**
 - Step 1: Identify the CIE vision and governance structure
 - It is common for a lead entity (often called a backbone or convening organization) to set the parameters of this process.
- Key activities and deliverables in the CIE Vision and Planning stage can include:
- Conducting an environmental scan
 - Convening initial partners for early discussions about CIE
 - Developing sample use cases for CIE to clarify the vision
 - Establishing the governance structure Formally recognizing the backbone organization

RESOURCE RECOVERY



21 PGUs Participating in the Recycling Program, with 2 renewing funding for 10 years, and 2 voted to join in 2024: each at \$50 per household/year. An additional voted as a board to join at \$25/household/year



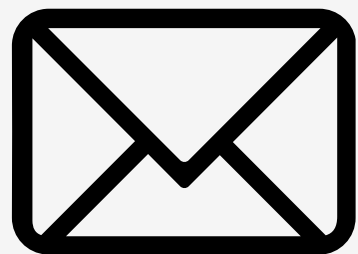
4 Trailers were filled with 4,486.49 Partial Tire Equivalents (PTEs) during 3 scrap tire collection events



Customers subscribed to recycling more than any other combined topic area. 15% of subscribers to the county's news and events seek recycling information.



8 Recycling Social Media Posts in Q3



Mailed out educational postcards that reached **22,730 households** through partnership with EGLE (45,460 total postcards).



Partnered with West Michigan Sustainable Business Forum and seven other West Michigan counties to complete the Materials Management County Engagement Grant.



Resource Recovery: 2022 Activities (Quarter 3)

CUSTOMERS

Online Reporting Tools

- MET: Q2 Activities include:
 - Development of Household Hazardous Waste appointment tool
 - Launched 1 new customer tool for online scheduling of household hazardous waste appointments

Supporting Local Units of Government (LUG)

- MET: Continue supporting local municipalities interested in participating in the Recycling Surcharge election

Materials Management County Engagement

Ongoing Q4:

- Continue review of data collected by West Michigan Sustainable Business Forum through the Materials Management County Engagement Grant
 - Met to review Report Format and seek input
 - The coordinator continues to work with West Michigan Sustainable Business Forum on the Municipal Measurement County Engagement grant and is seeking input from local stakeholders to collect county solid waste and recycling goals and focus areas. (Statewide 64% of counties are participating in this grant with EGLE.)
- Attending EGLE-sponsored events to learn more about the planning process to update the County's Materials Management Plan.

IMPROVED PROCESSES

P2B

- ONGOING Q4: Collaborating with team to ensure all service areas have an identified and trained back-up

Website Improvements

- ONGOING Q4: Improving Recycling website through on-going creation of a recycling guide for difficult to recycle items
- Calls to the Resource Recovery Program decreased 33% after the launch of online curbside recycling tools, indicating successful use of new tools.

CUSTOMERS, CONTINUED.

The National Community Survey Results

- 56% rated AC recycling services as excellent or good
- 80% indicated recycling services was somewhat/very important to them
- 48% felt household hazardous waste disposal was not very/not at all convenient to them
- 50% are somewhat willing to pay more for increased recycling services



Resource Recovery: 2022 Activities (Q4)

CUSTOMERS

Online Reporting Tools

- Q4 Activities include:
 - Use of Registration Tool for Scrap Tire Events
- Traffic to Resource Recovery Webpages increased by 50% in Sept. compared to when website traffic was initially reported April-June.

Supporting Local Units of Government (LUG)

- 2 renewing funding for 10 years, and 2 voted to join in 2024: each at \$50 per household/year.
- Newsletters created annually during Q4 and provided to each participating LUG
- Resource Recovery Cards are used by residents at Regional Recycling Depot Sites and are ordered during Q4 for the upcoming year. The 15 participating LUGs have requested 12,525 cards total.

Materials Management County Engagement

- Attending EGLE-sponsored events to learn more about the planning process to update the County's Materials Management Plan.
 - Materials Management County Engagement Grant - County Goals, seeking input

IMPROVED PROCESSES

P2B

- Collaborating with team to ensure all service areas have an identified and trained back-up

Website Improvements

- Improving Recycling website through on-going creation of a recycling guide for difficult to recycle items
- With the use of reports from IS pages with the highest customer traffic has been identified, updates to these pages is now prioritized

FINANCIAL STABILITY

Tire Collection Funding

- Pairing the Scrap Tire Collection and the VBDSP grant to begin a limited collection of oversized and agricultural tires.

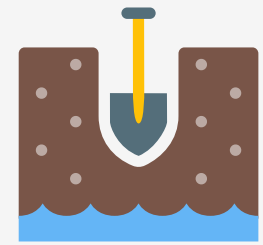
Program Funding

- Review of current funding and discuss alternative mechanisms.

EMERGING RESOURCE RECOVERY CONCERNS

- SWPC - Siting request for a sustainable business park, anchor tenant
- Vendor bids for services have been higher than anticipated based on previous trends impacting financial stability.
- Vacant position, reviewing applications and interviewing candidates

ENVIRONMENTAL HEALTH



161

Residential Well Permits Issued

0

Type II Well Permits Issues

15

Abandoned Wells Plugged



158



On-Site Sewage Disposal Permits Issued

12

Number of Ground Water Samples Collected

6

Type II Well Sanitary Surveys Conducted

1

Body Art Facilities Inspected

59

Residential Well Final Inspections Completed

1,007

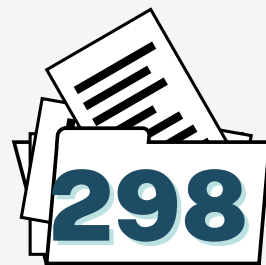
SESC inspections Completed

38

Failed Septic System Evaluations Conducted

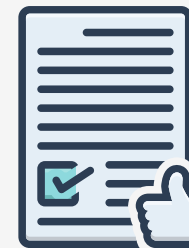
149

On-Site Sewage Disposal Final Inspections Completed



298

EH Records Requests Processed

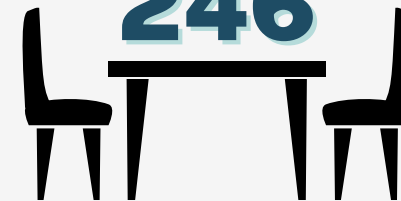


124

SESC Permits Issued

1,007

SESC inspections Completed



246

Fixed Food Establishments Inspected



13

Complaints/ Food Borne Investigations

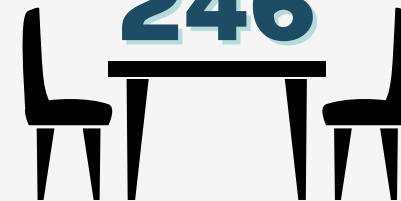
63



Public Swimming Pools Inspected

18

Campgrounds Inspected



12,395

Facility Files Scanned

60

Temporary Food Inspection completed



7

plan reviews received

3

plan reviews approved

12

Septage Trucks Inspected

2

Well Construction & On-Site Sewage Disposal System Construction Violation Notices/Correction Orders Issued

29

Loan Evaluations Conducted

12

Groundwater monitoring letters sent



87

Vacant Parcels Evaluated for Septic Systems

Number of Beach Samples Taken	78
Number of Mosquitos Trapped	72
Number of Ticks Found	0



Environmental Health: 2022 Activities (Quarter 3)

CUSTOMERS

Filebound

- **Project outcome:** customers will have access to files on the internet. This project was partially funded through an MDHHS grant
 - **MET:** Activities for this Quarter include:
 - Total Files scanned and verified: 20,643
 - An additional 12,395 scanned for a total of 20,643 scanned and verified, as of September 30, 2022

Ground Water Ad Hoc Committee

- **Project outcome:** Have a community-driven workgroup around the Ground Water study
 - **MET:** Activities for this Quarter include:
 - 2 Monitor wells installed, by Michigan Geological Survey, at Trowbridge Hall and Health Department
 - 8 proposals were received from Local Unit of Government, and 4 were recommended to the BOC for approval.
 - Hydrosimulatics, Inc. proposed a next step for the Work Group
 - Phase 2- Risk Ranking, estimated completion by 2/2023

FINANCIAL STABILITY

Michigan Department of Environment, Great Lakes, and Energy (EGLE) Financial Statement Reporting

- **MET:** Submitted the Report to EGLE
- **MET:** Submitted the MiTracking Grant Narrative and Financial Reports to MDHHS on time

IMPROVED PROCESSES

Type II Water Supply Rules/Regulation Changes

- **MET:** Multiple agencies (MALEHA, EGLE, and MDHHS) working with Lawmakers to locate additional funding for the program submitted to EGLE.

Status of Gravel Pit Activity

- **ARTICLE V - Earth Change Permit Requirements**
 - Section 501. Activities Requiring an Earth Change Permit (see Section 324.9116 and R 323.1704)
- **ONGOING:** As of September 30, 2022, 19 have paid and permits issued.
 - Continuing to follow up with the remainder

Fair Inspections

- EH Team (3 food sanitarians and 2 field sanitarians) visited a total of 59 food vendors for the Allegan County Fair.
- September 9th, there were 22 temporary licenses issued, requiring inspection. Throughout fair week there were 12 paid STFU inspections. The Food Team was on the fairgrounds daily September 9th through September 16th.

ENGAGED WORKFORCE

- The EH Services Manager attended the Director's Conference, the first time in 3 year



Environmental Health: 2022 Activities (Q4)

CUSTOMERS

Filebound

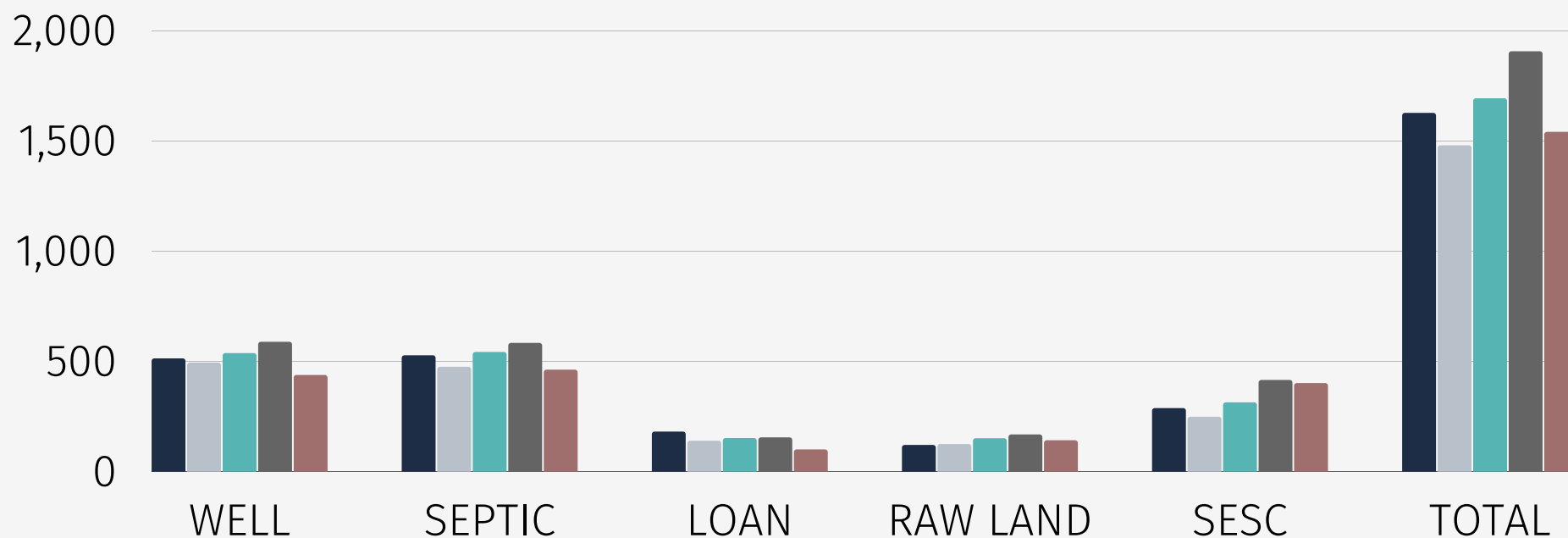
- **Project outcome:** customers will have access to files on the internet.
- Activities for this Quarter include:
 - Purge all numbered Streets and Avenues
 - All of the numbered Streets and Avenues will be purged and scanned by October 14, 2022.
 - Working with Project Management on merging with BS & A

Ground Water Ad Hoc Committee

- **Project outcome:** Have a community-driven workgroup around the Ground Water Study
 - Activities for this Quarter include:
 - The Work Group is working on a package of recommendations to submit to the BOC.

EH FIELD APPLICATIONS COMPARISON BY YEAR (Jan 1 - Sept. 30)

■ 2018 ■ 2019 ■ 2020 ■ 2021 ■ 2022



IMPROVED PROCESSES

EGLE Audit of SESC Program

- 3 Sanitarians have been audited and passed for permitting
- Working with legal on EGLE recommended versions to Allegan County SESC Ordinance

EGLE Audit of Private and Type III Water Supply Program

- Working with the EGLE Liaison on permitting and inspections wells to meet MPRs

FINANCIAL STABILITY

MiTracking Grant

- Preparing the narrative and final submission

Revenue Review

- Continue to review revenue on a monthly basis and compare to previous years

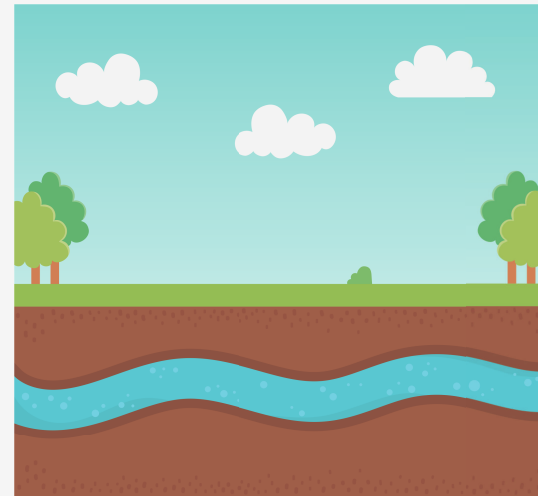
EGLE funding

- EGLE announced they anticipate budget increases for the 2023 fiscal year for campground inspections, public swimming pool inspections, septage truck inspections, and Non-Community Water Supply (Type II) Program.
 - The increase will be shown in the EGLE contract for the coming budget year.
 - The program became a requirement in January 2016 and has not been sufficiently funded by EGLE.

Potential Emerging Environmental Issues

Ground Water Contamination

- Current Sites of PFAS Interest: KAVCO, Otsego, DeYoung Landfill (sites in Allegan County on Michigan PFAS Action Response Team's website)
- Ground Water Monitoring Program:
 - **UPDATE:** DeYoung Landfill is to be sampled again in October 2022
- Hazelwood to have municipal water installed from an EGLE grant (Otsego)
- Ground Water Task Force presenting recommendations to the BOC to conserve and protect quality ground water



Harmful Algal Blooms (HABs)

- Longer, warmer summer season may contribute to incidences and duration of HABs
 - **UPDATE:** Swan Lake tested for HAB and was positive
 - Warning signs placed at lake
 - ACHD continues to do testing and update the public

Vector-borne Diseases, including EEE

- Mosquitos: 72 identifiable mosquitos were collected
 - 0 were reportable disease vectors
- Ticks: 0 ticks collected
- Using grant money to collect agricultural tires, which can be breeding ground for mosquitoes
- Reviewed previous processes for EEE



Beach Testing Surveillance and Monitoring

- 78 Samples were taken, all below MCL
- Working with Parks, Recreation, and Tourism to put signage on beach water safety up in highly trafficked areas.



PERSONAL HEALTH



675 CSHCS Total Clients
21 CSHCS New Client Enrollment

47
Level 1 Plan of Care
CSHCS

78
Level 2 Care Coordination
CSHCS

0
CSHCS Case
Management Services

29
CSHCS Transition Plan of
Care

65/35/52
CSHCS Transition contact
assists/mailings

28 redistributions of
vaccine inventory
(covid and non-covid)

1,046 Overall
Medicaid Outreach
Units



2 Curbside
immunizations given

708
Immunizations Provided

130
Waivers Provided



37
STD/HIV Clinic
Visits



3,600
Wear One Kits
Distributed

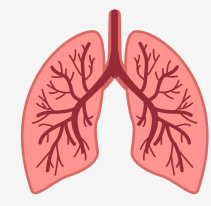


1,222
Hearing and Vision screenings conducted

58*
Close contacts self-
monitored referrals* for
COVID-19

2,711
Communicable Disease
Investigations conducted (MDSS)

0
Active TB (DOTs)



17
TB Skin Tests placed



3
TB latent infections

0 VFC program site visits

STD/HIV
Case Follow-Up **136**

25 Lead Testing
Follow up clients



55
Rabies
Evaluations



23
VFC Technical Assistance
encounters provided



Personal Health: 2022 Activities (Quarter 3)

CUSTOMERS

Lead Testing

- **Program goal:** Increase the number of children <6 years old testing for Lead to help prevent lifelong negative health impacts
 - **ONGOING Q3:**
 - Collaborate with GSC and Head Start Advisory on education, provider resources, and referrals
 - **ONGOING Q3:**
 - Public Health Nurses attended training regarding Lead investigation, mitigation assessment facilitated by the State of Michigan.

CSHCS Transition Toolkit Development

- **Program goal:** Increase the percentage of adolescents, with and without special healthcare needs, who receive services necessary to make transitions to adult health care.
 - **MET/ONGOING Q3:**
 - Distributing transition guide to 52 CSHCS families during annual renewal process and during care planning, procedures developed to assure consistent distribution and review of materials.
 - local transition resource guide (<https://bit.ly/3Q98HpP>) available online as well.

IMPROVED PROCESSES

- **MET Q3:** MDHHS held a virtual site audit of the HIV program related to clinical services - initial feedback favorable
- **MET Q3:** Michigan Organization on Adolescent Sexual Health conducted a "secret shopper" assessment of clinical services, favorable assessment and feedback received. Team is evaluating process improvement opportunities.

CUSTOMERS

Immunizations

- **Program goal:** Increase vaccine coverage rates for vaccine-preventable disease in Allegan County for all populations with a priority on those 19 and under, as well as vulnerable population

- **ONGOING Q3:**
 - Continue to monitor and assist partners in the community with their vaccine inventory and distribution to the community
 - Provided nontraditional opportunities for targeted vaccine distribution as well as increased the availability of appointments related to the Monkeypox (MPV) vaccine at Dunes, Camp It, and Allegan County Fair.



- **317 doses** were given between 8/1/22-9/30/22.

- **MET Q3:**
 - Collaborated with the CSHCS team to distribute recall notices to all 387 CSHCS enrolled clients, including education and resources related to nontraditional vaccination resources.

FINANCIAL STABILITY

- **ONGOING Q3:**
 - Continued priority to assess opportunities for sustainable funding streams and charge capture.



Personal Health: 2022 Activities (Q4)

CUSTOMERS

Lead Testing

- **Program goals:** Increase the number of children <6 years old that receive screening for elevated blood lead levels and increase the percentage of children less than 72 months who received a venous confirmation blood lead test within 30 days of an initial positive capillary test (3.5 mcg/dL or greater) from 71% to 75%.
 - **Ongoing:** Activities for Q4 include:
 - Participate in the Head Start Advisory and Great Start Collaborative to assure Community partners are aware of resources
 - Head Start children are mandated to be lead tested and the Advisory shares data and anecdotal information. ACHD coordinates provider education and targeted follow-up with families based on this feedback.
 - Q4 Provider letter developed with recommendation and guidance for distribution in ACHD Provider Newsletter.

CSHCS Transition Toolkit Development

- **Program goal:** Increase the percentage of adolescents, with and without special healthcare needs, who receive services necessary to make transitions to adult health care.
 - **Ongoing:** Activities for Q4 include:
 - Distribution of CSHCS toolkits

CUSTOMERS

Immunizations

- **Program goal:** Increase vaccine coverage rates for vaccine-preventable disease in Allegan County for all populations with a priority on those 19 and under, as well as vulnerable population
 - Activities for this Quarter include:
 - Continue to monitor and assist partners in the community with their vaccine inventory and distribution to the community.
 - Provide 3 nontraditional opportunities for targeted vaccine distribution to include the flu vaccine
 - Collaborate with CSHCS team to distribute recall notices to CSHCS enrolled clients, including education and resources related to nontraditional vaccination resources
 - Continue to collaborate, ensuring all enrolled clients receive this information by 12/31/2022



FINANCIAL STABILITY

- Ongoing charge capture review and process improvement

IMPROVED PROCESSES

- Integrate feedback from the MDHHS STI program virtual site visit once final report is received.
- State approval of the Health Resource Advocate Workplan for 2023.



Potential Emerging Personal Health Issues

ONGOING: Communicable Diseases vs. Resources Available

- Awarded 4 state-funded positions through July 2023 to assist in the mandated service level delivery.
- **Monkeypox Response**
 - Targeted vaccine administration, education, and outreach during weekend venues to reach high-risk populations.
 - Provision of oral antiviral distribution to providers developed and procedure created for distribution to individuals should the need arise.

NEW: Ebola Outbreak

- Monitoring travelers daily, complete risk assessment (21 day monitoring period)
- Work with legal on reviewing potential exposure notices and procedures
- Following MDHHS protocol RE: Ebola

EDUCATION:

- Symptoms may appear anywhere from 2 to 21 days after contact with the virus
 - Fever, Aches and pains, such as severe headache and muscle and joint pain, Weakness and fatigue, Sore throat, Loss of appetite, Gastrointestinal symptoms including abdominal pain, diarrhea, and vomiting, Unexplained hemorrhaging, bleeding or bruising
- The virus spreads through direct contact
- For more information: <https://bit.ly/3DqmK4S>

ONGOING: Active and Latent TB

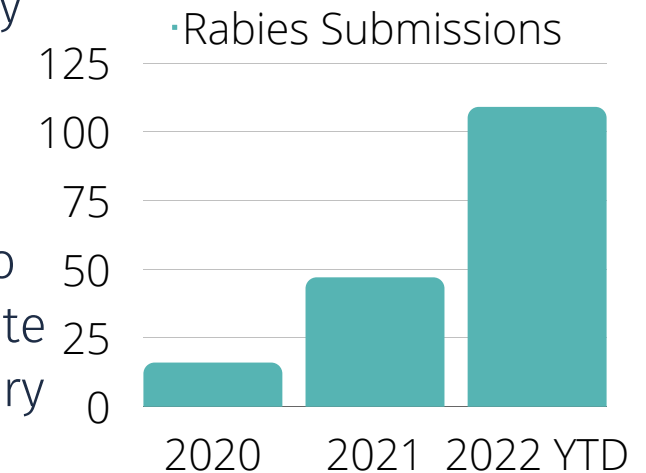
- ACHD provides Tuberculosis (TB) skin testing as well as provides a referral/order for TB blood testing.
- In regard to active TB, ACHD provides Direct Observed Therapy (DOT) if necessary. Both Latent Tuberculosis Infection (LTBI) and DOT treatment courses involve patient and family education, routine clinical consults with providers, frequent patient contact, and assessment with the Communicable Disease program and Public Health Nurse. We are currently doing DOT on 1 latent TB patient.

UPDATE: Oral Health Legislation (MCL 333.9316)

- Stakeholder kickoff meeting to be held in Q4 with MDHHS and the MCDC leadership to ensure metrics needed are being collected

UPDATE: Rabies Submissions

- Rabies submissions procedures and policy development ongoing.
 - ACHD assures that the documentation is being captured in the Michigan Disease Surveillance System (MDSS) to consistently measure and communicate bidirectionally with the State laboratory and clinical team related to rabies assessment and treatment.
 - Identifying stakeholders and in Q4 will develop a process improvement project regarding rabies.

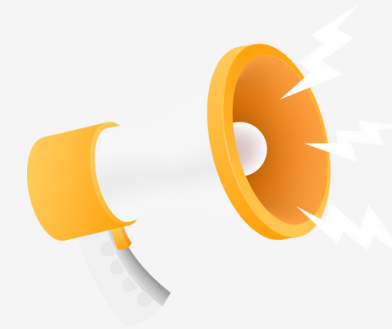


PUBLIC HEALTH PLANNING & PREPAREDNESS

60 Health Education
Materials Created



Newsletters sent out



4 Press Releases
sent out

2 Outreach Events



6,905
Followers on Facebook



311
Followers on Twitter

78

Facebook posts on
public health items in Q3

44

Twitter posts in Q3



Planning and Preparedness: 2022 Activities (Q3)

CUSTOMERS

Planning and Responding to Monkeypox

- **MET:** Develop webpage, educational materials, and health education messages for monkeypox response (<https://bit.ly/3zwhGuO>)

Information Sharing

- **ONGOING:** Include the communications/information sharing section on the Whole Community Inclusion Plan.

Community Health Workers - Pilot Project

- Michigan Rural Health Center funding until May 2023 for 2 Community Health Workers.
- **Project Goal:** Address social determinants of health that influence health inequities and make connections that help our community thrive.
- **MET:** Activities for this Quarter include:
 - Build Website and finalize marketing plan
 - Launch Program by September
 - Formally Launched October 14, 2022

ENGAGED WORKFORCE

- **MET:** Re-engaging Continuous Quality Improvement Committee at ACHD
- **MET:** Plan for employee CQI assessment

IMPROVED PROCESSES

Communication Plan

- **MET:** Activities for this Quarter include
 - Review and update existing policies and procedures. Create newly identified policies and procedures
 - Meet with Health Officer to review changes/updates to plan

Workflow Improvements with Community Partners on Case Investigation

- **ONGOING:** Activities for this Quarter include
 - Meet with business leaders to start the conversation on workflows where case investigation could be assigned to a willing entity or organization to expedite notification to potential exposures
 - Met with Perrigo 's Corporate Security Emergency Management Coordinator

FINANCIAL STABILITY

Grant and Technical Assistance Opportunities

- Continue assessing 10 EPHS and National Public Health Accreditation Readiness
 - Public Health Accreditation Board (PHAB released 2022 accreditation guidelines that changed due to the 10 EPHS changes in 2020.
 - Will be building into our plans to review these changes and update/create action steps to align.



Planning and Preparedness: 2022 Activities (Q4)

CUSTOMERS

Planning and Responding to Emerging Diseases

- Develop educational materials, and assist in developing surveillance tools for monkeypox and ebola.

Community Health Workers - Pilot Project

Project Goal: Address social determinants of health that influence health inequities and make connections that help our community thrive.

- Activities for this Quarter include:
 - Connect with community partners on program to increase capacity
 - Connect with individuals who are referred to program

Website Changes

- Work with each division on updating webpages with needed content, improve readability, and ease of finding information related to HD topics.

FINANCIAL STABILITY

Grant and Technical Assistance Opportunities

- Continue assessing 10 EPHS and National Public Health Accreditation Readiness
 - Will be building into our plans to review these changes and update/create action steps to align (2022 Q4 - 2023 Q1).

IMPROVED PROCESSES

Communication Plan

- Activities for this Quarter include:
 - Finalize Plan
 - Complete activity schedules for upcoming projects

Workflow Improvements with Community Partners on Case Investigation

- Activities for this Quarter include
 - Outline proposed workflow for stakeholder feedback

Inventory Management

- Activities for this Quarter include
 - Research inventory management solutions
 - Update and create processes for materiel and asset tracking

Emergency Operation Plans

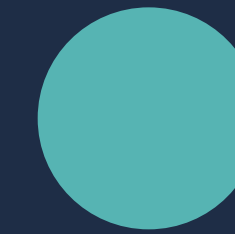
- Activities for this Quarter include
 - Review and update plans on a continual basis as capacity allows

ENGAGED WORKFORCE

- Identified staff to complete ICS 300 course (Tier 3 and 4 team members)



Mobile Clinics & Outreaches



ACHD has attended 6 outreach events in 2022 and deployed the mobile unit 4 times.



Pictured above: ACHD Team members at Veterans Stand Down, 10/20/22; Mobile unit at Allegan Bridgefest 6/11/22



Pictured above: ACHD Mobile Unit and team members at Dunes Resort Event, 6/2022



Pictured above: ACHD Mobile Unit and team members at Douglas PRIDE Event, 6/4/22



Pictured right: ACHD Team Member at the Allegheny County Fair - Seniors Day, 9/13/22



Allegan County Community Links is bridging the gap between individuals, communities, health, and social service systems. We are aiming to make the connections that help the Allegan County Community thrive.

What is a Community Health Worker?

A Community Health Worker is a trained/certified public health worker who serves as a liaison between communities, health care systems, social service systems, and health departments.

What services does Allegan County Community Links connect residents to?

- Basic Needs
- Family Services
- Housing Assistance
- Medical Services
- Mental Health Services
- Transportation Assistance
- Education Resources
- Senior Service Resources
- Legal Services
- Food Assistance



How does this program work?

Step 1:

- A person fills out our referral form online.

Step 2:

- One of our Community Health Workers contacts the individual and gathers needed information to start connecting the individual to services and resources they need.

Step 3:

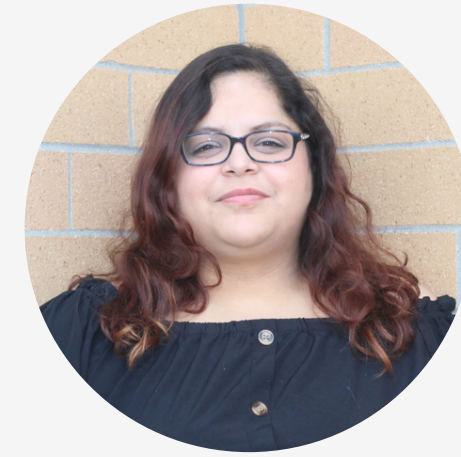
- Our Community Health Worker will routinely follow up with the individual to check-in and make sure they are getting what they need.

Scan the QR Code or visit the link below to fill out our referral form:



bit.ly/3SUW0jY

Meet our Community Health Workers:



Veronica Rodriguez



Regina Love

The Certified Community Health Workers at Allegan County Health Department are excited to help community members receive the referrals and services they need by working to ensure all referrals are met in a timely manner.

For more Information:

Visit our website for more information about Allegan County Community Links:
www.allegancounty.org/health/community-links

Contact a Community Health Worker:
E: communitylinks@allegancounty.org
P: (269) 673-5411 ext. 4547 or ext. 4550

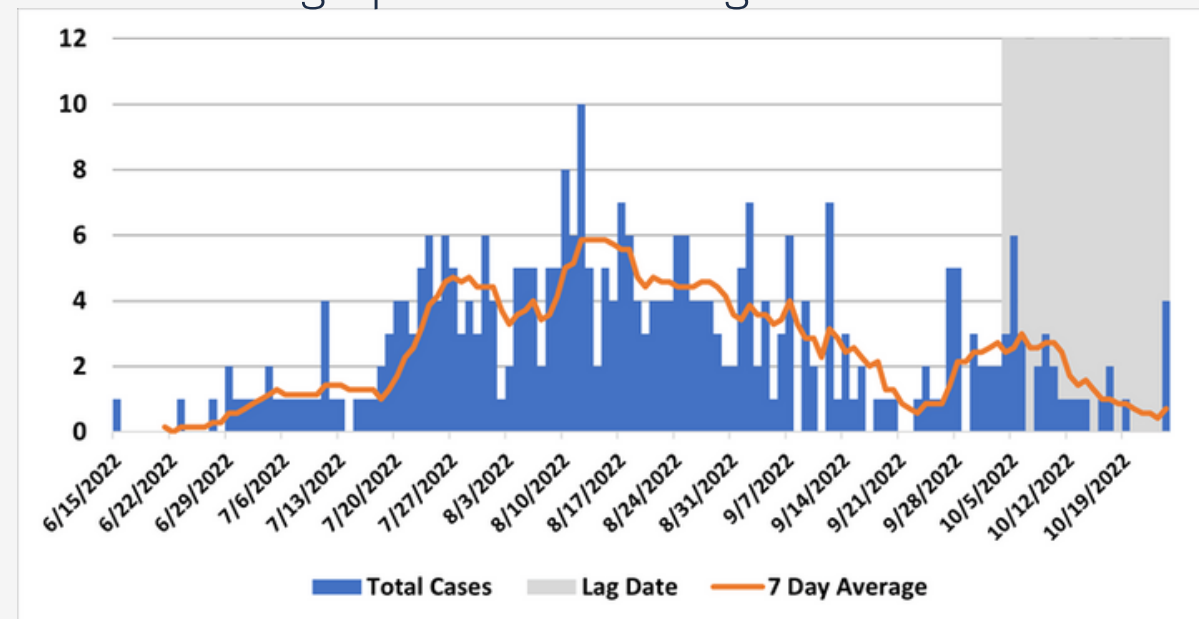


Potential Emerging Public Health Concerns: Planning and Preparedness

Planning and Preparedness works with all HD divisions to develop health education and plans for improving health outcomes within our community as we respond to public health issues

2022 Monkeypox

- Michigan:
 - As of October 24, there have been 327 confirmed cases
- Allegan County:
 - 2 confirmed cases
 - 384 vaccines administered as of 10/31/22
 - Working with Communicable Disease and Immunization Teams on vaccinating those most at risk
 - Sharing updated MDHHS guidance for Schools



Funding

- Seeing cost increases for equipment and tools for preparedness activities
 - Replenishing Public Health Cache and focusing on N95s



2022 Highly Pathogenic Avian Influenza (Bird Flu)

- Current Status in Michigan:
 - The Michigan Department of Agriculture and Rural Development (MDARD) has detected new cases of highly pathogenic avian influenza in domestic poultry - 4 new detections in backyard flocks since 9/6/22
 - Cases of the disease are still being found in Michigan's wild birds and mammals
 - Continue to practice biosecurity measures to protect domestic birds (michigan.gov/birdflu)
- Current Status in Allegan County:
 - No confirmed detections since May 2022

Ebola

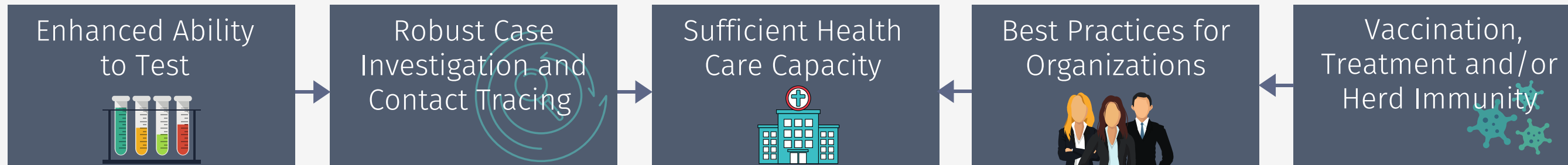
- Supporting Personal Health with educational materials, information, and updating communications
- Reviewing Ebola Emergency Operation Plans and updating as needed
- Ensure Public Health has enough cache



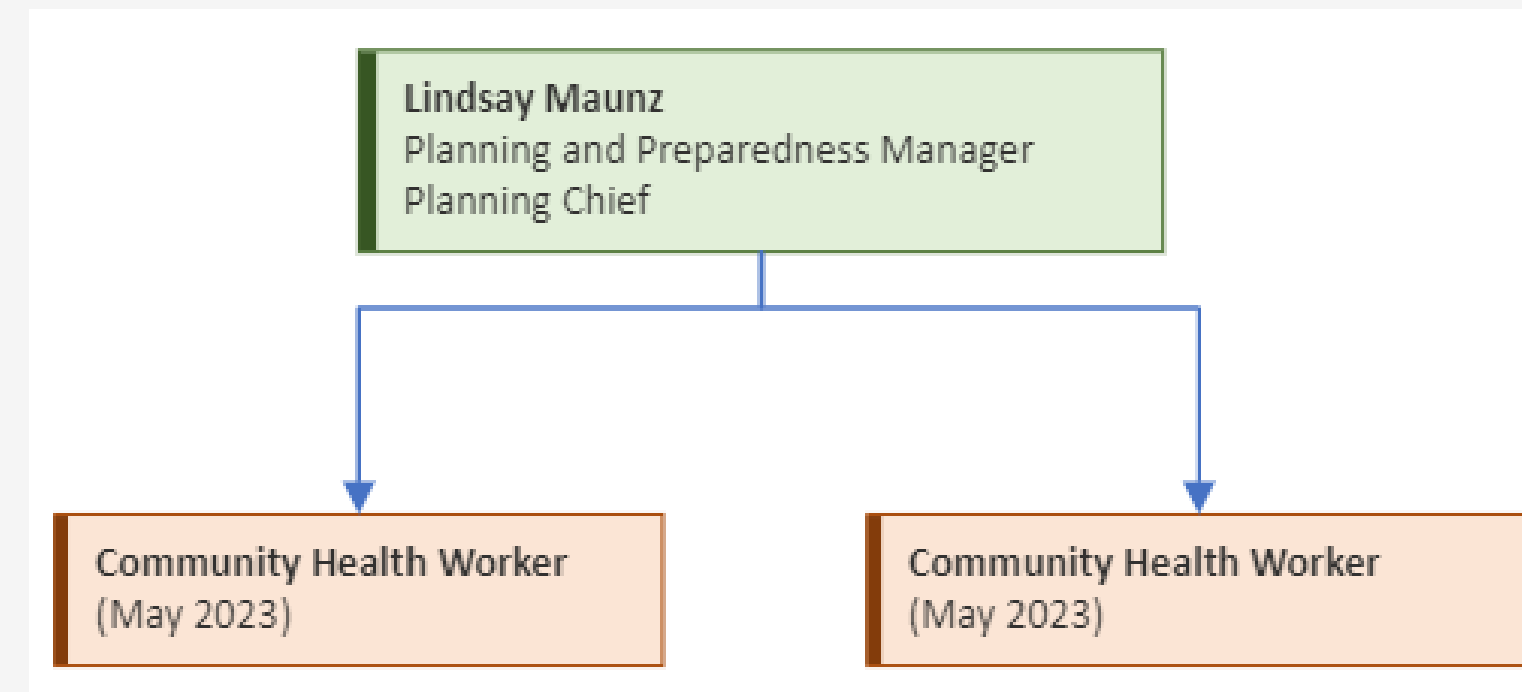
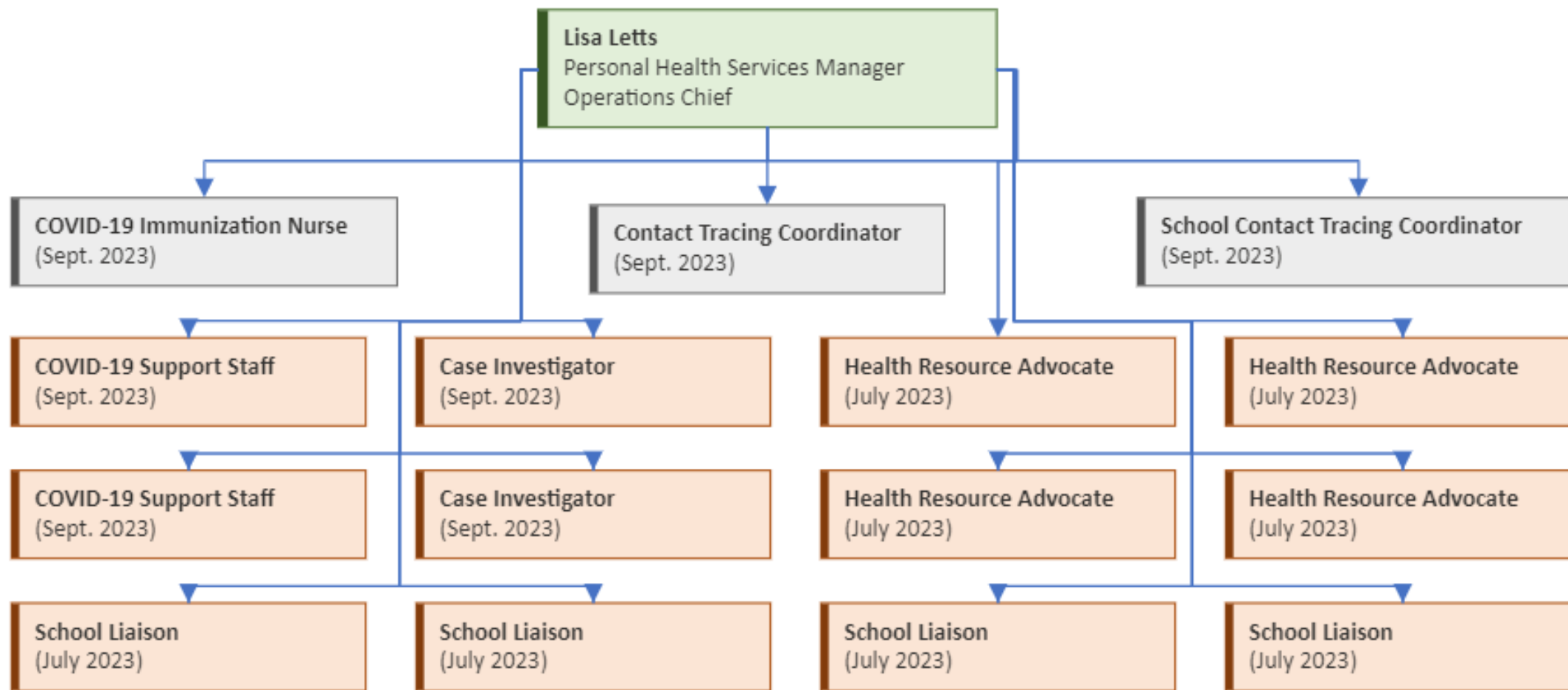
HEALTH Department

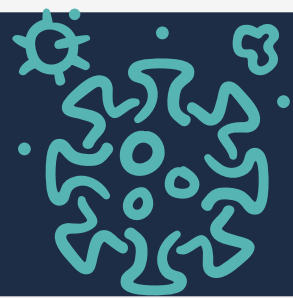
Allegan County Health Department: Organization Chart, Staff for COVID Response

COVID-19 MITIGATION COMPONENTS



Staff





COVID-19 Response: 2022 Activities (Q3)

CUSTOMERS

Provide Treatment Options

- MET: Launch drive-up antiviral pick-up for eligible individuals

Continue Providing Health Education

- ONGOING: Regularly create educational materials for social media to include mitigation strategies, latest research, timely news
- ONGOING: Continue to update local guidance documents as new information/guidance emerges

Access to Mitigation Tools

- ONGOING: Preparing for a resurgence by getting a cache of PPE and rapid home tests to get to our community partners to deploy

ENGAGED WORKFORCE

Staffing Changes

- MET: Anticipate off boarding in Q3 –
 - 6 Contact Tracers
 - 2 Health Educators
 - 4 Case Investigators
 - Hope to secure 2 investigators and 2 School Liaisons.

FINANCIAL STABILITY

Staffing Changes

- ONGOING: Working with Finance Department to maximize COVID-19 funding

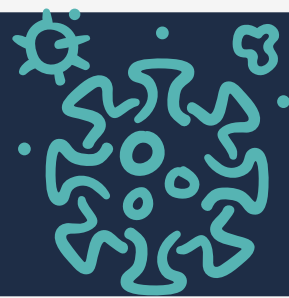
IMPROVED PROCESSES

Managing similar to other Communicable Diseases

- Continuing to monitor; managing the CD response similar to other reportable Communicable Diseases.

COVID-19 BOC Updates

- ONGOING: Reviewing data provided and evaluating what local data is not available from other entities to help community members evaluate individual risks.



COVID-19 Response: 2022 Activities (Q4)

CUSTOMERS

Provide Treatment Options

- Provide drive-up antiviral pick-up for eligible individuals

Continue Providing Health Education

- Regularly create educational materials for social media to include mitigation strategies, latest research, timely news
- Continue to update local guidance documents as new information/guidance emerges

Access to Mitigation Tools

- Prepare for a resurgence by getting a cache of PPE and rapid home tests to get to our community partners to deploy
- Work with Transportation to sunset testing events supported by MDHHS for the time being.
 - Testing utilization for Wednesday and Friday events is extremely low
 - Developing trigger plan if needing to stand back up quickly

FINANCIAL STABILITY

Staffing Changes

- Working with Finance Department to maximize COVID-19 funding

IMPROVED PROCESSES

Wastewater Surveillance

- Review wastewater surveillance on a regular basis and developing procedures for informing high risk populations when seeing increases
- Allegan has representation from numerous municipal wastewater management sites

ENGAGED WORKFORCE

DiSC Assessments and Developmental Opportunities

- Some of our contracted staff have been with us for over 18 months.
- Utilizing DiSC assessments and other opportunities to retain contract staff

Questions?



Are there any items that you'd like to see included in the next BOC Quarterly Meeting?

Clean Energy Products Overview

Allegan County Board of Commissioners

November 10, 2022

Eric Clinton, Director of Renewable Products

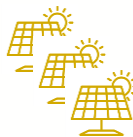
The logo for Consumers Energy, featuring the company name in a blue, italicized sans-serif font. The text is enclosed within a green swoosh that starts above the 'C' and ends below the 'y', curving around the text.

Consumers Energy

Count on Us®

We offer a variety of high quality, flexible, cost competitive renewable products to meet the needs of our customers

Solar Gardens



- Customers source their electricity use with high visibility, local, Michigan made community solar electricity
- Helps customers put sustainability values into practice and protect environment for future generations
- Flexible, cost competitive subscription-based model, zero upfront costs, month-to-month

Large Customer Renewable Program



- Business customers source their electricity use with local, Michigan made wind or solar electricity
- Helps businesses meet sustainability goals, attract capital and improve their brand
- Cost competitive subscription-based model, zero upfront costs, 10, 15, 20-year terms available

MI Clean Air (Carbon Offset)



- Customers offset their natural gas use through the purchase of local, Michigan forestry-based carbon offsets
- Helps customers put sustainability values into practice and protect environment for future generations
- Flexible, cost competitive subscription-based model, zero upfront costs, 1-year term

Renewable Energy Credits (RECs)



- Customers offset their electricity use through the purchase of local or national RECs
- Helps customers achieve their sustainability goals in the most cost-effective manner possible
- Flexible, low-cost subscription-based model, zero upfront costs, 1, 3-year terms available

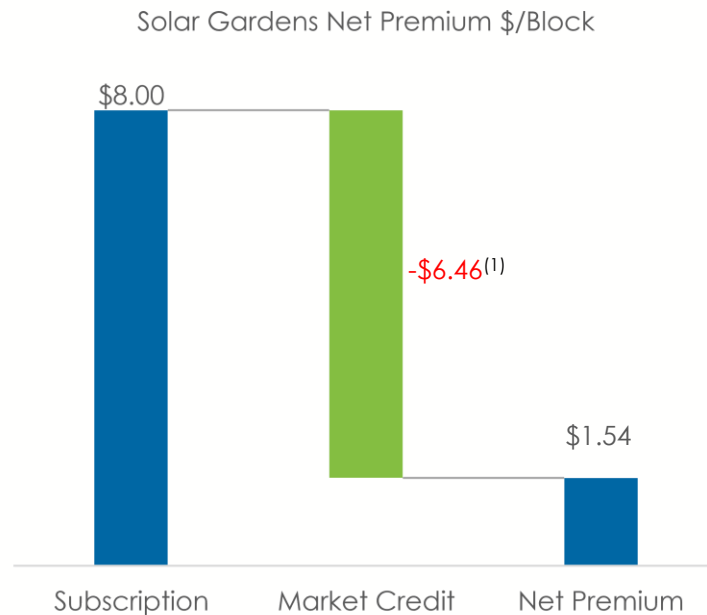
What makes an ideal Solar Garden host site?

- **Community Acceptance** – Communities that **desire solar and have solar ordinances in place**
- **Location** – land must be located **within Consumers' electric service territory**
- **Acreage** – Minimum of **30-acres**
- **Demand** – Larger non-residential electric customers who are **willing to commit to a portion of the electricity produced for a mutually agreeable multi-year term**
- **Land Type** – **Cleared**, relatively **flat** land with **no wetlands (low-risk flood zones), no woods, no structures**
- **Brownfields** - Legacy industrial sites **may** be suitable
- **Interconnection Infrastructure** – Nearby (**closer is better, one-mile or less**) Consumers' infrastructure (substation) to support **cost effective high voltage interconnection**



Solar Gardens customers pay a monthly subscription fee that is offset by a credit

- **Program** - Customer pays to supply **all or a portion of their consumption with renewable solar generation** in addition to their normal bundled electric rate
- **Subscription** - Customer subscribes to a monthly block at a rate of \$8 per block (one block is equal to 0.5 kW of solar capacity)
- **Market Credit** - The customer receives a per block **credit equal to the market value of the electricity produced by the Solar Garden**
- **Location** - Customers **do not have to live geographically near a Solar Garden** to subscribe
- **Term** - **1-year minimum** then month-to-month thereafter
- **Solar Gardens Sunrise** - Open to all organizations with a **non-profit status that serve low-income residential customers** or schools.



(1) 12-month average credit from Oct 2021 through Sep 2022

Potential benefits of investing in solar energy



Resiliency

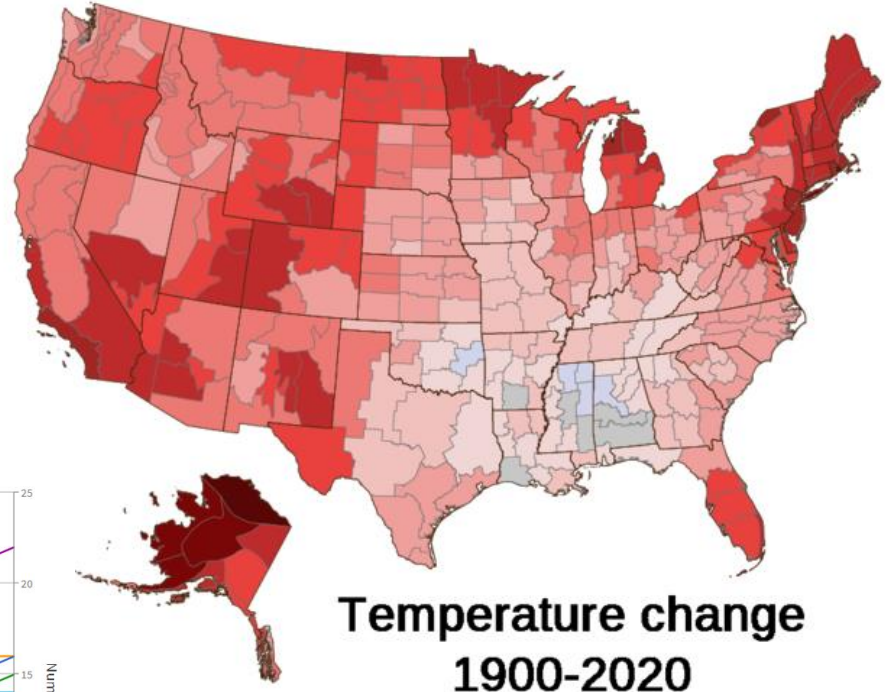
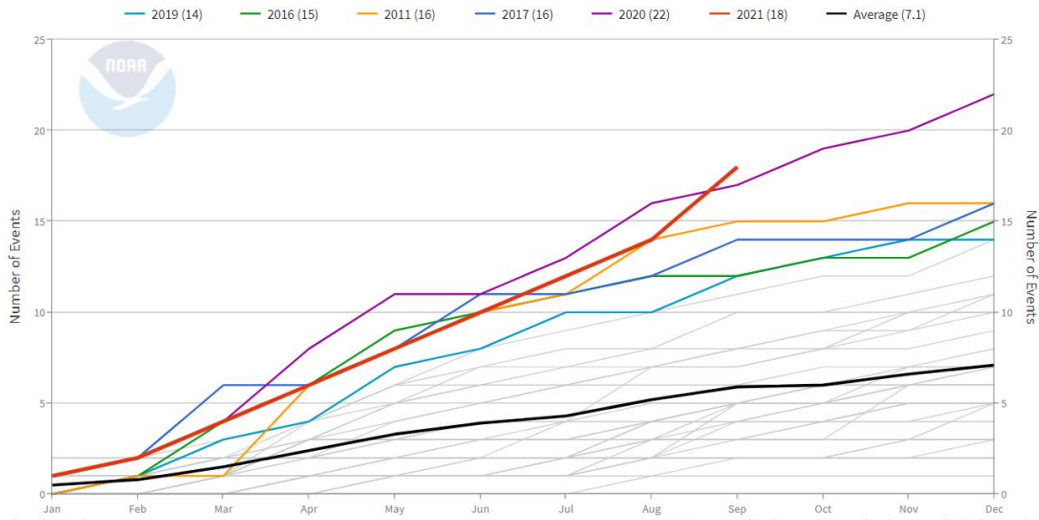


Photo courtesy of Tony Webster

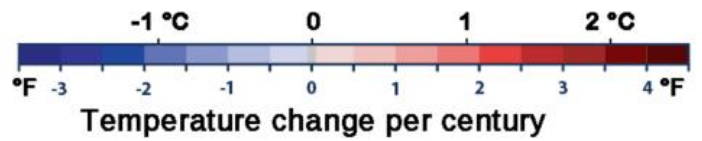


Climate Goals

1980-2021 United States Billion-Dollar Disaster Event Count (CPI-Adjusted)



Temperature change 1900-2020



Source: USEPA

Updated: October 8, 2021

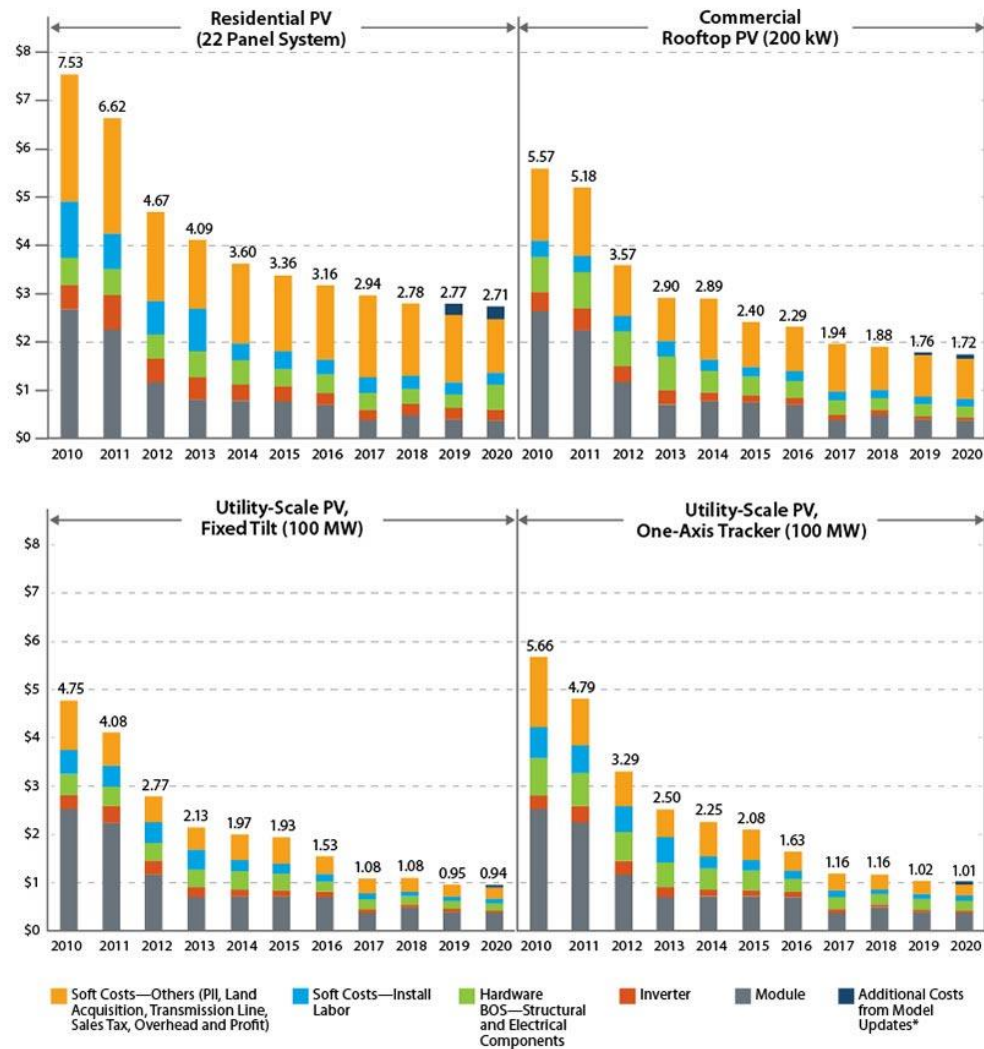
Event statistics are added according to the date on which they ended.



Cost Savings

Solar Installed System Cost Analysis

Source: National Renewable Energy Laboratory



Leading by example



Butterfield Elementary School, Suburban Chicago

Photo courtesy of Chicago Tribune



Dual use



Photo courtesy of Rob Davis



Energy Audit First!



Low output sprinklers



LED lights in barn at Wing Dairy, Barry County, MI

Photo courtesy of Aluel Go

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To file a program discrimination complaint, a complainant should complete a Form AD 3027, USDA Program Discrimination Complaint Form, which can be obtained online, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

- mail:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or
 - fax:**
(833) 256-1665 or (202) 690-7442;
 - email:**
program.intake@usda.gov.
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La información del programa puede estar disponible en otros idiomas además del inglés. Las personas con discapacidades que requieren medios de comunicación alternativos para obtener información sobre el programa (por ejemplo, Braille, letra agrandada, grabación de audio y lenguaje de señas americano) deben comunicarse con la agencia estatal o local responsable que administra el programa o con el TARGET Center del USDA al (202) 720-2600 (voz y TTY) o comunicarse con el USDA a través del Servicio Federal de Transmisión de Información al (800) 877-8339.

Para presentar una queja por discriminación en el programa, el reclamante debe completar un formulario AD 3027, Formulario de queja por discriminación del programa del USDA, que se puede obtener en línea, en cualquier oficina del USDA, llamando al (866) 632-9992, o escribiendo una carta dirigida al USDA. La carta debe contener el nombre, la dirección y el número de teléfono del reclamante, y una descripción escrita de la supuesta acción discriminatoria con suficiente detalle para informar al Subsecretario de Derechos Civiles (ASCR, por sus siglas en inglés) sobre la naturaleza y la fecha de la presunta violación de los derechos civiles. La carta o el formulario AD-3027 completado debe enviarse al USDA por medio de:

- correo postal:**
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; o
 - fax:**
(833) 256-1665 o (202) 690-7442;
 - correo electrónico:**
program.intake@usda.gov.
- Esta institución ofrece igualdad de oportunidades.





SPARTANS WILL.

M. Charles Gould
Extension Bioenergy Educator
Michigan State University Extension

12220 Fillmore St., Suite 122
West Olive, MI 49460
(616) 834-2812 | gouldm@msu.edu

Michigan State University Bioenergy <http://bioenergy.msu.edu/>
MSU Extension www.msue.msu.edu

Donations and Surplus Programs:

4.19.1 Acceptance and use of any donation (money, goods, or services) shall be consistent with the nature of the County's Services and Programs, Strategic Goals, and internal controls and subject to the approval of the Board of Commissioners or CAO pursuant to Appendix 6.D and shall be submitted utilizing the Work Order/(RFA) process.

4.19.2 Service Areas, anticipating receipt of donations (or expecting to solicit donations through fundraising efforts) and expecting to use or expend donations (other than receiving monetary donations as a general revenue) on an ongoing basis, shall develop a Donation Plan to be submitted to the CAO.

4.19.3 The Plan shall define and establish the estimated useful life of the asset, a funding plan for any ongoing costs and/or replacement costs, use, and disposition of the asset. All donation activity shall be appropriately tracked within the County's financial system.

4.19.4 Unless otherwise approved through a Donation Plan, consistent with Appendix 6.D, or permitted within Board of Commissioners approved policy, donations for a restricted purpose shall not be accepted.

4.19.5 Donations from service providers currently doing business with the County, having done business with the County in the last 12 months or likely to do business with the County in the next 12 months are specifically prohibited. Infrequent and de minimis items that are generally made available to a broader audience and therefore not an influential factor in decision making processes (e.g. product samples, conference trinkets, holiday greetings) shall not be considered donations.

4.19.6 Donations as Recognition/Appreciation – Services Areas (not individuals) may receive donated goods as recognition/appreciation to the extent such is infrequent and de minimis. Example 1, perishable/consumable items such a food in recognition of service or working lunches (e.g. pizza, desserts, *flowers/plants*, etc.) Example 2, token items of appreciation generally valued under \$100 (e.g. service area plaques, photos, inspirational decorations).

4.19.7 Once approved for acceptance the Service Area receiving the donation shall acknowledge and express thanks to the donor(s) on behalf of the County.

4.19.8 Monetary Donations - Unless otherwise approved as part of a Donation Plan or approved consistent with the thresholds in Appendix 6.D, monetary donations shall be considered and treated as all other revenue, offsetting existing expenditures, and not carried over into a subsequent fiscal year.

4.19.8.1 All monetary donations must be handled in accordance with the Treasurer's Receipting Policy.

4.19.9 Service Areas expecting to receive monetary donations as a revenue to offset existing expenditures on a regular basis shall include estimates of donation revenue in the annual budget process.

4.19.10 Goods Acquired through Government Surplus Programs or through Donation: Eligible Service Areas may participate in Government Surplus Property Grants, such as the Federal 1033 Program or may receive donated goods subject to the following requirements:

4.19.10.1 All donated goods, or goods to be purchased with monetary donations, which have been pre-approved through the County's Capital Improvement Plan (CIP) and/or Annual Budget/Operational Plan shall be received or purchased with the appropriate review and approval consistent with the value thresholds in Appendix 6.D (operational/capital purchases).

4.19.10.2 In determining review/approval levels, only the estimated replacement value (what it would cost the county to replace the donated good with a new good) shall be applicable. Replacement value shall be determined by acquiring a quote(s) for a new equivalent good.

4.19.10.3 Regardless of value, donated goods and services, and goods and services resulting from a monetary donation, in consideration of being acquired shall undergo the appropriate review/approval consistent with county policy and operational support standards, which includes, but is not limited to the following:

4.19.10.3.1 Technology items (e.g. laptops, portable electronic devices, printers, software, etc.) shall be reviewed in advance by Information Services.

4.19.10.3.2 Facility items (e.g. furniture, appliances, etc.) shall be reviewed in advance by Facilities Management.

4.19.10.3.3 Vehicle shall be reviewed in advance by Transportation.

4.19.10.3.4 Personnel/staffing related plans shall be reviewed in advance by Human Resources.

4.19.10.3.5 Services/service agreements shall be reviewed in advance by Project Management.

4.19.10.4 When submitting a Work Order/RFA for final approval to accept a donation or make a purchase resulting from a monetary donation, evidence of the reviews outlined above shall be provided.

4.19.10.5 In cases where a monetary donation will be utilized to fund a good or service, such good or service shall be acquired by the support area above most closely relating to the nature of the good or service on behalf of the requesting Service Area.

4.19.11 Service Areas may acquire surplus or donated goods valued up to \$500 considered to be general operating goods for the nature of work performed by that Service Area.

4.19.12 In cases where a good becomes available through a governmental surplus or supplies program (e.g. 1033 DOD program) that has not been approved through an existing plan, exceeds the value of \$500, and is identified as needed, the item shall be reserved for 14 days and submitted for consideration, consistent with the value thresholds in Appendix 6.D (operational/capital purchases).

4.19.13 The Service Area shall maintain and furnish the CAO with access to all agreements, records, and property inventories for all items related to this *County donation policy*.

Donations and Surplus Programs:

4.19.1 Acceptance and use of any donation (money, goods, *(insert comma)* or services) shall be consistent with the nature of the County's Services and Programs, Strategic Goals and internal controls and subject to the approval of the Board of Commissioners or CAO pursuant to Appendix 6.D and shall be submitted utilizing the Work Order/(RFA) process.

4.19.2 Service Areas, *(insert comma)* anticipating receipt of donations (or expecting to solicit donations through fundraising efforts), *(delete comma)* and expecting to use or expend donations (other than receiving monetary donations as a general revenue), *(delete comma)* on an ongoing basis, *(insert comma)* shall develop a Donation Plan to be submitted to the CAO.

4.19.3 The Plan shall *define and establish the estimated useful life of the asset, (insert)* include the *an (insert)* appropriate financial structure to support *(delete)- evidence and record (insert)* the transactions *donation(s), expenditure(s), and/or use(s) and disposition(s) of the asset (insert).* ~~within or beyond a given fiscal year. (delete)~~

4.19.4 Unless otherwise approved through a Donation Plan, consistent with Appendix 6.D, or permitted within Board of Commissioners approved policy, donations *of 1) money (delete)* for a restricted purpose, *2) goods or 3) services, (delete)* shall not be accepted.

4.19.5 Donations from service providers currently doing business with the County, having done business with the County in the last 12 months or likely to do business with the County in the next 12 months are Policy #211 specifically prohibited. Infrequent and de minimis that are generally made available to a broader audience and therefore not an influential factor in decision making processes (e.g. product samples, conference trinkets, holiday greetings) shall not be considered donations.

4.19.6 Donations as Recognition/Appreciation – Services Areas (not individuals) may receive donated goods as recognition/appreciation to the extent such is infrequent and de minimis, *(delete comma, insert period)* Example 1, perishable/consumable items such a food in recognition of service or working lunches (e.g. pizza, desserts, *flowers/plants ???,* etc.) Example 2, token items of appreciation generally valued under \$100 (e.g. service area plaques, photos, inspirational decorations).

4.19.7 Once approved for acceptance the Service Area receiving the donation shall acknowledge and express thanks to the donor(s) on behalf of the County.

4.19.8 Monetary Donations - Unless otherwise approved as part of a Donation Plan or approved consistent with the thresholds in Appendix 6.D, monetary donations shall be considered and treated as all other revenue, offsetting existing expenditures, and not carried over into a subsequent fiscal year.

(Space)

4.19.98.1 *(renumber)* All monetary donations must be handled in accordance with the Treasurer's Receiving Policy. Service Areas shall not accept any donation that places restrictions on how ~~whether~~ *(delete)* the ~~money (delete)~~ *monetary donation(s) (insert)* is to be received and/or utilized.

Renumber subsequent

4.19.10 Service Areas expecting to receive monetary donations as a revenue to offset existing expenditures on a regular basis shall include estimates of donation revenue in the annual budget process.

4.19.11 Goods Acquired through Government Surplus Programs or through Donation: Eligible Service Areas may participate in Government Surplus Property Grants, such as the Federal 1033 Program or may receive donated goods subject to the following requirements:

4.19.11.1 All goods which have been **???** pre- approved through the County's Capital Improvement Plan (CIP) and/or Annual Budget/Operational Plan may be acquired, with **an ???** appropriate **second ???** review or approval at the time the items are available.

Does the above text suggest that there will be two approval stages necessary???????

Review vs. approval = two different actions

4.19.11.2 In determining review/approval levels, the estimated replacement value of an item shall **be established by approved methods or means ((insert). ~~the temporary ownership cost shall not be used (delete).~~**

4.19.11.3 Notwithstanding the value of an item, any items in consideration to be acquired shall undergo the appropriate review/approval consistent with county policy and operational support standards prior to acquisition. **Example 1, technology items (e.g. laptops, portable electronic devices, printers, software, etc.) shall be reviewed in advance by Information Services. (delete)**

Not Deleted, Reformatted/Renumbered Text Relative to "Examples"

4.19.11.3.1 Technology items (e.g. laptops, portable electronic devices, printers, software, etc.) shall be reviewed in advance by Information Services.

~~4.19.11.4 Example 2, facility items (e.g. furniture, appliances, etc.) shall be reviewed in advance by Facilities Management. Example 3, vehicles shall be reviewed in advance by Transportation. (delete)~~

4.19.11.3.2 Facility items (e.g. furniture, appliances, etc.) shall be reviewed in advance by Facilities Management.

4.19.11.3.3 Vehicles shall be reviewed in advance by Transportation.

Re-number subsequent

4.19.11.5 **Pursuant to Policy #211 (insert)**, Service Areas may acquire surplus or donated goods valued up to \$500 **~~and Policy #211 (delete) and (insert)~~** considered to be general operating goods for the nature of work performed by that Service Area.

~~4.19.11.5.1~~ In cases where a good becomes available that has not been approved through an existing plan, exceeds the value of \$500 and is identified as needed, the item may be **reserved** for 14 days and submitted for consideration, consistent with the value thresholds in Appendix 6.D (operational/capital purchases).

What does "reserved" mean???

~~4.19.11.5.2~~ The Service Area shall maintain and furnish the CAO with access to all agreements, records, and property inventories for all items related to this **County donation policy program**.

Donations and Surplus Programs:

4.19.1 Acceptance and use of any donation (money, goods, or services) shall be consistent with the nature of the County's Services and Programs, Strategic Goals, and internal controls, and subject to the approval of the Board of Commissioners or CAO pursuant to Appendix 6.D and shall be submitted utilizing the Work Order/(RFA) process.

4.19.2 Service Areas, anticipating receipt of donations (or expecting to solicit donations through fundraising efforts) and expecting to use or expend donations (other than receiving monetary donations as a general revenue) on an ongoing basis, shall develop a Donation Plan to be submitted to the CAO.

4.19.3 The Plan shall define and establish the estimated useful life of the asset and an appropriate financial structure to evidence and record the donation(s), related expenditure(s) thereto, use(s)/application(s) (and disposition(s) of the asset(s) upon expiration of its useful life, if applicable).

4.19.4 Unless otherwise approved through a Donation Plan, consistent with Appendix 6.D, or permitted within Board of Commissioners approved policy, donations for a restricted purpose shall not be accepted.

4.19.5 Donations from service providers currently doing business with the County, having done business with the County in the last 12 months or likely to do business with the County in the next 12 months are Policy #211 specifically prohibited. Infrequent and de minimis that are generally made available to a broader audience and therefore not an influential factor in decision making processes (e.g., product samples, conference trinkets, holiday greetings) shall not be considered donations.

4.19.6 Donations as Recognition/Appreciation – Services Areas (not individuals) may receive donated goods as recognition/appreciation to the extent such is infrequent and de minimis. Example 1, perishable/consumable items such a food in recognition of service or working lunches (e.g. pizza, desserts, *flowers/plants ???*, etc.) Example 2, token items of appreciation generally valued under \$100 (e.g. service area plaques, photos, inspirational decorations).

4.19.7 Once approved for acceptance the Service Area receiving the donation shall acknowledge and express thanks to the donor(s) on behalf of the County.

4.19.8 Monetary Donations - Unless otherwise approved as part of a Donation Plan or approved consistent with the thresholds in Appendix 6.D, monetary donations shall be considered and treated as all other revenue, offsetting existing expenditures, and not carried over into a subsequent fiscal year.

4.19.8.1 All monetary donations must be handled in accordance with the Treasurer's Receipting Policy. Service Areas shall not accept any donation that places restrictions on how the monetary donation(s) is to be receipted and/or utilized.

4.19.9 Service Areas expecting to receive monetary donations as a revenue to offset existing expenditures on a regular basis shall include estimates of donation revenue in the annual budget process.

4.19.10 Goods Acquired through Government Surplus Programs or through Donation: Eligible Service Areas may participate in Government Surplus Property Grants, such as the Federal 1033 Program or may receive donated goods subject to the following requirements:

4.19.10.1 All goods which have been **???** *pre-* approved through the County's Capital Improvement Plan (CIP) and/or Annual Budget/Operational Plan may be acquired, with **an ???** appropriate **second ???** review or approval at the time the items are available.

Does the above text suggest that there will be two approval stages necessary???????

Review vs. approval = two different actions

Review can result in denial, approval, no action-

Approval is one of three intended results of review.

4.19.10.2 In determining review/approval levels, the estimated replacement value of an item shall be established by approved methods or means.

4.19.10.3 Notwithstanding the value of an item, any items in consideration to be acquired shall undergo the appropriate review/approval consistent with county policy and operational support standards prior to acquisition.

4.19.10.3.1 Technology items (e.g. laptops, portable electronic devices, printers, software, etc.) shall be reviewed in advance by Information Services.

4.19.10.3.2 Facility items (e.g., furniture, appliances, etc.) shall be reviewed in advance by Facilities Management.

4.19.10.3.3 Vehicles shall be reviewed in advance by Transportation.

4.19.10.4 Pursuant to Policy #211, Service Areas may acquire surplus or donated goods valued up to \$500 and considered to be general operating goods for the nature of work performed by that Service Area.

~~4.19.10.4.1~~ In cases where a good becomes available that has not been approved through an existing plan, exceeds the value of \$500 and is identified as needed, the item may be **reserved** for 14 days and submitted for consideration, consistent with the value thresholds in Appendix 6.D (operational/capital purchases).

What does "reserved" mean??? How? With or by whom?

~~4.19.10.4.2~~ The Service Area shall maintain and furnish the CAO with access to all agreements, records, and property inventor**ies** for all items related to this County donation policy.