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BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Michael R. Beach Adam Petersen
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MID-MICHIGAN DISTRICT HEALTH DEPARTMENT (MMDHD)
BOARD OF HEALTH
REGULAR MEETING

Wednesday, May 26, 2021
9:00 a.m.

Board of Health and staff are invited to participate remotely due to the highly contagious COVID-19 virus. To participate by video, access Zoom at the following link: <https://us02web.zoom.us/j/84666735394?pwd=TXpMSGErRnk1dncyb2hHeFBFditTQT09> and use **Meeting ID 846 6673 5394; Passcode 199616**. To participate by phone, call **1-312-626-6799**; then enter the Meeting ID.

AGENDA

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

Pledge of Allegiance

A. AGENDA NOTES, REVIEW, AND REVISIONS:

1.

B. CONSENT ITEMS:

1. Meeting Minutes

a. Michigan Association for Local Public Health (MALPH) Board of Directors Meeting held April 12, 2021 – **Included**.

b. Mid-Michigan District Board of Health (BOH) Regular Meeting held April 28, 2021– **Included**.

c.

2. Communications

a.

C. PUBLIC COMMENTS:

D. BRANCH OFFICE EMPLOYEES:

E. COMMITTEE REPORTS:

1. Finance Committee: George Bailey, Chair

- a. MMDHD Expenses for April 10 through May 7, 2021 – **Included.**
- b. MMDHD's Monthly Balance Sheet, Revenue and Expenditure Report for April 2021 – **Included.**
- c. Schedule Time For Special Finance Committee Meeting, June 9, 2021
- d. Contract Extension Agreement with My Community Dental Centers, Inc. (MCDC) – **Included.**
- e.

2. Personnel Committee: Dwight Washington, Chair

- a.

3. Program Committee: Michael Beach, Chair

4. Mid-Central Coordinating Committee: Chuck Murphy

F. MEDICAL DIRECTOR'S REPORT: Jennifer Morse, M.D., MPH, FAAFP – **Included.**

1. Vitamin and Herbal Supplements to Prevent Infectious Illnesses
- 2.

G. HEALTH OFFICER'S REPORT: Mark W. (Marcus) Cheatham, Ph.D.

1. COVID-19 Update
 - a.
2. Staff Survey on Remote Work – **Included.**
- 3.

H. OLD BUSINESS:

1. EH FY 20/21 Food Service Establishment Fees – **Included.**
- 2.

I. NEW BUSINESS:

1. Bathing Beach Water Sampling Grant
2. Health Officer Recruitment/Transition Process – **Included.**

3.

4. Emerging Issues

a. PFAS, Residential Sampling at Capital Region International Airport, DeWitt Township

b.

5.

J. LEGISLATIVE ACTION:

1.

K. INFORMATIONAL ITEMS: – **Included.**

1. Mid-Michigan District BOH Action Items, April 2021

2. MMDHD Staffing Report

3.

L. RELATED NEWS ARTICLES AND LINKS: – <https://www.mmdhd.org/2021-board-of-health/>

1. B.1.617 COVID-19 Variant Found In Clinton County, *Lansing State Journal*, May 1, 2021

2. COVID-19 Appointments Advertisement, *Daily News*, May 1, 2021

3. Multiple COVID-19 Variants Showing Up Around The Area, *Daily News*, May 4, 2021

4. Breckenridge HS Athletes Part Of Two K-12 Outbreaks, *Morning Sun*, May 6, 2021

5. Local Health Department Shortens Quarantine, *Daily News*, May 6, 2021

6. CC-C School Board Debates Quarantine And Contact Tracing Rules, *Daily News*, May 12, 2021

7. Youths 12 And Older Can Now Receive COVID-19 Vaccine From Pfizer Locally, *Daily News*, May 14, 2021

8.

M. AGENCY NEWSLETTERS: None.

BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Michael R. Beach Adam Petersen
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Board of Health (BOH) Synopsis of Actions Needed

May 26, 2021 Regular Meeting

Item A. 1.	AGENDA NOTES, REVIEW, AND REVISIONS
Motion to approve the Agenda as presented.	
Item B. 1. & 2.	CONSENT ITEMS (MEETING MINUTES & COMMUNICATIONS)
Motion to accept Meeting Minutes B. 1. a. and b. and place on file.	
Item E. 1. a.	EXPENSES FOR APRIL 10 THROUGH MAY 7, 2021
Motion to approve payment of the Mid-Michigan District Health Department's Expenses for April 10, through May 7, 2021, totaling \$392,536.37.	
Item E. 1. b.	BALANCE SHEET, REVENUE AND EXPENDITURE REPORT FOR APRIL 2021
Motion to approve and place the Balance Sheet, Revenue and Expenditure Report for April 2021 on file.	
Item E. 1. c.	SCHEDULE TIME FOR SPECIAL FINANCE COMMITTEE MEETING, JUNE 9, 2021
Motion to schedule an online Special Finance Committee Meeting for June 9, 2021 at ____ .m.	
Item E. 1. e.	CONTRACT EXTENSION AGREEMENT WITH MY COMMUNITY DENTAL CENTERS, INC. (MCDC)
Motion to approve the Contract Extension Agreement with MCDC and authorize the Board Chairperson to sign it.	
Item F. 1.	MEDICAL DIRECTOR'S REPORT-VITAMIN AND HERBAL SUPPLEMENTS TO PREVENT INFECTIOUS ILLNESSES
Motion to adopt the BOH Monthly Healthy Living Recommendations for June as proposed; accept and place the Medical Director's Report on file.	
Item H. 1.	EH FY 20/21 FOOD SERVICE ESTABLISHMENT FEES
<p>Motion to authorized M. Selby to invoice Clinton, Gratiot, and Montcalm Counties for the loss of FY 20/21 food service establishment licensing fees if Senate Bills 353 and 354 are approved.</p> <p>Motion to reimburse food service establishments for the FY 20/21 licensing fees, using county American Rescue Plan funding, if Senate Bills 353 and 354 are approved.</p>	
Item I. 2.	HEALTH OFFICER RECRUITMENT/TRANSITION PROCESS
Motion to approve the proposed hiring committee and timeline to recruit a new health officer.	

**MICHIGAN ASSOCIATION FOR LOCAL PUBLIC HEALTH
(MALPH)
Board of Directors
Meeting Minutes
April 12, 2021**

I. Call to Order

The meeting was called to order at 9:02am by Nick Derusha, President.

II. Roll Call

A quorum was present.

Jurisdictions Represented: Allegan [Angelique Joynes], Barry-Eaton [Colette Scrimger], Bay [Joel Strasz], Benzie-Leelanau [Lisa Peacock], Berrien [Nicole Britten], Branch-Hillsdale-St. Joseph [Rebecca Burns], Calhoun [Eric Pessell], Central Michigan [Steve Hall], Chippewa [Karen Senkus], Delta-Menominee [Mike Snyder], District 2 [Denise Bryan], District 10 [Kevin Hughes], District 4 [Denise Bryan], Genesee [Kayleigh Blaney], Grand Traverse [Wendy Hirschenberger], Ionia [Ken Bowen], Jackson [Debra Kubitskey], Kalamazoo [Jim Rutherford], Kent [Adam London], Lapeer [Kathy Haskins], Lenawee [Martha Hall], Livingston [Dianne McCormick], Luce-Mackinaw-Alger-Schoolcraft [Nick Derusha], Macomb [Andrew Cox], Marquette [Jerry Messana], Midland [Fred Yanoski], Mid-Michigan [Marcus Cheatham, Dwight Washington], Monroe [Kim Comerzan], Northwest Michigan [Lisa Peacock], Oakland [Leigh-Anne Stafford], Ottawa [Lisa Stefanovsky], Saginaw [Christina Harrington], Shiawassee [Larry Johnson], St. Clair [Annette Mercatante], VanBuren/Cass [Jeff Elliott, Danielle Persky]

Others Present: Administrative Officers Forum, [Eric Thelen], Environmental Health Forum, [Andrew Cox], Nurse Administrators Forum, [Lisa Hahn], Physician's Forum, [Annette Mercatante], MAC, [Dwight Washington], MDARD, [Sean Dunleavy], MDHHS, [Molly Cotant, Rachel Long, Alex Rafalski], PAA, [Becky Bechler],

Staff: Norm Hess, Jodie Shaver

III. Approve Agenda

Motion by M. Cheatham, support by J. Messana to approve the agenda. Motion carried.

IV. Approve Minutes of March 8, 2021 Meeting

Motion by D. McCormick, support by D. Bryan to accept the March 8, 2021 meeting minutes. Motion carried.

V. Public Affairs Associates Report

B. Bechler reported legislature back and will be focusing on budget process. N. Hess and B. Bechler have met with both chairs and discussed increasing reimbursements to LPH. Continued pressure on legislature on supplementals. Significant reorganization of

manufactured housing. Budget should be done by the end of June. House republicans had fifteen bill healthcare package, all have moved to Senate.

VI. Partner Updates

(EGLE) will be submitting a written report later this week.

S. Dunleavy (MDARD) did not have an update this month.

M. Cotant (MDHHS) did not have update this month. MALPH asked M. Cotant for consistency and clarification in 10-day vs. 14-day quarantine guidance. A request was made for LPH to be included and receive information more-timely as MDHHS develops new guidance and recommendations.

VII. MiCHEM Project Presentation

R. Long and A. Rafalski presented on the MiCHEM Project. They will be launching their recruitment soon and outlined project design, including interactions with residents within LHD jurisdictions.

VIII. Officer Updates

N. Derusha- President sent a written president's report prior to the meeting. Please see report in packet. Accepting volunteers for the nominations committee for Executive Committee for FY2022. Please let N. Derusha know if you are interested.

C. Scrimger- Secretary / Treasurer reported February 2021 financials were in the BOD packet. A motion by C. Scrimger, support by R. Burns to approve the February 2021 financials. Motion carried. N. Hess and C. Scrimger will be presenting revised budget for remainder of FY21 at May's BOD meeting.

J. Shaver reported the MALPH BOD meeting on October 26, 2021 will be from 11am-1pm on the pre-conference day of the Michigan Premier Public Health Conference (MPPHC). The overnight room reservation link is on the MALPH website. Please make your arrangements soon. The MDARD communications trainings kick off this week with the Executive Committee's two-part meeting to develop MALPH's key messages. The trainings for all LDH staff are on April 22, 29, and May 7th. Registration is open. M. Miller will be setting up a third COVID Communication Hot Wash event in May through the CJS grant. In addition, an RFP will be submitted to the MPPHC for presenting the findings. The County Health Rankings were released on March 31st. MALPH will be applying for grant dollars again this year and would welcome ideas on presenting the County Health Rankings to all partners.

N. Hess introduced D. Kubitskey as the acting health officer in Jackson County. The survey on LHD safety and wellness through MSU has been put on hold for the near future. N. Hess continues to meet with various legislatures regarding the MDHHS budget, focused

on short-term and long-term funding needs. N. Hess reviewed the American Rescue Plan and funding for LPH. Participated in stakeholder meeting with state office budget. More information to be coming this week. A formal process will be set up for proposals, with a 1-2 week turnaround.

IX. Forum Reports

Admin Forum- E. Thelen reported the Administrator's Forum continues to focus on COVID-19 grant reporting and costs. Also having conversations regarding American Rescue Plan and what that means for LHDs and what expenditures are allowed.

MALEHA- A. Cox reported MALEHA's main focus continues to be COVID-19 support. Also, dealing with outstanding issues of interpretation of orders as it applies specifically to outdoor waterparks. MALEHA members continue to prepare for fair and festival season.

NAF- L. Hahn reported NAF member's main focus continues to be on COVID-19 activity. Reported findings from last fiscal year's violence in the workplace survey. For full report: [2020 Survey of Michigan Nurses](#). The Maternal Infant Health Summit will be virtual this year and you can find this on the MALPH website calendar.

MAPPP- A. Mercatante reported MAPPP has been discussing the 10-day vs. 14-day quarantine. There is a MAPPP meeting scheduled with Dr. Khaldun this week to discuss best practices. Case investigation with variants also discussed.

X. Public Comments / Announcements / Requests for Future Agenda Items

Discussion occurred around youth sports testing requirement and enforcement. Questions regarding this are to be routed through MDHHS.

XI. Adjournment

Meeting adjourned at 10:07am



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BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Michael R. Beach Adam Petersen
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Mid-Michigan District Health Department
 BOARD OF HEALTH
 REGULAR MEETING

April 28, 2021
 9:00 a.m.

Meeting also held virtually through Zoom Video Communications, Inc. due to COVID-19.

MINUTES

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

Members Present: Bruce DeLong (Saint Johns, Michigan) (*left the meeting at 10:17 a.m.*), Dwight Washington (Bath Township, Michigan), Chuck Murphy (Alma, Michigan), George Bailey (Ithaca, Michigan), Adam Petersen, Vice Chairperson (Greenville, Michigan), and Michael Beach (Carson City, Michigan)

Members Absent: None

Staff Present: Mark W. (Marcus) Cheatham, Ph.D., Health Officer (Stanton, Michigan); Cynthia M. Partlo, Board Secretary (Lansing, Michigan); Jennifer E. Morse, MD, MPH, FAAFP, Medical Director (Clare, Michigan);

Staff Absent: Melissa Selby, Director of Administrative Services; and Liz Braddock, Director of Environmental Health (EH)

Guests: Elisabeth Waldon, News Editor, Daily News; Ali Barnes, Yeo & Yeo

Bruce DeLong, Chairperson called the Regular Meeting of the Mid-Michigan District Board of Health (BOH) to order at 9:00 a.m. on Wednesday, April 28, 2021, online through Zoom Video Communications, Inc. due to the highly-contagious COVID-19 and to assure compliance with federal, state, and local health guidance and requirements.

The Pledge of Allegiance was led by A. Petersen.

A. AGENDA NOTES, REVIEW, AND REVISIONS:

M. Cheatham requested that item E. 1. d., FY 19/20 Audited Financial Statements be moved to the first order of business.

Motion made by G. Bailey and seconded by M. Beach to move item E. 1. d., FY 19/20 Audited Financial Statements to the first order of business and approve the Agenda as amended. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

- E. 1. a. FY 19/20 Audited Financial Statements, *Ali Barnes, Yeo & Yeo* (Note: One presentation will be given at the Regular Board Meeting)

Ali Barnes, CPA from Yeo & Yeo reviewed the FY 19/20 Audited Financial Statements, including the Single Audit Report. She reviewed portions of the Financial Statements noting that the opinion given to MMDHD was an unmodified, clean audit opinion and there were no Federal findings in the WIC Program reported in the Single Audit Report.

Motion made by G. Bailey and seconded by A. Petersen to accept the FY 19/20 Audited Financial Statements as proposed and place them on file. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

B. CONSENT ITEMS:

1. Meeting Minutes

- a. Michigan Association for Local Public Health (MALPH) Board of Directors Meeting held March 8, 2021
- b. Mid-Michigan District Board of Health (BOH) Regular Meeting held March 24, 2021

Motion made by C. Murphy and seconded by D. Washington to accept the Meeting Minutes B. 1. a. and b. and place on file. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

2. Communications – None

C. PUBLIC COMMENTS: – None

D. BRANCH OFFICE EMPLOYEES: – None

E. COMMITTEE REPORTS:

1. Finance Committee – George Bailey, Chairperson

a. MMDHD’s Expenses for March 13 through April 9, 2021

Motion made by G. Bailey and seconded by M. Beach to approve payment of the MMDHD’s expenses for March 13 through April 9, 2021 in the amount of \$519,621.18. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

b. MMDHD’s Monthly Balance Sheet, Revenue and Expenditure Report for March 2021

Motion made by G. Bailey and seconded by D. Washington to approve and place the Balance Sheet, Revenue and Expenditure Report for March 2021 on file. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

- d. FY 21/22 Budget Development Schedule

Motion made by G. Bailey and seconded by A. Petersen to approve the FY 21/22 Budget Development Schedule as proposed. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

- e. Purchase Vision Screeners

Motion made by G. Bailey and seconded by M. Beach to approve the purchase of three Plusoptix vision screeners as proposed at a cost of \$5,995 per unit. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

- f. Employee Salary Survey

M. Cheatham explained that the issue was brought before the BOH in 2018 stating that he promised the Michigan Nurses Association that the agency would conduct an employee salary survey by 2020 to attempt to resolve questions about salaries and benefits within the department affecting all employees. With the COVID-19 pandemic, M. Cheatham said that the salary survey has not been completed. The BOH supported the staff's desire to not do it now, but asked M.

Cheatham to report back in three months with options for them about how to get it done as the agency committed to do.

Motion made by G. Bailey and seconded by A. Petersen to request M. Cheatham to present options to the BOH in three months about how the agency intends to move forward with an employee salary survey. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried 6-0.

g. FY 20/21 Food Service Establishment Fees

L. Braddock joined the meeting briefly at 9:40 a.m. M. Cheatham mention that there was a typo in the last paragraph of the first page: MMDHD has collected over \$2,609,739 should have been *over \$260,000*. He indicated that the State legislature proposed to amend the Food Law through passage of Senate Bills 353 and 354. He said that the amendment adds section 7 that would suspend the collection of all food industry fees for one year. This means a loss of revenue for the MMDHD of \$315,000, which is approximately one-half of the Food Program revenue resulting in a reduction in staff of three FTEs. He indicated that the loss in revenue would be spread throughout the agency not just in the EH Division. He expressed concern of an increase in foodborne illness if this amendment were to be passed. He explained that in the Intergovernmental Agreement, the counties committed to maintaining funding levels in accordance with the minimum program requirements; therefore, help from the counties would be needed to solve the shortfall in funding. M. Cheatham said that MALPH has tried to talk with the author of the bill with no success. M. Cheatham indicated that he intended to talk with Senator Outman to request that he explain our position to his colleagues. Additionally, M. Cheatham said that alternative funding should be explored including using COVID relief funding to help local businesses. Furthermore, he said that the agency would use the Intergovernmental Agreement to calculate each county's use of the Food Program to determine their portion of support for local businesses in order to preserve the agency's capacity to protect the public. C. Murphy recommended using stimulus funding as proposed. L. Braddock left the meeting at 9:47 a.m.

A. Petersen said that the Audit report showed that MMDHD has unrestricted fund balance of over \$400,000 and that we needed to stop dinging restaurants to save positions. M. Cheatham said the agency can do the many services it does because of fund balance and by using most of that balance would place the agency in a very tight financial position jeopardizing its ability to operate. M. Cheatham explained how the COVID funding worked in counties with a district health department stating that it was not the agency's intent to request that funding from the counties. M. Cheatham clarified that the agency was looking at a \$300,000 loss in revenue and was looking at the counties to help make up that loss through the COVID funding that the counties received. B. DeLong suggested when M. Cheatham meets with County Administrators soon to discuss the FY 21/22 Budget that he also discusses this topic with them. M. Cheatham requested that

Commissioners provide their Administrators with advance notice of the issue, so they are not surprised. B. DeLong replied that when each county contributes a portion, the hit to the agency would not be as deep. C. Murphy suggested that Gratiot Co. could provide \$100,000 of its COVID funding to the health department. G. Bailey recommended keeping the topic on the Agenda monthly until resolved.

Motion made by G. Bailey and seconded by M. Beach to table the topic to each Regular BOH meeting until resolved. B. DeLong asked C. Partlo to call the roll:

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong	✓	

Motion carried.

2. Personnel Committee – Dwight Washington, Chairperson – No Report.
3. Program Committee – Michael Beach, Chairperson – No Report.
4. Mid-Central Coordinating Committee – Chuck Murphy – No Report.

F. MEDICAL DIRECTOR’S REPORT: Jennifer E. Morse, MD, MPH, FAAFP

1. Monitoring For Adverse Events After COVID-19 Vaccine

Dr. Morse reported about adverse events after COVID-19 vaccination, including the history of vaccines and monitoring for adverse events stating that vaccines over time have really reduced the number of illnesses and prevented 2 to 3 million deaths each year. She reported that unfortunately, adverse events are commonly caused by vaccine administration errors. The second most common are anxiety-related injuries from fainting during vaccination. She also said that very rarely people have serious allergic reactions. Occasionally, there have been production-related adverse events due to manufacturing, and also coincidental events that are blamed on the vaccine. Dr. Morse also reviewed historic vaccine safety issues, noting that these events have been learning experiences. She explained the events that led to the creation of the National Childhood Vaccine Injury Act, stating that the intent was to protect vaccine supplies by requiring informed consent before vaccination and a Vaccine Information Statement with certain vaccines, as well as reporting adverse events through the Vaccine Adverse Event Reporting System (VAERS). She also explained the V-SAFE app that was developed by the CDC that uses text messages with web surveys to screen for side effects after vaccination.

Dr. Morse’s BOH Monthly Healthy Living Recommendations for May are:

- Given the ease of global travel and dropping vaccination rates, the risk from vaccine-preventable diseases is higher than ever. Vaccines have an extremely small risk of severe side effects or serious risks and the benefits outweigh the risks.

- The national and global vaccine safety monitoring systems have proven themselves to be very effective at detecting potential adverse events following vaccination.

Motion made by G. Bailey and seconded by C. Murphy to approve the Medical Director’s Report and recommendations for May as presented and place them on file.

B. DeLong and D. Washington were dropped from the online meeting at 10:17 a.m.; therefore, A. Petersen as Vice Chairperson took over the meeting. D. Washington was able to rejoin the meeting.

Board Member	Yes	No
G. Bailey	✓	
M. Beach	✓	
C. Murphy	✓	
A. Petersen	✓	
D. Washington	✓	
B. DeLong		

Motion carried 5-0.

G. HEALTH OFFICER’S REPORT:

1. MMDHD COVID-19 Update

M. Cheatham provided an update regarding COVID-19 stating that cases have begun to decline.

a. COVID-19 Vaccinations

M. Cheatham said that 111,000 doses have been delivered to the district and vaccine doses received by residents within the district were 112,000. He reported that the wall of vaccine hesitancy has been reached as clinic appointments were going unfilled at the department, hospitals, and pharmacies. He stated that data showed that every census tract in our district has more than 30% of residents vaccinated, southern Clinton County has well over 50% of its residents vaccinated, eastern parts of DeWitt have more than 70% of their residents vaccinated, and the northern part of DeWitt has over 80% of its residents vaccinated and has reached herd immunity. M. Cheatham explained that the agency has been working with Spectrum Health to vaccinate more Montcalm County residents; and they have declined another shipment of Pfizer due to unfilled appointments. M. Cheatham added that he was working with the Montcalm Care Network and emergency services to accept funding to conduct mini clinics with buses to administer the Johnson and Johnson vaccine in the smaller, rural towns. He reported that the rest of the district would probably not reach herd immunity through vaccination alone. He discussed the unknown options for where the district would be with protection from COVID-19 during the fall, especially regarding children and sports.

2. FY 20/21 Quarterly Service Report (QSR), Second Quarter (January 1, 2021 through March 31, 2021)

M. Cheatham provided a review of the QSR noting that incredibly the agency was able to continue the Women, Infants, and Children’s Program remotely and through video chats at high levels. S. Doak commented that the current practice of remote and video chat appointments has been extended through August 2021. Additionally, S. Doak said that Family Planning appointments have been extended to allow time to disinfect between appointments. She said that some clients chose not to

seek care at this time due to the risks of COVID-19. Regarding the Immunizations Program, S. Doak said that data showed that COVID-19 vaccinations have been very high; however, demand for routine immunizations was way down. M. Cheatham commented that due to S. Doak's decision to continue the agency's routine immunizations when other health departments suspended their programs, MMDHD has done better than other health departments with providing childhood immunizations. S. Doak said that the agency got back into the office in June 2020 and set aside time to provide childhood immunizations and influenza vaccine in addition to working mass vaccination COVID-19 clinics.

For EH, M. Cheatham reported that food inspections had stopped in the third quarter of last year; however, have rebounded. In the well and septic programs, services performed were higher than last year. He also reported that nuisance complaints peaked during the pandemic and were added to routine nuisance complaints.

H. OLD BUSINESS: – None

I. NEW BUSINESS:

1. Emerging Issues – None

J. LEGISLATIVE ACTION: None

K. INFORMATIONAL ITEMS:

1. Mid-Michigan District BOH Action Items, March 2021

2. MMDHD Staffing Report

L. RELATED NEWS ARTICLES AND LINKS: <https://www.mmdhd.org/2021-board-of-health/>

1. [As Virus Cases Plateau Nationally, Michigan's Rapid Surge Worries Experts](#), *The New York Times*, March 24, 2021

2. All Adults Eligible for COVID Vaccine Starting April 5, *Gratiot County Herald*, March 24, 2021

3. Experts See Multiple Reasons COVID-19 Is Surging, *Lansing State Journal*, March 28, 2021

4. [Michigan Prisons and COVID-19 Cases Over Time](#), *Michigan Radio, NPR*, March 28, 2021

5. Health Officials Urge Public To Not Wait To Register For Vaccine, *Lansing State Journal*, March 28, 2021

6. Spectrum Health, Health Department Team Up On COVID-19 Vaccine Clinic, *Lakeview Area News*, April 1, 2021

7. How Many Vaccines Get Wasted?, *Lansing State Journal*, April 1, 2021

8. Ag Workers Served At Belding Vaccine Clinic, *Daily News*, April 2, 2021

9. COVID-19 Update – Vaccine Opportunities Expand, But Cases Surge, *Gratiot County Herald*, April 7, 2021

10. Salmonella Risk From Spring Chicks, *Daily News*, April 8, 2021

11. Local COVID-19 Cases On The Rise Yet Again, *Daily News*, April 8, 2021

12. Health Dept. Pauses Use Of Johnson & Johnson Vaccine, *Daily News*, April 15, 2021

13. Get Help Scheduling COVID-19 Vaccination In Greater Lansing, *Lansing State Journal*, April 18, 2021

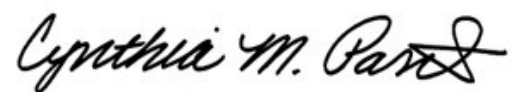
14. Those Exposed To COVID-19 Still Must Quarantine 2 Weeks, *Lansing State Journal*, April 18, 2021

15. Local Healthcare Experts Weigh In On Johnson & Johnson Vaccine Pause, *Gratiot County Herald*, April 21, 2021

M. AGENCY NEWSLETTERS: None

There being no further business to come before the Board, the meeting was adjourned at 10:29 a.m.

Respectfully Submitted,



Cynthia M. Partlo, Board Secretary
For Bruce DeLong, Chairperson
Mid-Michigan District Board of Health

DRAFT

**MONTHLY EXPENSES FOR
April 10, 2021 - May 7, 2021**

<i>EV 1950</i>	<i>4/23/2021</i>	\$	<i>121,265.56</i>
<i>EV 1951</i>	<i>5/7/2021</i>	\$	<u><i>271,270.81</i></u>
TOTAL		\$	392,536.37

EV # 1950

4/23/2021

Payables

Check #	106668								
	to	Acumatica Checks			\$				50,350.59
	106693								

Payroll

AFLAC Employee Deduction	Apr-21	\$	1,050.40
Ameriprise NBS		\$	85.00
MERS 457		\$	1,420.00
MERS Defined Benefit - Employee		\$	4,537.34
Nationwide		\$	1,850.00
EFT Payroll Tax			
Federal		\$	38,547.72
State		\$	5,960.07
MERS Defined Benefit - Employer	Mar-21	\$	-
Direct Deposit Payroll		\$	118,199.08
Direct Deposit HSA		\$	9,454.94

Fees

TCF Bank Interest	Mar-21	\$	(1.28)
TCF e-Banking fee	Apr-21	\$	118.86
BCBS Health Insurance	REVERSE March & April 2021	\$	(90,001.48)
BCN Health Insurance	REVERSE March & April 2021	\$	(20,305.68)

TOTAL

\$ 121,265.56

AP Payment Register

Account	Description									
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106668	Closed	4/23/2021	ALMA01	ALMA COLLEGE	0.00	5,100.00			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		0130283	PRESCRIPTION FOR HEALTH EXERCISE PROGRAM	5,100.00	USD	0.00	5,100.00			
						Document Total:	5,100.00			
						Payment Method Total:	5,100.00			
						Cash Account Total:	5,100.00			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106669	Closed	4/23/2021	BRYN01	BYRNES BRAD	0.00	191.00			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		013100	REFUND PERMIT FEE	191.00	USD	0.00	191.00			
						Document Total:	191.00			
						Payment Method Total:	191.00			
						Cash Account Total:	191.00			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106670	Closed	4/23/2021	CAP01	CAPITAL AREA UNITED WAY	0.00	30.84			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		APRIL 2021	APRIL EMPLOYEE DONATION	30.84	USD	0.00	30.84			
						Document Total:	30.84			
						Payment Method Total:	30.84			
						Cash Account Total:	30.84			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106671	Closed	4/23/2021	CDWG01	CDW GOVERNMENT, INC.	0.00	13,907.03			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		B102130	SURFACE PRO/CASE, SUPERMICRO, LVO E15	3,738.92	USD	0.00	3,738.92			
BILL		B247558	12 KINGSTON 32GB, 4 SUPERMICRO, 8 MS SLD+ WINSVRSTDCORE	3,200.76	USD	0.00	3,200.76			
BILL		B2901612	2 INTEL XEON SILVER PROCESSOR	1,809.84	USD	0.00	1,809.84			
BILL		B349474	SUPERMICRO SAS3 RAID MESSANINE CARD	482.09	USD	0.00	482.09			
BILL		B408199	SUPERMICRO SUPERSRV 1U XEON LGA	1,664.02	USD	0.00	1,664.02			
BILL		9257300	4 SUPERMICRO 2.5 HDD TRAY	71.80	USD	0.00	71.80			
BILL		9451370	INTEL XEON SILVER PROCESSOR	933.65	USD	0.00	933.65			
BILL		9875284	MICRON 2300 256GB NVME SED-EDRIVE	65.27	USD	0.00	65.27			
BILL		B465504	2 HP OFFICEJET 200 MOBILE PRINTER, 2 TRIPP 6FT USB 3.0 CABLE	585.58	USD	0.00	585.58			
BILL		B459159	MS SURFACE PRO7 16GB	1,355.10	USD	0.00	1,355.10			
						Document Total:	13,907.03			
						Payment Method Total:	13,907.03			
						Cash Account Total:	13,907.03			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106672	Closed	4/23/2021	CLIN01	CLINTON COUNTY ADMINISTRATION/ACCOUNTING	0.00	1,966.67			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		AC-2021-011	MAY RENT	1,966.67	USD	0.00	1,966.67			
						Document Total:	1,966.67			
						Payment Method Total:	1,966.67			
						Cash Account Total:	1,966.67			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106673	Closed	4/23/2021	COVE01	COVENANT MEDICAL CENTER	0.00	114.52			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		16280297	LABS	50.26	USD	0.00	50.26			
BILL		16280266	LABS	21.42	USD	0.00	21.42			
BILL		16280281	LABS	42.84	USD	0.00	42.84			
						Document Total:	114.52			
						Payment Method Total:	114.52			
						Cash Account Total:	114.52			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106674	Closed	4/23/2021	DELT01	DELTA DENTAL OF MICHIGAN	0.00	4,659.32			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		RIS0003419816	MAY DENTAL INSURANCE	4,659.32	USD	0.00	4,659.32			
						Document Total:	4,659.32			
						Payment Method Total:	4,659.32			
						Cash Account Total:	4,659.32			
CASH AP CASH ACCOUNT FOR AP										
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount			
CHECK	106675	Closed	4/23/2021	HOSP03	HOSPITAL NETWORK HEALTHCARE SERVICES	0.00	114.00			
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid			
BILL		72155	MEDICAL WASTE PICKUP-ST JOHNS	114.00	USD	0.00	114.00			
						Document Total:	114.00			
						Payment Method Total:	114.00			
						Cash Account Total:	114.00			

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106676	Closed	4/23/2021	INSP01	INSPIRATION STUDIO DESIGNS	0.00	1,762.50
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		2577	WEB DESIGN FOR CLINTON DRUG FREE	62.50	USD	0.00	62.50
BILL		2576	SOCIAL MEDIA & WEB UPDATES FOR FAMILY PLANNING	1,700.00	USD	0.00	1,700.00
						Document Total:	1,762.50
						Payment Method Total:	1,762.50
						Cash Account Total:	1,762.50

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106677	Closed	4/23/2021	KUSH01	KUSHION MARY	0.00	1,656.25
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		03182021	CJS-RESTART IMMS PROJECT 1/11-3/9/21	1,656.25	USD	0.00	1,656.25
						Document Total:	1,656.25
						Payment Method Total:	1,656.25
						Cash Account Total:	1,656.25

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106678	Closed	4/23/2021	LINC01	LINCOLN FINANCIAL GROUP	0.00	2,952.85
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		4235700726	MAY LIFE, LTD, AD&D	2,952.85	USD	0.00	2,952.85
						Document Total:	2,952.85
						Payment Method Total:	2,952.85
						Cash Account Total:	2,952.85

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106679	Closed	4/23/2021	MAYA01	MAYATECH CORPORATION	0.00	5,000.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1828	SOCIAL MEDIA TECH ASSISTANCE/TRAINING	5,000.00	USD	0.00	5,000.00
						Document Total:	5,000.00
						Payment Method Total:	5,000.00
						Cash Account Total:	5,000.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106680	Closed	4/23/2021	MICH11	MICHIGAN NURSES ASSOCIATION	0.00	706.20
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		APRIL 2021	DUES	706.20	USD	0.00	706.20
						Document Total:	706.20
						Payment Method Total:	706.20
						Cash Account Total:	706.20

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106681	Closed	4/23/2021	ODYS01	ODYSSEY SOFTWARE	0.00	750.50
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		I0016904	FEBRUARY KRONOS/PER EMPLOYEE	750.50	USD	0.00	750.50
						Document Total:	750.50
						Payment Method Total:	750.50
						Cash Account Total:	750.50

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106682	Closed	4/23/2021	PLEA01	PLEASANT GRAPHICS INC	0.00	241.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		41316	1,000 AP CHECKS	241.00	USD	0.00	241.00
						Document Total:	241.00
						Payment Method Total:	241.00
						Cash Account Total:	241.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106683	Closed	4/23/2021	QUIL01	QUILL CORPORATION	0.00	87.97
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		15380992	ANTIMICROB FILE PKT 3 1/2 LTR	40.98	USD	0.00	40.98
BILL		15364760	EXPANDED FILE JACKETS/LETTER	46.99	USD	0.00	46.99
						Document Total:	87.97
						Payment Method Total:	87.97
						Cash Account Total:	87.97

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106684	Closed	4/23/2021	RSNO01	R&S NORTHEAST LLC	0.00	539.49
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		275125	PLAN B, SPRINTEC TABS	539.04	USD	0.00	539.04
BILL		274978	NUVARING	0.45	USD	0.00	0.45
						Document Total:	539.49
						Payment Method Total:	539.49
						Cash Account Total:	539.49

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106685	Closed	4/23/2021	RHCC01	RHC CONSULTING	0.00	155.87
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		133	WINN TELECOM 4/2020-12/2020	155.87	USD	0.00	155.87
						Document Total:	155.87
						Payment Method Total:	155.87
						Cash Account Total:	155.87

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106686	Closed	4/23/2021	RICO01	RICOH USA INC	0.00	1,936.17
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		5061710674	MARCH COPY FEES	1,936.17	USD	0.00	1,936.17
						Document Total:	1,936.17
						Payment Method Total:	1,936.17
						Cash Account Total:	1,936.17

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106687	Closed	4/23/2021	STAP01	STAPLES	0.00	462.99
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		3471918233	EXPANDING FOLDERS	44.99	USD	0.00	44.99
BILL		3470716648	10 REAMS PINK PAPER	40.30	USD	0.00	40.30
BILL		3473029803	LABELS, CASE PINK PAPER, TRI-COLOR INK	274.41	USD	0.00	274.41
BILL		3472266200	4 DOZ NOTE PADS	32.64	USD	0.00	32.64
BILL		3473297243	AA & AAA BATTERIES, HP BLACK INK	70.65	USD	0.00	70.65
						Document Total:	462.99
						Payment Method Total:	462.99
						Cash Account Total:	462.99

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106688	Closed	4/23/2021	STAT01	STATCOURIER	0.00	5,967.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		1019-2363	2Q2021 WATER LAB COURIER	5,967.00	USD	0.00	5,967.00
						Document Total:	5,967.00
						Payment Method Total:	5,967.00
						Cash Account Total:	5,967.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106689	Closed	4/23/2021	STAT04	STATE OF MICHIGAN-LAB	0.00	11.50
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		20210326-10	LABS	11.50	USD	0.00	11.50
						Document Total:	11.50
						Payment Method Total:	11.50
						Cash Account Total:	11.50

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106690	Closed	4/23/2021	TAB001	TABOR ANDREA	0.00	240.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		04082021	4/5-4/9 CONTRACTUAL	150.00	USD	0.00	150.00
BILL		04022021	3/29-3/31 CONTRACTUAL	90.00	USD	0.00	90.00
						Document Total:	240.00
						Payment Method Total:	240.00
						Cash Account Total:	240.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106691	Closed	4/23/2021	TEAM02	TEAMSTERS LOCAL 214	0.00	1,620.08
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		APRIL 2021	DUES	1,620.08	USD	0.00	1,620.08
						Document Total:	1,620.08
						Payment Method Total:	1,620.08
						Cash Account Total:	1,620.08

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106692	Closed	4/23/2021	UNIT02	UNITED WAY OF GRATIOT COUNTY	0.00	112.84
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		APRIL 2021	APRIL DONATIONS	112.84	USD	0.00	112.84
						Document Total:	112.84
						Payment Method Total:	112.84
						Cash Account Total:	112.84

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106693	Closed	4/23/2021	UNIT03	UNITED WAY OF MONTCALM COUNTY	0.00	64.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		APRIL 2021	APRIL DONATIONS	64.00	USD	0.00	64.00
						Document Total:	64.00
						Payment Method Total:	64.00
						Cash Account Total:	64.00

Doc. Type	Count	Amount Paid (USD)
Check	26	50,350.59
Prepayment	0	0.00
Refund	0	0.00
Void Check	0	0.00
Company Total:	26	50,350.59



EV # 1951

5/7/2021

Payables

Check #	106694		
	to	Acumatica Checks	\$ 46,862.81
	106711		

Payroll

AFLAC Employee Deduction	Apr-21	\$ 525.20
Ameriprise NBS		\$ 85.00
MERS 457		\$ 1,520.00
MERS Defined Benefit - Employee		\$ 4,697.92
Nationwide		\$ 1,850.00
EFT Payroll Tax		
Federal		\$ 40,353.38
State		\$ 6,171.80
MERS Defined Benefit - Employer	Apr-21	\$ 36,176.32
Direct Deposit Payroll		\$ 123,740.52
Direct Deposit HSA		\$ 9,287.86

TOTAL **\$ 271,270.81**

AP Payment Register

Account	Description						
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106694	Closed	5/7/2021	ACUI01	ACUITY	0.00	2,918.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		04192021	AUDIT FY20-21	2,918.00	USD	0.00	2,918.00
						Document Total:	2,918.00
						Payment Method Total:	2,918.00
						Cash Account Total:	2,918.00
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106695	Closed	5/7/2021	BROM01	BROMBERG & ASSOCIATES	0.00	92.56
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		16381	MARCH TRANSLA	92.56	USD	0.00	92.56
						Document Total:	92.56
						Payment Method Total:	92.56
						Cash Account Total:	92.56
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106696	Closed	5/7/2021	CENT02	CENTRAL MICHIGAN DIST HEALTH DEPARTMENT	0.00	4,738.54
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		MARCH 2021	MD MARCH 2021	4,738.54	USD	0.00	4,738.54
						Document Total:	4,738.54
						Payment Method Total:	4,738.54
						Cash Account Total:	4,738.54
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106697	Closed	5/7/2021	COHL01	COHL, STOKER & TOSKEY, P.C.	0.00	918.10
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		52251	FEBRUARY LEGA	918.10	USD	0.00	918.10
						Document Total:	918.10
						Payment Method Total:	918.10
						Cash Account Total:	918.10
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106698	Closed	5/7/2021	KROL01	KROL COMMUNICATIONS, INC.	0.00	6,000.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		04122021	5/3-8/21/21 ADVEF	6,000.00	USD	0.00	6,000.00
						Document Total:	6,000.00
						Payment Method Total:	6,000.00
						Cash Account Total:	6,000.00
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106699	Closed	5/7/2021	LAKE03	LAKESHORE REGIONAL ENTITY	0.00	100.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		12	2021 MEMBERSHI	100.00	USD	0.00	100.00
						Document Total:	100.00
						Payment Method Total:	100.00
						Cash Account Total:	100.00
CASH AP	CASH ACCOUNT FOR AP						
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106700	Closed	5/7/2021	MAYA01	MAYATECH CORPORATION	0.00	5,000.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		INV-0000001821	1Q2021 SOCIAL M	5,000.00	USD	0.00	5,000.00
						Document Total:	5,000.00
						Payment Method Total:	5,000.00
						Cash Account Total:	5,000.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106701	Closed	5/7/2021	MCKE01	MCKESSON MEDICAL	0.00	922.40
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		22734076	DISPOSABLE MA	128.63	USD	0.00	128.63
BILL		22192685	GLOVES & GOWN	793.77	USD	0.00	793.77
Document Total:							922.40
Payment Method Total:							922.40
Cash Account Total:							922.40

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106702	Closed	5/7/2021	MERC01	MERCK & CO INC	0.00	1,274.86
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		7015256432	VAQTA	1,274.86	USD	0.00	1,274.86
Document Total:							1,274.86
Payment Method Total:							1,274.86
Cash Account Total:							1,274.86

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106703	Closed	5/7/2021	MILL01	MILLER MARK	0.00	8,075.39
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		2Q2021	CJS-SENIOR PUB	8,075.39	USD	0.00	8,075.39
Document Total:							8,075.39
Payment Method Total:							8,075.39
Cash Account Total:							8,075.39

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106704	Closed	5/7/2021	ODYS01	ODYSSEY SOFTWARE	0.00	5,560.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		BILL020631	MARCH ACUMATI	5,560.00	USD	0.00	5,560.00
Document Total:							5,560.00
Payment Method Total:							5,560.00
Cash Account Total:							5,560.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106705	Closed	5/7/2021	POLA01	POLAND CARA	0.00	400.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		2	MAY 7 PRESENT	400.00	USD	0.00	400.00
Document Total:							400.00
Payment Method Total:							400.00
Cash Account Total:							400.00

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106706	Closed	5/7/2021	RSNO01	R&S NORTHEAST LLC	0.00	170.88
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		284253	3/24 INVOICE FOF	1.98	USD	0.00	1.98
BILL		285217	3/31 INVOICE FOF	168.90	USD	0.00	168.90
Document Total:							170.88
Payment Method Total:							170.88
Cash Account Total:							170.88

CASH AP CASH ACCOUNT FOR AP							
Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106707	Closed	5/7/2021	STAP01	STAPLES	0.00	1,021.46
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		3474237333	4/8/21 INVOICE; C	195.91	USD	0.00	195.91
BILL		3474176498	4/7/21 INVOICE; C	35.49	USD	0.00	35.49
BILL		3471851699	PENS, LABELS	39.21	USD	0.00	39.21
BILL		3473297232 3473297239	(2 INVOICES) RUE	68.06	USD	0.00	68.06
BILL		3472266199	RUBBERBANDS, I	6.62	USD	0.00	6.62
BILL		3474296875	POSTIT NOTES, E	157.00	USD	0.00	157.00
BILL		3472266198	POSTIT NOTES, F	67.24	USD	0.00	67.24
BILL		3472716917	PENS, BLACK TOI	451.93	USD	0.00	451.93
Document Total:							1,021.46
Payment Method Total:							1,021.46
Cash Account Total:							1,021.46

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106708	Closed	5/7/2021	STAT04	STATE OF MICHIGAN-LAB	0.00	11.50
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		20210326-19	LAB	11.50	USD	0.00	11.50
Document Total:							11.50
Payment Method Total:							11.50
Cash Account Total:							11.50

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106709	Closed	5/7/2021	TABO01	TABOR ANDREA	0.00	160.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		04162021	4/12-4/16 CONTRA	100.00	USD	0.00	100.00
BILL		04232021	4/19-4/23 CONTRA	60.00	USD	0.00	60.00
Document Total:							160.00
Payment Method Total:							160.00
Cash Account Total:							160.00

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106710	Closed	5/7/2021	VERI01	VERIZON	0.00	4,449.12
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		9878368706	4/24-5/23 CELL PH	4,449.12	USD	0.00	4,449.12
Document Total:							4,449.12
Payment Method Total:							4,449.12
Cash Account Total:							4,449.12

CASH AP CASH ACCOUNT FOR AP

Doc. Type	Payment Ref.	Status	Date	Vendor	Vendor Name	Doc. Balance	Orig. Doc. Amount
CHECK	106711	Closed	5/7/2021	YEOY01	YEO & YEO PC CPA	0.00	5,050.00
Doc. Type	Branch	Vendor Ref.	Description	Original Amount	Currency	Discount Taken	Amount Paid
BILL		534407	FY20 AUDIT FINAL	5,050.00	USD	0.00	5,050.00
Document Total:							5,050.00
Payment Method Total:							5,050.00
Cash Account Total:							5,050.00

Doc. Type	Count	Amount Paid (USD)
Check	18	46,862.81
Prepayment	0	0.00
Refund	0	0.00
Void Check	0	0.00
Company Total:	18	46,862.81

Mid-Michigan District Health Department

APRIL

58%

FY 2021

AP: 7

Revenue					
Account	Budget	Current Month	Year-to-Date	Budget Balance	YTD% of Budget
1 Onsite Sewage	185,000.00	34,569.00	103,779.50	81,220.50	56%
2 Groundwater Quality	175,000.00	33,330.00	101,816.00	73,184.00	58%
3 Food Service	315,000.00	5,880.43	266,620.27	48,379.73	85%
4 Body Art Fees	1,500.00	0.00	4,627.00	-3,127.00	308%
5 EH Misc Fees	45,000.00	2,806.34	29,777.81	15,222.19	66%
6 Vision Fees	13,000.00	528.40	4,672.00	8,328.00	36%
7 Hearing Fees	18,000.00	724.80	3,690.00	14,310.00	21%
8 Communicable Disease Fees	2,500.00	0.00	200.00	2,300.00	8%
9 Immunization Fees	152,500.00	4,320.86	57,581.26	94,918.74	38%
10 Family Planning/STD Fees	142,385.00	9,297.45	38,369.62	104,015.38	27%
11 Breast Cancer Fees	5,000.00	33.17	565.55	4,434.45	11%
12 Lead Fees	15,000.00	0.00	0.00	15,000.00	0%
13 Varnish Fees	15,000.00	394.57	524.57	14,475.43	3%
14 Breastfeeding Fees	18,000.00	265.07	2,117.01	15,882.99	12%
15 Ched Miscellaneous Fees	4,200.00	0.00	0.00	4,200.00	0%
16 Miscellaneous Other Fees	100.00	0.00	-60.42	160.42	-60%
17 Deferred Revenues - Billing	0.00	0.00	0.00	0.00	0%
18 VFC/317 Vaccine Revenue	300,000.00	9,470.02	72,387.34	227,612.66	24%
19 MDHHS Grants	1,733,842.00	293,952.00	2,185,504.04	-451,662.04	126%
20 Essential Local Public Health Services	898,470.00	79,762.00	447,650.00	450,820.00	50%
21 MDHHS Fee For Service Revenue	70,000.00	0.00	10,680.00	59,320.00	15%
22 DEQ Grants	85,915.00	1,585.75	31,895.75	54,019.25	37%

23	Other Grants/Community Support	767,500.00	60,738.76	145,301.45	622,198.55	19%
24	Medicaid Outreach	103,838.00	60,346.00	95,692.00	8,146.00	92%
25	Medicaid Full Cost Reimbursement	230,000.00	0.00	85,359.76	144,640.24	37%
26	Interest	20,000.00	61.27	1,430.58	18,569.42	7%
27	Misc Revenue	0.00	0.00	0.00	0.00	0%
28	Donations	5,000.00	166.00	848.25	4,151.75	17%
29	Cash Over/Short	0.00	0.00	0.00	0.00	0%
30	Clinton Co - Appropriation	397,568.00	33,131.00	240,192.75	157,375.25	60%
31	Gratiot Co - Appropriation	287,263.00	23,938.50	167,570.00	119,693.00	58%
32	Montcalm Co - Appropriation	430,647.00	35,887.25	251,210.75	179,436.25	58%
33	Prior Year Adjustments	0.00	0.00	-4,000.14	4,000.14	0%
34	Space Occupancy	298,300.00	21,024.00	147,161.00	151,139.00	49%
35	Deferred Revenues/Fund Balance- Other	50,000.0	0.00	0.00	50,000.00	0%
TOTAL REVENUE:		6,785,528.00	712,212.64	4,493,163.70	2,292,364.30	66%
W/O SPACE & VFC		6,187,228.00	681,718.62	4,273,615.36	1,913,612.64	69%

Mid-Michigan District Health Department

APRIL

58%

FY 2021

AP: 7

Expenditure					
Account	Budget	Current Month	Year-to-Date	Budget Balance	YTD% of Budget
1 Board of Health Per Diem	6,000.00	35.00	405.00	5,595.00	7%
2 Salaries	3,641,415.00	367,866.66	2,471,954.58	1,169,460.42	68%
3 FICA	279,444.00	42,769.68	187,506.68	91,937.32	67%
4 Health Insurance	759,401.00	113,657.78	494,826.58	264,574.42	65%
5 Dental Insurance	49,305.00	7,083.72	31,060.83	18,244.17	63%
6 Retirement	464,969.00	64,687.10	298,935.56	166,033.44	64%
7 Work Comp	31,360.00	1,462.00	8,525.78	22,834.22	27%
8 Unemployment Comp	8,000.00	0.00	1,562.00	6,438.00	20%
9 Life Insurance	6,834.00	550.73	3,666.20	3,167.80	54%
10 Physicals/memberships	0.00	0.00	0.00	0.00	0%
11 Printed Materials	6,500.00	241.00	1,698.60	4,801.40	26%
12 Postage	18,100.00	1,644.30	11,235.00	6,865.00	62%
13 Office Supplies	55,650.00	6,933.57	38,888.82	16,761.18	70%
14 Computer/Printer Supplies	50,800.00	20,144.91	50,802.33	-2.33	100%
15 Medical Supplies	76,300.00	5,260.91	14,478.11	61,821.89	19%
16 CD Meds Biologics	77,000.00	0.00	43,143.11	33,856.89	56%
17 VFC Supplies	300,000.00	9,470.02	72,387.33	227,612.67	24%
18 Contractual Services	127,000.00	50,740.71	163,652.38	-36,652.38	129%
19 Legal Expenses	15,000.00	0.00	2,396.98	12,603.02	16%
20 Communications	59,250.00	5,654.12	59,602.16	-352.16	101%
21 Travel	159,300.00	7,339.02	45,775.24	113,524.76	29%
22 Advertising & Recruitment	19,000.00	9,000.00	19,515.10	-515.10	103%

23	Liability Insurance	32,000.00	2,997.00	17,982.00	14,018.00	56%
24	Equipment Maintenance/Lease	42,900.00	1,936.17	7,392.43	35,507.57	17%
25	Rent	8,500.00	1,966.67	14,684.66	-6,184.66	173%
26	Space Occupancy	298,300.00	21,024.00	146,525.00	151,775.00	49%
27	Training	32,100.00	0.00	3,195.00	28,905.00	10%
28	Memberships/Certifications/Subscriptions	23,450.00	100.00	19,918.31	3,531.69	85%
29	Tuition Reimbursement	0.00	0.00	0.00	0.00	0%
30	Laboratory	8,000.00	137.52	772.90	7,227.10	10%
31	Behavioral Risk Factor Survey	22,000.00	0.00	0.00	22,000.00	0%
32	Misc Other Expense	4,200.00	0.00	0.00	4,200.00	0%
33	Computer Support	91,700.00	6,000.00	25,883.68	65,816.32	28%
34	Service Charges/Credit Card Fees	11,750.00	602.38	4,687.19	7,062.81	40%
35	Equipment	0.00	0.00	10,825.00	-10,825.00	0%
36	BOH approved capital expenses	0.00	0.00	0.00	0.00	0%
TOTAL EXPENSES		6,785,528.00	749,304.97	4,273,884.54	2,511,643.46	63%
W/O SPACE & VFC		6,187,228.00	718,810.95	4,054,972.21	2,132,255.79	66%
Revenue Over Expenditures (Deficit)		0.00	-37,092.33	219,279.16	-219,279.16	0%
Revenue Over Expenditures (Deficit) without BOH approved capital expense		0.00	-37,092.33	219,279.16	-218,643.15	0%

Mid-Michigan District Health Department

User: MELISSA SELBY

Balance Sheet - Comparative

As of April 30, 2021

	2021	2020	Variance	%
Assets				
Cash & Cash Equivalents	3,817,361.45	3,020,798.69	796,562.76	20.87%
Account Receivable	50,919.49	117,796.79	(66,877.30)	-131.34%
Other Receivables	145,590.14	320,688.09	(175,097.95)	-120.27%
Prepaid Expenses	20,686.96	29,153.13	(8,466.17)	-40.93%
VFC Inventory	61,848.82	70,086.60	(8,237.78)	-13.32%
Total Assets	4,096,406.86	3,558,523.30	537,883.56	13.13%
Liabilities				
Employee Deductions	35,794.04	178.25	35,615.79	99.5%
Accounts Payable	38,793.62	(46,145.55)	84,939.17	218.95%
Due to Others	924,985.80	907,616.30	17,369.50	1.88%
VFC Inventory	61,848.81	70,086.60	(8,237.79)	-13.32%
Trust Funds	17,986.86	17,986.86		
Deferred Revenues	0.00	0.00		
Other Long-term Liabs	86,033.00	86,033.00		
FUND BALANCE RESTRICTED DENTAL	98,081.27	105,963.53	(7,882.26)	-8.04%
FUND BALANCE END OF YEAR	387,012.67	100,042.04	286,970.63	74.15%
FUND BALANCE	201,159.69	412,769.87	(47,291.20)	-12.94%
FUND BALANCE - TECHNICAL/EQUIP	489,494.46	489,494.46		
FUND BALANCE-FACILITY DEV.	124,580.00	124,580.00		
FUND BALANCE-SELF INS BONDS	13,949.72	13,949.72		
FUND BALANCE-FUTURE RETIREMENT	323,830.00	608,829.80	(284,999.80)	-88.01%
FUND BALANCE-COMPENSATED LEAVE	285,988.76	285,988.76		
FUND BALANCE-UNEMPLOYMENT	55,000.00	55,000.00		
FUND BALANCE - TRAINING	35,000.00	35,000.00		
FUND BALANCE - BRFS	11,522.00	11,522.00		
FUND BALANCE-HEALTH INSURANCE	160,000.00	160,000.00		
FUND BALANCE-POTENTIAL CLAIMS	168,289.00	93,734.00	74,555.00	44.3%
FUND BALANCE CHW	300,000.00	0.00	300,000.00	100.0%
FUND BALANCE OPEB	57,778.00	0.00	57,778.00	100.0%
Net Income / (Loss)	219,279.16	25,893.66	193,385.50	88.19%
Total Liabilities	4,096,406.86	3,558,523.30	702,202.54	16.48%
Difference	0.00	(0.00)	(164,318.98)	100.0%

**CONTRACT EXTENSION AGREEMENT
BETWEEN
MID-MICHIGAN DISTRICT HEALTH DEPARTMENT
AND
MY COMMUNITY DENTAL CENTERS, INC.**

This CONTRACT EXTENSION AGREEMENT (“Agreement”) is dated as of the dates of signatures below and is effective as of February 1, 2021 (the “Effective Date”), by and between Mid-Michigan District Health Department (the “Health Department”) and My Community Dental Centers, Inc., a Michigan non-profit corporation (formerly known as Michigan Community Dental Clinics, Inc.) (“MCDC”), (collectively the “Parties”).

WHEREAS the Parties entered into an AGREEMENT BETWEEN MID-MICHIGAN DISTRICT HEALTH DEPARTMENT AND MICHIGAN COMMUNITY DENTAL CLINICS, INC. effective February 1, 2011 (the “2011 Agreement”), as well as an AMENDMENT TO THE AGREEMENT BETWEEN MID-MICHIGAN DISTRICT HEALTH DEPARTMENT AND MICHIGAN COMMUNITY DENTAL CLINICS, INC. effective July 8, 2016 (the “2016 Amendment”), and

WHEREAS the Parties hereby agree to extend the term of the 2011 Agreement in accordance with the provisions of the 2011 Agreement as modified by the 2016 Amendment except as noted or amended herein,

In consideration of the mutual covenants contained herein, the Parties mutually covenant and agree as follows:

1. The 2011 Agreement was entered into as of February 1, 2011 with a term of ten (10) years.
2. The Parties agree to extend the 2011 Agreement (as modified by the 2016 Amendment) for an additional period of ten (10) years, beginning upon the expiration of the original time period and ending on January 31, 2031.
3. Section 2(A) of the 2011 Agreement shall be modified to read:

The parties acknowledge that MCDC’s clinic space is located in a premises currently leased to the Health Department by Clinton County by a lease dated June 2, 2011 (“Lease”). The Health Department subleases the clinic space to MCDC pursuant to paragraphs 4 and 9 of the Lease. Rent for the clinic space (1,017 sq. ft. plus the common area of 323 sq. ft.) shall be One Thousand Nine Hundred Sixty Six Dollars and Sixty Seven Cents (\$1,966.67) per month (\$23,600 annually). The monthly rent amount will be reviewed annually and may be adjusted to reflect increases in clinic maintenance and

utilities expenses, but shall not be less than the rental amount charged to and payable by the Health Department under its Lease with Clinton County.

Upon 180 days written notice to the Health Department, MCDC shall have the right to vacate the clinic space with no further obligation or responsibility therefor, excepting the continued payment of the monthly rent in effect at the time of notice through the vacation date. This provision is separate and apart from any provisions regarding termination of the services agreement between the Parties.

Furthermore, should the Health Department receive notice that its lease with the County is being terminated for any reason, the Health Department shall provide notice of such to MCDC within three days of receipt.

4. Section 3 of the 2011 Agreement shall be modified to read:

MCDC will own all the furnishings and equipment in the clinic space as of the Effective Date and thereafter acquired. MCDC shall be responsible for insuring, maintaining and replacing said furnishings and equipment. Schedule E of the 2009 Agreement is hereby severed from this agreement as of the Effective Date. The parties agree that the One Thousand Dollars (\$1,000.00) monthly equipment fees currently paid by MCDC to the Health Department shall terminate on September 30, 2021.

5. Section 4 of the 2011 Agreement shall be modified to read:

This Agreement shall commence on February 1, 2021 and terminate on January 31, 2031.

6. The following language shall be added to the 2011 Agreement as Section 5(C):

If any agreement entered into by a Party or between the Parties to lease a premises as MCDC's clinic space is terminated for any reason, then this Agreement may also be terminated if there is, upon the termination of such lease, no existing or planned Public Dental Center Location. If, however, there is at least one Public Dental Center Location or a planned Public Dental Center Location upon the termination of such lease, if any, then this Agreement will continue in full force and effect except with respect to the Public Dental Center Location(s) where MCDC's right or license to occupy the Public Dental Center Location(s) has been terminated.

7. Section 6 of the 2011 Agreement (as modified by the 2016 Amendment) shall be modified to read:
 - A. *MCDC will submit claims and bill for dental clinics services it provides utilizing its own provider identification number(s) and will be paid directly for such services by the entities it bills. For the periodic Medicaid Public Dental Clinic Enhanced Reimbursement Rate payments, MCDC will receive the entire amount of the payments, including both the amount of the federal share and the amount of the state share. The Health Department will provide an intergovernmental transfer of funds to the Michigan Medical Services Administration, quarterly, or as otherwise determined by the Michigan Medical Services Administration, by the date provided on the Notice of Program Reimbursement, to pay the non-federal share of Medicaid Public Dental Clinic Enhanced Reimbursement Rate payments for Dental Clinic Services provided by MCDC as a Public Dental Clinic on behalf of the Health Department. The amount of the intergovernmental transfer of funds to be provided by the Health Department is the non-federal share of the difference between the Medicaid fee screen rate and the average commercial rate for Medicaid-eligible Dental Clinic Services, as determined by the Michigan Medical Services Administration. The amount of the intergovernmental transfer provided by the Health Department will be reviewed as of the Effective Date of this Agreement and annually thereafter.*
 - B. *MCDC will pay the Health Department for Public Dental Programs services provided by the Health Department. The amount to be paid by MCDC to the Health Department will be paid seven (7) business days after MCDC receives the State Plan Amendment Enhanced Reimbursement. The payment for Public Dental Program services will be based upon the volume of Dental Clinic Services provided by MCDC and Public Dental Programs services provided by the Health Department.*
8. The final sentence of Section 10 of the 2011 Agreement shall be replaced with the following: *“The Parties have executed a Business Associate Agreements effective May 14, 2019 in compliance with HIPAA regulations.”*
9. The following language (noted in italics) shall be added in the first paragraph of Section 13 of the 2011 Agreement: *“...disability, or other classification protected by applicable law that is unrelated...”*
10. Notices pursuant to Section 15 of the 2011 Agreement shall be given as follows:

If to the Health Department:

with a copy to (which shall not constitute notice):

*Mid-Michigan District Health Department
ATTN: Health Officer
615 N. State St.
Stanton, MI 48888-9702
Phone: 989-831-3614
Fax: 989-831-5522*

*Cohl, Stoker & Toskey
ATTN: Tim Perrone, Esq.
601 N. Capitol Ave.
Lansing, MI 48933-1211
Phone: 517-372-9000
Fax: 517-372-1026
Email: tperrone@cstmlaw.com*

If to MCDC:

with a copy to (which shall not constitute notice):

*My Community Dental Centers
Attn: Chief Executive Officer
3890 Charlevoix Ave., Suite 300
Petoskey, MI 49770
Phone: (231) 547-7638
Fax: (231) 582-2967*

*Taft Stettinius & Hollister LLP
Attn: Kristen Gentry Klos, Esq.
One Indiana Square, Suite 3500
Indianapolis, IN 46204
Phone: (317) 713-3504
kklos@taftlaw.com*

11. The following sentence shall be added after the second sentence of Section 19 in the 2011 Agreement:

The Parties hereby agree that all demands, controversies, claims, actions, causes of action, suits, proceedings, and litigation relating to or arising out of this Agreement shall be brought and tried in a mutually agreeable Circuit Court in the State of Michigan.

12. Exhibits A and C of the 2011 Agreement shall be replaced with the corresponding attached Exhibits A and C.
13. All other terms and conditions of the 2011 Agreement as modified by the 2016 Amendment remain in effect.

This Contract Extension Agreement may be executed in counterpart, each of which will be an original but all of which will constitute one and same Contract Extension Agreement.

Intending to be legally bound, the Parties indicate their agreement to this Contract Extension Agreement as of the dates of signatures below.

Mid-Michigan District Health Department

My Community Dental Centers, Inc.

By: _____

By: _____

Name: Bruce DeLong

Name: Deborah Brown

Title: Board Chairperson

Title: CEO

Date: May 26, 2021

Date: _____

Schedule A

Dental Center Services

MCDC will provide, through employees or contractors, the following services under this Agreement:

- A. Primary dental services that are typically delivered by a general dental practitioner, including, but not limited to, the prevention, treatment, and control of periodontal disease and dental caries and other similar services provided in the usual practice of dentistry;
- B. Completion of all claims and billing of claims (through an electronic medical records and billing system developed by MCDC) for services furnished to patients;
- C. Collection of fees for services from the Michigan Department of Health & Human Services and private payers;
- D. Management of revenues to ensure the payment of all costs associated with on-going operations at Public Dental Center Location(s); and
- E. Administration of compensation and benefits for MCDC employees who provide Dental Center Services covered by this Agreement.

Schedule C

Administration, Public Education and Outreach Services

The Health Department will administer the Public Dental Center Program with MCDC by overseeing, coordinating, and contributing to the Public Dental Center Program as follows:

Appoint one qualified employee, staff member, official, or contractor performing services for the Health Department to serve as the Health Department's "qualified individual" representative on a committee composed of representatives from various local health departments established for the purpose of advising MCDC's Board of Directors with respect to MCDC's Public Dental Center programs in Michigan (the "Advisory Council"). To be a "qualified individual," as that term is used in this section, the individual must be willing and able to serve on MCDC's Board of Directors as a Community Director if such representative is appointed to do so by the Advisory Council.

Provide oral health screening, education and/or referrals in WIC, MIHP, and other health department programs.

Link Health Department clients with a dental home by providing referrals to Public Dental Center Program Location(s).

Promote Dental Center Services via outreach to schools, community based organizations, and community events.

Assure presence of dental center information on the Health Department's website, social media, and other promotional materials.

Participate in MCDC-directed discussions, workgroups, and projects that focus on expanding oral healthcare initiatives in the Community.

Monitor the delivery of dental services in the Community through routine patient service reports provided by MCDC.

Assist with local/regional program and policy development.

Provide public health dental education and outreach that includes facilitating enrollment for Medicaid benefits or assisting other organizations to facilitate enrollment in Medicaid, Healthy Kids or the Healthy Michigan Plan.

Report to the Boards of Health

Jennifer Morse, MD, MPH, FAAFP, Medical Director

Mid-Michigan District Health Department, Wednesday, May 26, 2021
Central Michigan District Health Department, Wednesday, May 26, 2021
District Health Department 10, Friday, May 21, 2021



Vitamin and Herbal Supplements to Prevent Infectious Illnesses

Our immune system is constantly at work protecting us from harmful organisms as well as our own diseased tissues. It is a very complicated system and depends on many things to work properly. Many things can weaken our immune systems. Toxic substances, like smoke, excessive alcohol, and pollution, can weaken our immune system. Excess weight and obesity cause a low-grade chronic inflammation in the body and appears to be a risk factor for infections. Malnutrition due to a poor diet keeps our immune system from functioning properly. Long term mental stress causes the release of steroids that suppress our immune system. Certain chronic illnesses and their treatments impair the immune system. Lack of sleep deprives the body of the time needed to restore and release chemicals needed as part of a healthy immune system. Finally, simply getting older leads to a weaker immune system.

Specific foods, nutrients, and herbs do not hold the key to the perfect immune system. Having a well-balanced diet, along with other healthy habits, is key. Nutrients important to the growth and function of our immune cells are vitamin C, vitamin D, zinc, selenium, iron, and protein. Eating a well-balanced diet prevents deficiencies in these nutrients. However, some people cannot always eat a good variety of nutritious foods or have increased need for nutrients. In these cases, a general multivitamin and mineral supplement that provides the recommended dietary allowances (RDA) may benefit the immune systems. Large doses of vitamins are generally not needed. Individuals that may benefit from a vitamin and mineral supplement are those in lower-income households, pregnant and breastfeeding women, infants, toddlers, and those that are seriously ill.

It also appears our microbiome, or the trillions of microbes that live in our bodies, primarily our intestines, play a role in our immune system. Our diet plays a big part in the kind of microbes that live in our intestines. Having a diet high in fiber rich food like fruits vegetables, whole grains and legumes support healthy microbes. **Probiotics** are living microorganisms that can be found naturally in fermented food, added to food, or in a supplement. They act in the gastrointestinal tract. They do appear to improve our immune system in many ways, not all of which are known. Studies on probiotics have found improved outcomes in people that have been hospitalized with COVID-19 or are hospitalized in the ICU. Side effects from probiotics are minor and can include things like gassiness. In people with severely compromised immune system, there have been cases of the probiotics causing infection.

Vitamin C, or ascorbic acid, has many good effects on our immune system as well as being an antioxidant. Vitamin C deficiency, which is rare in the United States, leads to an impaired immune system. Vitamin C supplementation has been found to reduce the common cold by only 4% and shorten how long colds last by 8% to 9% (so if a cold would have lasted 7 days, someone that regularly takes a vitamin C supplement would get over the cold in 6.5 days). In recent studies, vitamin C supplements did not shorten the duration of symptoms of COVID-19 illness. Vitamin C is safe at doses up to 2,000 mg/day for adults. Higher doses can cause side effects like diarrhea, nausea, and cramps.

Vitamin D is a hormone the body can make from sun exposure as well as in certain foods. It does have benefits on our immune system. Vitamin D deficiency is associated with risks for influenza, hepatitis C, HIV, and other viral diseases. There is some evidence suggesting vitamin D supplementation reduces the risk of getting respiratory tract infections, mostly in those who have a vitamin D deficiency. On average, those taking vitamin D supplements are only 7% less likely to catch colds and if they get a cold, it is only shortened by 6%. There have been studies

finding a higher risk of COVID-19 infection and increased risk of serious illness in those with vitamin D deficiency. Some studies have found less COVID-19 infection and less severe illness in those taking vitamin D supplements. There have been other studies that have not found vitamin D that helpful in preventing COVID-19 and more studies are ongoing. Intake up to 100 mcg (4,000 IU) are considered safe for adults. Higher doses may be needed for people with vitamin D deficiency diagnosed by a doctor.

Zinc is an essential nutrient and is found in several foods. It does have many roles in the body's functions that effect the immune system. Taking zinc regularly does not seem to reduce how often someone gets sick with viruses like the common cold, but it does shorten the length of these illnesses by about 59% (so instead of being sick for 7 days, you would be sick for about 3 days). Zinc has been studied during infection with COVID-19 and did not shorten the length of illness. Zinc is known to have some side effects. **When used in the nose as a nasal spray (brand name Zicam), it can cause damage to or loss of the sense of smell which can be permanent. The FDA issued a public health advisory advising this product should not be used** however it is still available for sale. Other common sides effects of zinc are bad taste in the mouth and nausea. Doses up to 40mg a day appear to be safe in adults. Higher amounts can cause nausea, vomiting, loss of appetite, cramps, diarrhea, and headache.

Echinacea is a common herbal supplement used to prevent viral infections. It may have antimicrobial activities and support the immune system. Echinacea contains several different active chemicals, yet the chemical responsible for any medical benefit is not well known and different echinacea species have different chemical compositions. There have been studies showing echinacea may provide a very small benefit to prevent the common cold. Taking echinacea once you are sick with a cold does not seem to be of any help. It appears to be safe with few side effects. The most common side effects are skin rashes, allergic reaction, and stomach upset. There have been rare reports of liver damage but those may have been due to a contaminate in the product.

Elderberry has been studied in a few small trials for use against the common cold and influenza with some possible good results. However, some elderberry supplements recently evaluated were found to either be very diluted or contain other, cheaper ingredients. This is thought to be due to increased demand for the product during the COVID-19 pandemic. For that reason, elderberry supplements should be used with caution at this time.

Ginseng has been found in some animal and lab studies to stimulate the immune system and possibly reduce the replication of viruses. It is not clear if ginseng has these effects in humans. Trials looking at whether ginseng prevents colds and flu have had mixed results. It appears to be safe, with minor side effects like headache, poor sleep, and stomach upset.

Melatonin is a hormone made by the pineal gland in our brain to help control our sleep-wake cycle. It is also available as a supplement. Most melatonin supplements are created synthetically, or in a lab. These are safest. "Natural" melatonin is made from the pineal glands of animals and have a risk of being contaminated with animal viruses. Studies in animals and in the lab have suggested using a melatonin supplement improves the immune system. Some studies suggest that those taking melatonin were less likely to be infected with COVID-19 and there are more ongoing trials evaluating this.

Vitamins and herbal supplements are big business. In 2012, Americans spent \$12.8 billion on natural product supplements, which was 24% of what they spent on prescription drugs (\$54.1 billion) that year. Despite what many believe, the oversight of supplements is nothing like that of prescriptions drugs. In the 1960s, herbal medicines were reassigned to the category of food supplements. This category has a lower requirement for proof of safety and effectiveness. In 1994, the Dietary Supplement Health and Education Act (DSHEA) broadened the definition of a dietary supplement as a product containing any of the following: a vitamin, mineral, amino acid, herb, other botanical, concentrate, metabolite, constituent, or extract. This act put dietary supplements in a different category from drugs. **They are not required to prove safety, quality, or effectiveness before being marketed.**

It is challenging to study or recommend supplements because there is a great deal of variation in different commercially available products. This is due to the different plant species used, the part of the plant used, how and when the plant was harvested, stored, and processed, how the active chemicals are extracted and standardized, the purity of the active ingredients, how accurately the product is labeled, and any adulterants in the product. There is no regulation controlling or monitoring any of this and all of these factors effect whether the final product is safe or effective.

It is also important to remember that herbs and supplements still function like drugs. Some herbals and supplements have caused serious side effects, like liver or kidney damage, even death. Supplements are often considered safe with no limit on dose and overdoses have occurred. Herbal products and supplements can interact with medications. Some particularly harmful interactions are St. John's wort which interacts with cyclosporine, oral contraceptives, irinotecan, warfarin, and digoxin; ginkgo biloba which interacts with blood thinners; grapefruit juice which interacts with certain blood pressure medications called calcium channel blockers and cholesterol medications.

While is it understandable that we all want to have the healthiest immune system possible at this time, the best support we can give for a healthy immune system is:

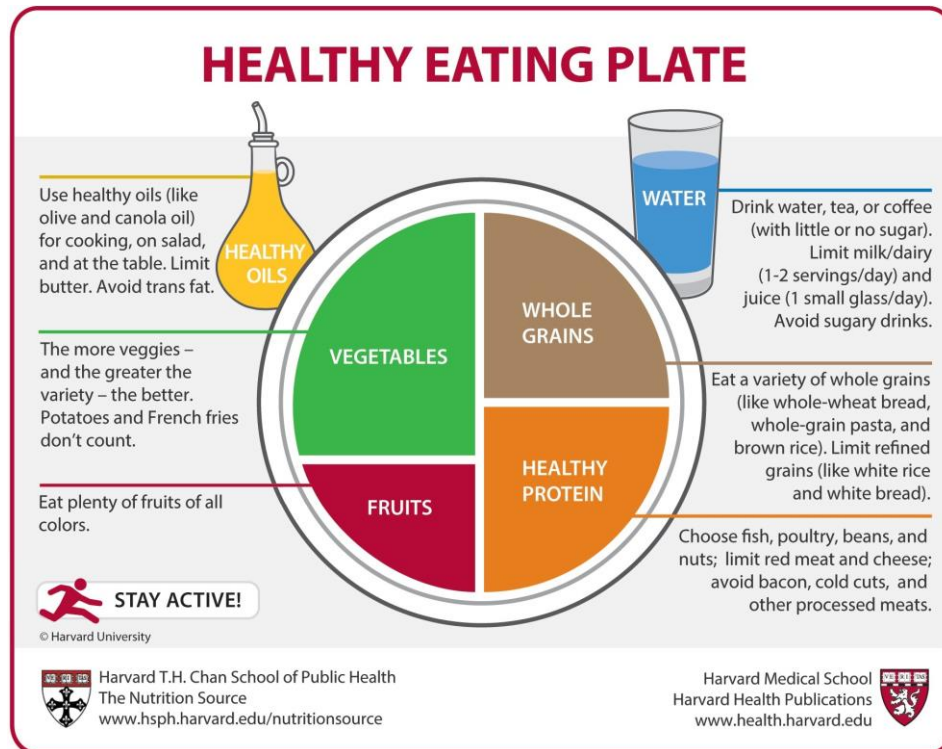
1. Eat a balanced diet of fruits, vegetables, lean proteins, whole grains, and water.
2. If you are not able to eat a well-balanced diet, consider taking a multivitamin that has the recommended daily allowance of several vitamins and minerals.
3. If you smoke or use tobacco, work on quitting. If you don't, don't start.
4. Don't drink alcohol in excess.
5. Get a moderate amount of exercise.
6. Aim for a regular sleep schedule, getting 7 to 9 hours each night.
7. Avoid stress and find ways to manage stress that you do have.
8. Wash your hands often and properly.
9. Stay up to date on your vaccinations.

Resources:

- NIH Herbs at a Glance <https://www.nccih.nih.gov/health/herbsataglance>
- Medscape Drug Interaction Checker (includes herbal products) <https://reference.medscape.com/drug-interactionchecker>
- Stockley Herbal Medicines Interactions (very in-depth explanations/clinical guide) https://www.stonybrookmedicine.edu/sites/default/files/herbal_medicines_interactions-1.pdf
- You can report adverse events related to herbal products or any over-the-counter medication, prescription medication, food, or cosmetic, to the US Food and Drug Administration (FDA) MedWatch program online <https://www.accessdata.fda.gov/scripts/medwatch/index.cfm>

Recommendations:

1. Following a balanced diet is the best way to get the nutrients you need for a healthy immune system. For more information see <https://www.hsph.harvard.edu/nutritionsource/healthy-eating-plate/>



2. If you are concerned you are not getting a well-balanced diet, consider taking a multivitamin once a day. High doses of any vitamin or mineral have not been consistently found to be very helpful. Verified multivitamins can be found here <https://www.quality-supplements.org/verified-products/verified-products-listings#list2>; anyone other than a pregnant or menstruating woman should not take a vitamin with extra iron.
3. If you choose to take vitamins or supplements, consult with your doctor or pharmacist. Look for those verified by the United States Pharmacopeial Convention (USP), an independent, scientific nonprofit organization (see image of seal below). This verification indicates the product contains the ingredients listed on the label, in the declared potency and amount, does not contain harmful levels of specified contaminants, will break down and release into the body within specified amount of time, and has been made using safe, sanitary, and well-controlled manufacturing practices according to FDA and USP guidelines. For more information see <https://www.quality-supplements.org/>.



Sources

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- National Institute of Health (NIH). Dietary Supplements in the Time of COVID-19. <https://ods.od.nih.gov/factsheets/COVID19-HealthProfessional/>

COVID-19, State of Michigan: Case Investigation TA Metrics

Last Refresh Date

5/19/2021 2:15:09 PM

7-day rolling average

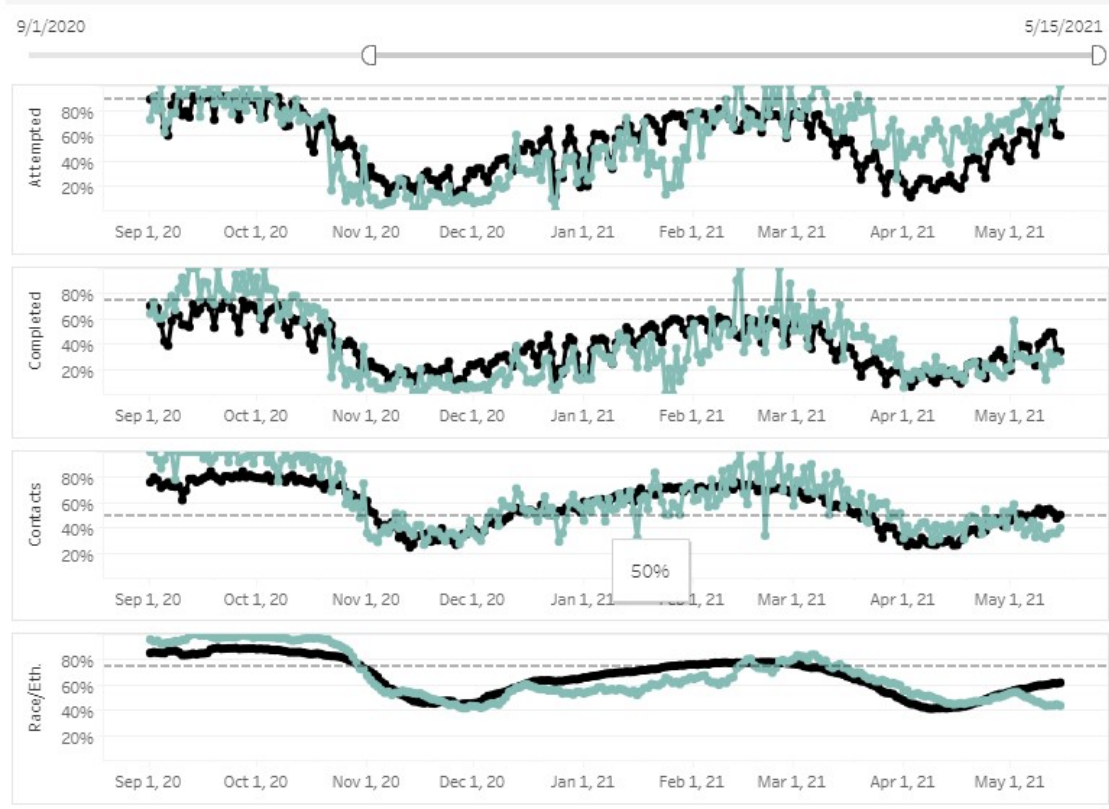
Case Completion Target:

No
 Yes

Within first day
 Within second day
 Within seventh day

Jurisdiction: (Multiple values)

Chart 1: Percent of newly referred cases *attempted* to be investigated within one day
 Chart 2: Percent of newly referred cases *successfully investigated* within one day
 Chart 3: Percent of newly referred cases with at least one contact identified, or marked as "no contacts", within one day
 Chart 4: Percent of newly referred cases with race and ethnicity documented within one week



Jurisdiction: Mid-Michigan District, State of Michigan

Case Investigation Metrics, 7-day average - Referred on May 15, 2021

Target: Within first day

Weekend: Include

Sort by: Cases Desc

Jurisdiction	Cases	Contacts / Case*	TA bucket (05/07-05/13 referral)	Interview attempted in first day, 90% goal	Interview complete in first day, 75% goal	At least 1 contact elicited in first day, 50% goal	Race / eth. documented within 1 week, 5% goal
State of Michigan	11,151	3.00	N/A	67.5%	42.6%	51.7%	60.1%
Mid-Michigan District	239	4.90	Yellow	81.2%	24.3%	34.7%	43.9%

Source: Michigan Disease Surveillance System

* Contacts/case referred as of: 5/14/21

Last Refresh Date

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COVID-19, State of Michigan: Case Investigation TA Metrics - Age Restricted

7-day rolling average

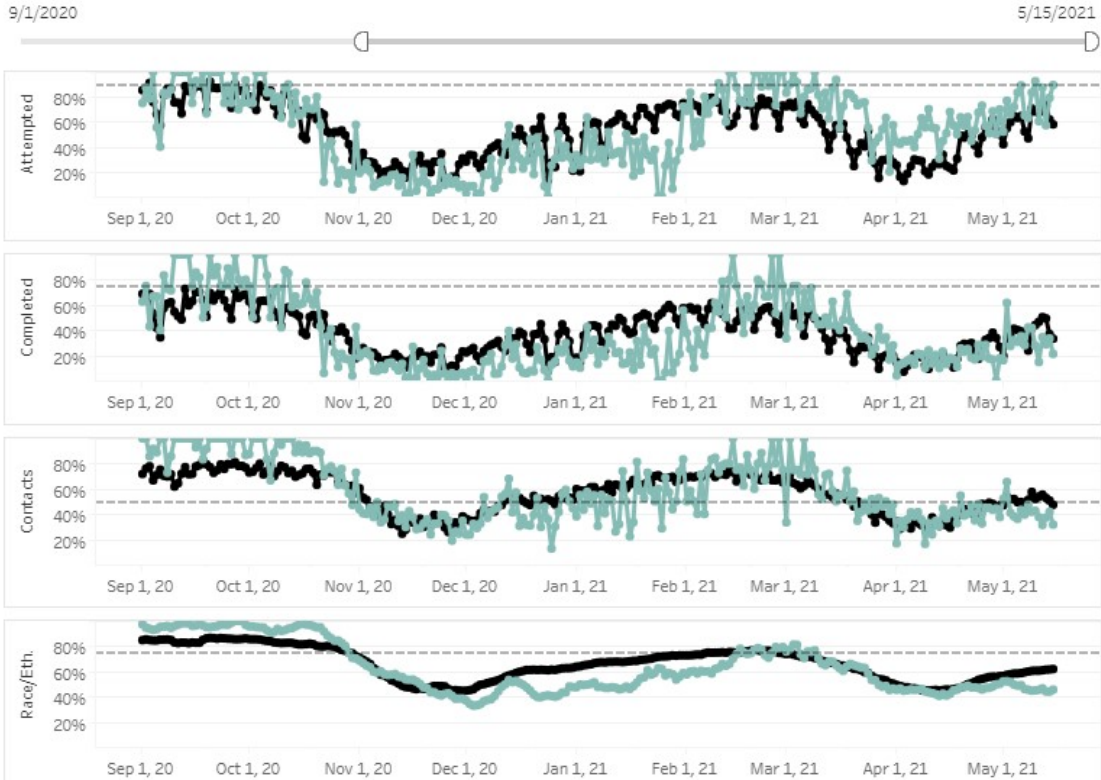
Case Completion Target:

Jurisdiction: (Multiple values)

No
 Yes

Within first day
 Within second day
 Within seventh day

Chart 1: Percent of newly referred cases *attempted* to be investigated within one day
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Jurisdiction: Mid-Michigan District, State of Michigan

Case Investigation Metrics, 7-day average - Referred on May 15, 2021

Target: Within first day

Weekend: Include

Sort by: Cases Desc

Jurisdiction	Cases	Contacts / Case*	TA bucket (05/07-05/13 referral)	Interview attempted in first day, 90% goal	Interview complete in first day, 75% goal	At least 1 contact elicited in first day, 50% goal	Race / eth. documented within 1 week, 5% goal
State of Michigan	7,877	3.10	N/A	68.2%	44.3%	52.8%	60.9%
Mid-Michigan District	210	5.42	Yellow	76.2%	26.7%	37.6%	44.9%

Source: Michigan Disease Surveillance System * Contacts/case referred as of: 5/7/21

Report for Remote Work Survey

Response Counts

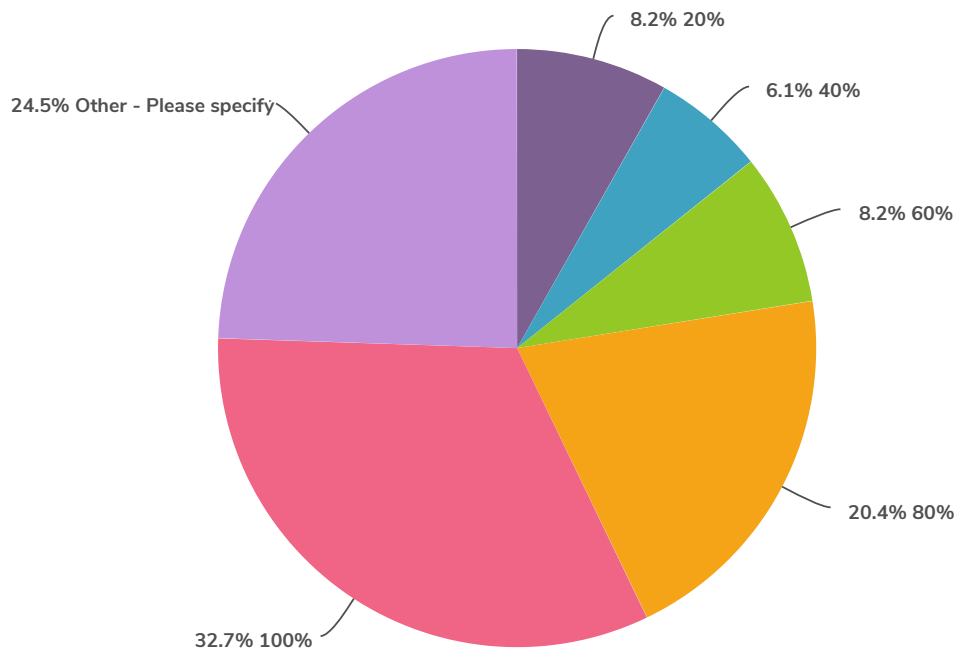
Completion Rate: 100%

Complete

49

Totals: 49

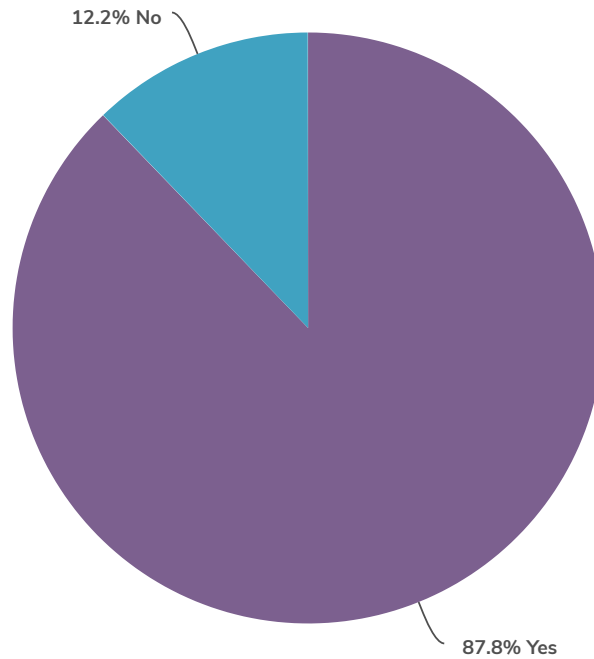
1. How much of your time currently is remote work? Each percentage depicts a full day.



Value	Percent	Responses
20%	8.2%	4
40%	6.1%	3
60%	8.2%	4
80%	20.4%	10
100%	32.7%	16
Other - Please specify (click to view)	24.5%	12

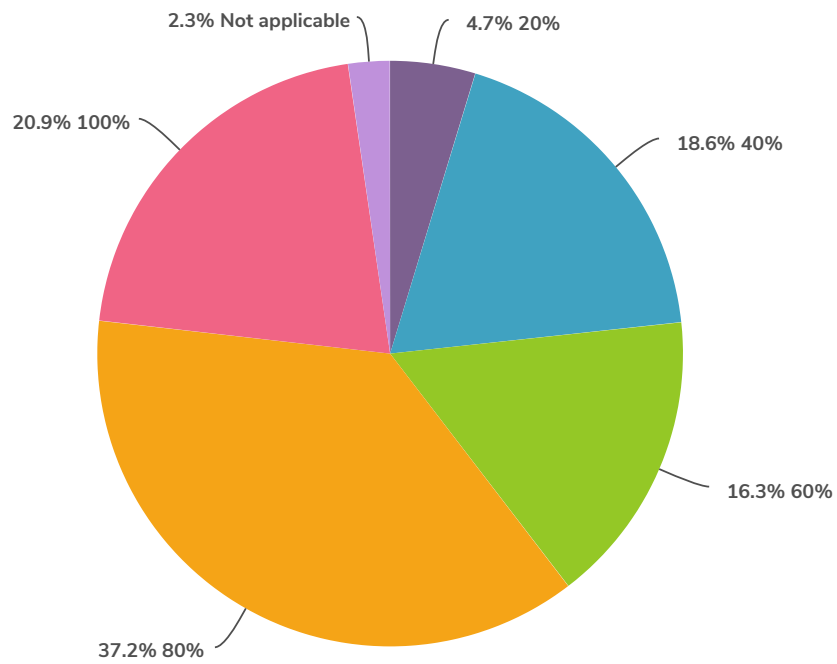
Totals: 49

2. When the agency is no longer requiring remote work, would you be interested in remote work on a routine basis if it is possible with your job duties?



Value	Percent	Responses
Yes	87.8%	43
No	12.2%	6
		Totals: 49

3. If yes, what percent of time would you be interested in working remotely (again as your position allows)? Each percentage depicts a full day.



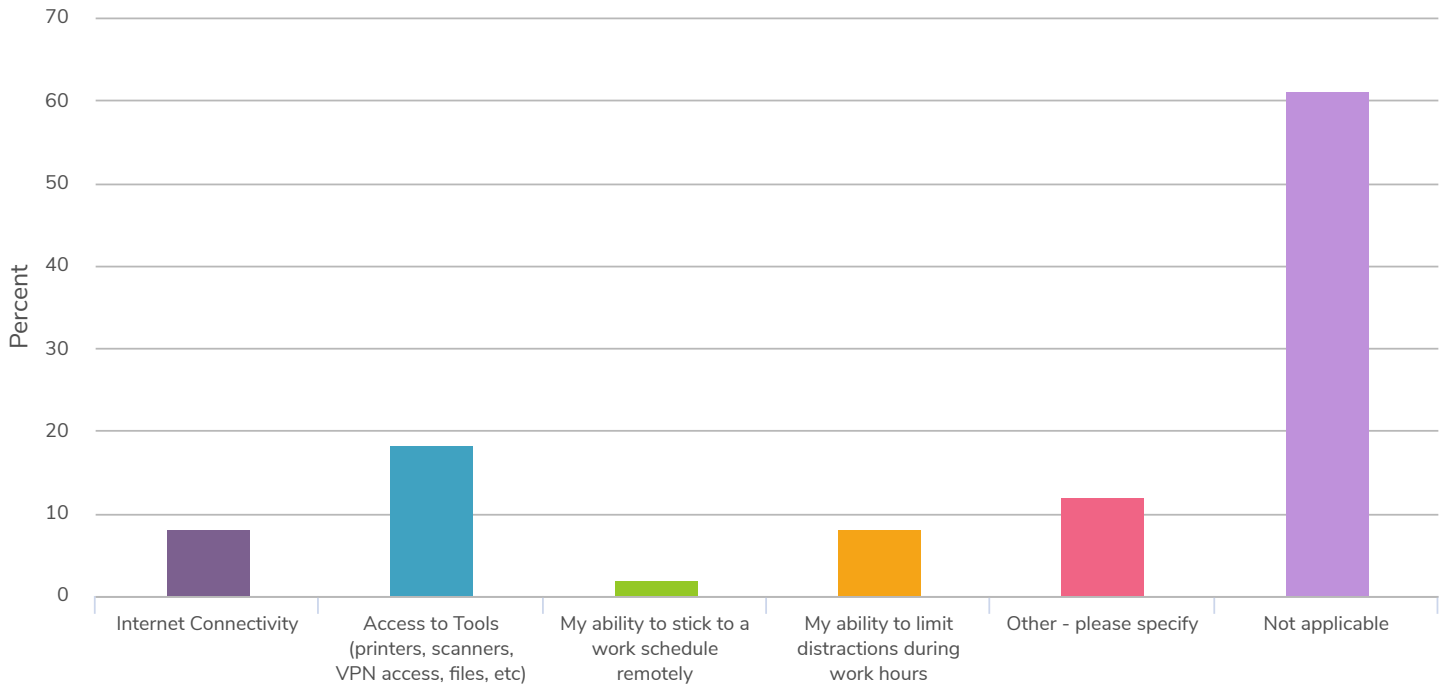
Value	Percent	Responses
20%	4.7%	2
40%	18.6%	8
60%	16.3%	7
80%	37.2%	16
100%	20.9%	9
Not applicable	2.3%	1
		Totals: 43

4. We are looking for the specifics on what can only be done in the office, i.e. list the duty (or duties) that can only be performed while in the office.



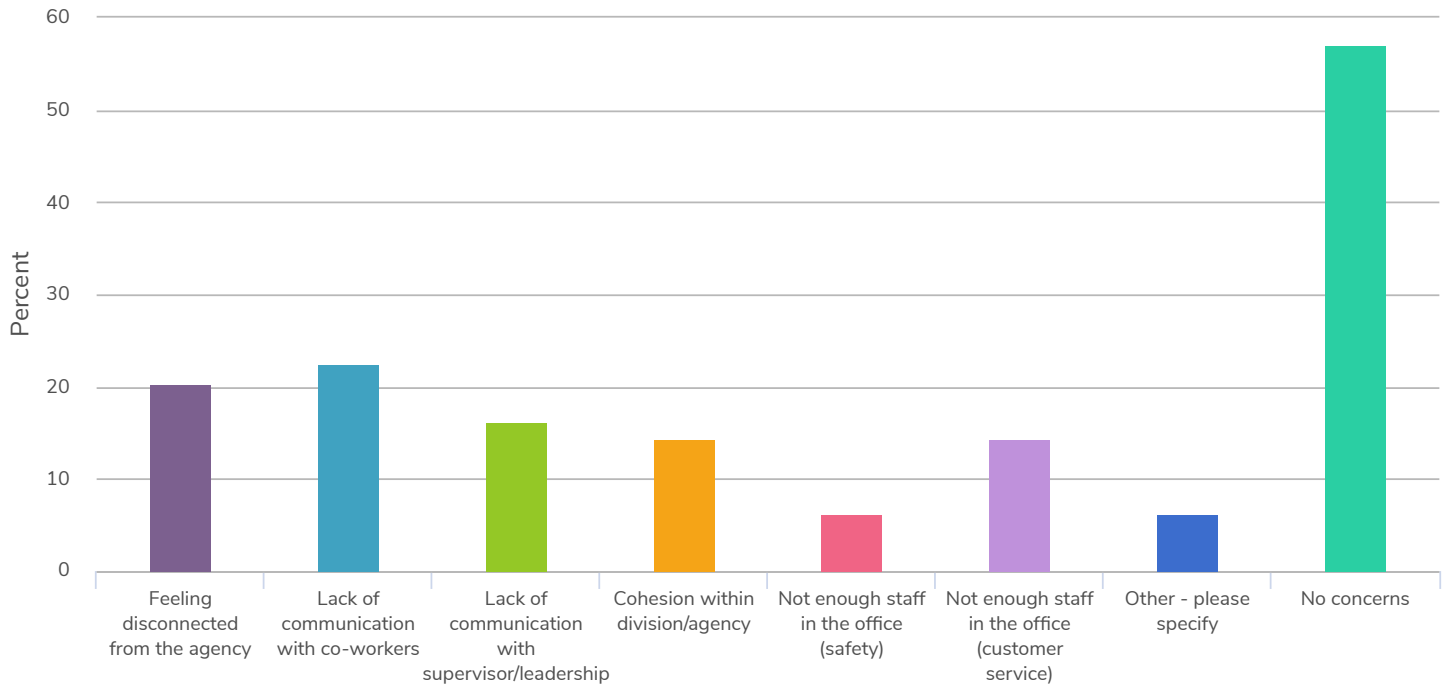
[Show Responses ▶](#)

5. Of the work you perform, what limits the ability to work remotely? Check all that apply.



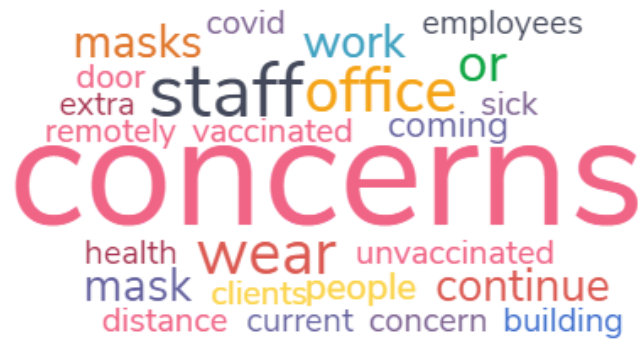
Value	Percent	Responses
Internet Connectivity	8.2%	4
Access to Tools (printers, scanners, VPN access, files, etc)	18.4%	9
My ability to stick to a work schedule remotely	2.0%	1
My ability to limit distractions during work hours	8.2%	4
Other - please specify (click to view)	12.2%	6
Not applicable	61.2%	30

6. We are trying to understand if there are concerns if we move towards a hybrid model (some may work solely in the office and some may work partly in the office/partly remotely) – how does this affect you? Check all that apply.



Value	Percent	Responses
Feeling disconnected from the agency	20.4%	10
Lack of communication with co-workers	22.4%	11
Lack of communication with supervisor/leadership	16.3%	8
Cohesion within division/agency	14.3%	7
Not enough staff in the office (safety)	6.1%	3
Not enough staff in the office (customer service)	14.3%	7
Other - please specify (click to view)	6.1%	3
No concerns	57.1%	28

7. When we are back in-person there will be a mix of vaccinated and unvaccinated staff members. Do you have any ideas on how to improve COVID Safety Protocols in the office? Or do you have any concerns about coming back to the office?



[Hide Responses](#) ▼

ResponseID	Response
4	I do not have concerns regarding coming back in the office if all staff will have to wear masks when not in their office.
5	no eating together unless socially distanced. Continue to keep front door locked to screen clients.
6	N/A
7	No
8	I have no desire to be around unvaccinated people. I do not trust that they are being safe outside of work and I have seen too many from our health department not wear their masks correctly and no one seems to care or say anything to them.
9	I think we should continue with mask wearing policies
10	I do not unfortunately
11	No concerns. Staff that are not vaccinated should wear a mask in the building. Continue to social distance.
12	I have concerns with families with young children coming into the office that are not vaccinated. Moms will bring in extra children (on summer break) that are not part of the appt., but don't have a babysitter, so more unvaccinated people in the building.
13	continue to wear mask when around other employees/clients regardless of vaccination status. As more people are vaccinated and our positivity rate continues to go down relax on mask requirement.
14	I'd prefer to work remotely.
15	I have no concerns for those that choose to be unvaccinated
16	No not at this time

ResponseID Response

17	Yes. I do not have an office and cannot close a door or protect myself from unvaccinated clients or co-workers except by wearing a mask while at my desk because I'm out in the open. Staff share a lot of equipment/things, so it will take extra effort from everyone to keep door knobs, handles, copy machine screens, light switches, etc. clean.
18	no
19	still requiring masks, I certainly have concerns that people who work in public health and for the health dept are not getting vaccinated.
20	My only concern would be frequent transmission of the virus in unvaccinated staff and having to possibly quarantine or get sick even though another staff is vaccinated. I think staff will have to be able to be flexible with this.
21	No Ideas.
22	no concerns
23	No

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8. As we transition towards opening in-person, some staff may spend more time working in the office, while others will spend more time working remotely. Do you have comments or concerns about these differences?



[Hide Responses ▼](#)

ResponseID Response

4	no concerns
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ResponseID Response

5	no
6	N/A
7	My only concern is that for fairness. I feel that some staff don't have an option because of clinic. If we can try to make it so those staff at least get one remote day a week or a couple a month. I feel that would help.
8	As business allows I think it is best to let people decide what is best for them, and their comfort level.
9	No
10	No, I think this is a great idea and look forward to the flexibility (especially in the snowy winter months).
11	No
12	I think that staff that can work remotely should be able to do so-it limits exposure for everyone and would be best practice. If your job requires being in the building, then you have to be in the building.
13	no
14	Not at all!
15	The same people who don't give 100% while in the office are the same staff that aren't giving 100% working from home.
16	No
17	The only comment I have is that when I need a staff person, I currently cannot reach them. Very few respond.
18	no
19	no
20	As having worked in an office setting years ago, I feel more productive working remotely. I also like going into the office 1 or 2 days a week to work in vaccine clinics as well. Having a hybrid work environment is a benefit to staff and depending on job duties many staff members could work remote which in turn reduces the cost of operating under one roof.
21	If remote working employee does not hinder the work process for the person in the office, and that was their choice to go back to the office to work, then I have no concerns.
22	no concern
23	People working from home have no time on the road or gas and vehicle maintenance fees. People commuting will have a longer day.

9. Anything else that you want us to know during this time to help improve morale and productivity?



[Hide Responses](#) ▼

ResponseID	Response
4	I stay pretty busy working from home. I am in favor of a hybrid model.
5	continue with teams meetings to connect everyone.
6	N/A
7	I do feel that the supervisors need to be more present in the house. Yes, remote is fine some but they should also be expected to come work in the office.
8	Monthly in person meetings for the individual buildings or divisions is a good way to still keep connected without needing to be in person every day. During warm months we could even have the meetings outside.
10	I started working during the pandemic and even though I know everyone's names and job duties, it is very likely I cannot match faces with names (especially with a mask). If there is any way to do CBO meetings and everyone can introduce themselves when we come back to work I would appreciate it!
12	It would be nice for the agency to recognize work anniversaries/retirements at general meetings, and to mail a small token to people for their birthday. Something to let employees know the agency cares about them.
13	no
14	Nope!
16	Weekly staff meeting

ResponseID Response

- 17 It will be hard to make everyone happy. I'm sure that there will be several staff that feel everyone should be back in the office and will not be happy until everyone is at their "office base". This is unfortunate because the agency has an opportunity to explore a work environment that offers many benefits to both employer and employee that has never been done before.
- 18 no
- 20 As a newer employee only working remote unless working at vaccine clinics I think our leadership has done an excellent job with communication and meetings to keep everyone in the loop. I also think that giving staff the option of remote work when feasible is a great benefit to offer future staff. Having this flexibility is beneficial to the staff member and the organization as a whole.
- 21 Even though I have connectivity issues from home due to slowness, I am still completing my work as scheduled and am not falling behind. Things take a bit longer but I've gotten used to it. As long as I continue to produce working from remote works great.
- 22 a staff bbq
- 23 The public needs in person services.
- 24 N/A
- 25 The public needs in person services.
- 27 Productivity has to be on the rise due to individuals not being distracted by office traffic. Other than clinics I feel the staff should stay remote as we are in a new time in all our lives.
- 28 Not that I can currently think of.

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This is a report for "Remote Work Survey" (Survey #6340840)



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MONTCALM OFFICE
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 (989) 831-5237

BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Michael R. Beach Adam Petersen
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March 24, 2021

ADMINISTRATOR: Liz Braddock, Director of Environmental Health Services

SUBJECT: Food Service Establishment License Fees, FY 20/21: Proposed House Bill

Information Only **Action Needed**

I. Authority For This Action:

- Local Policy _____
- Law or Rule Public Health Code, Act 368 of 1978, Intergovernmental Agreement of 2003

II. Summary:

At the March meeting of the Board of Health, the Board approved providing financial relief to licensed food service establishments by waiving the collection of late fees. In April we discussed Senate Bills 353 and 354 which would freeze the collection of food service license fees to provide even more relief. The Board was made aware of the consequences of the lost revenue to the Health Department Budget and the negative impact on its performance at meeting State Minimum Program Requirements. It seems that Senate Bills 353 and 354 will pass and will likely be signed by the Governor.

The Board Action Sheets discussed a proposed course of action to mitigate the loss of revenue by using county American Rescue Plan (ARP) dollars.

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

Assuming the two Senate bills pass, this is our estimate of the revenue that would be lost based on current Invoiced fees for this licensing period beginning May 1st 2021 to April 30th 2022.

Clinton	Gratiot	Montcalm	District Total
\$89,526	\$57,215	\$89,810	\$236,551

There would be some additional cost, because we have already collected 85% of these fees, and the Senate Bills require those to be refunded.

We have done two things to prepare a recommendation for you: First, the Michigan Association for Local Public Health has discussed this matter with Senator VanderWall, the main author of these bills. The Senator is clear that the Senate will not appropriate additional revenue to offset the losses by health departments. He also states he does not intend to create an “unfunded mandate” or have a negative impact on counties. He states that American Recovery Act funds should be used to offset these costs. I find that surprising since these are county funds and their use it up to the counties, not the legislature. We are simply reporting the outcome of our conversations.

The second thing we did is meet with the county administrators on May 19 and review the details of our proposal. They had an amicable conversation and after discussing this they agreed that it would be an appropriate use of American Rescue Plan funds.

We asked them how we should proceed. They said we should wait before doing anything until these bills become law.

After that, there could be some issues to work out such as how and by whom fees should be refunded to restaurants that have already paid. They felt the simplest course of action would be for the health department to invoice the counties for the entire amount of the lost revenue. The health department could then cut refund checks to the restaurants. We have personal relationships with the restaurants and have all the necessary information about them including the fee amounts, addresses, etc.

IV. Fiscal Impact and Cost:

The estimated costs are in the table above bearing in mind there could be a small additional cost for making the refunds.

V. Alternatives Considered:

Earlier we had a wide-ranging conversation with the Board about all our options for dealing with these bills from trying to oppose them to trying to absorb the losses in our own budget. However, the county administrators encouraged us to consider using the American Rescue Plan dollars. The administrators felt this is a small part of the available American Relief Plan funding and is well suited to their stated purpose of assisting small business.

VI. Recommendation:

- Wait to see if the bills become law.
- Invoice the counties for the lost revenue. This would be based on actual 2021 license fee received (not the invoiced amount as mentioned above).
- Proceed to cut checks to the food service establishments.

VII. Monitoring and Reporting Timeline:

If this occurs, we will report to the Board on the full amounts of the refunds.



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BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Betty Kellenberger Adam Petersen
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May 5, 2021

ADMINISTRATOR: Marcus Cheatham, Health Officer
 SUBJECT: Retirement Announcement

Information Only Action Needed

I. Authority for This Action:

- Local Policy Intergovernmental Agreement of 2003
- Law or Rule Public Health Code, Michigan Administrative Rules

II. Summary:

This serves as the formal announcement of my intent to retire and constitutes the minimum of 60 days’ notice required by item 6 of my Employment Agreement. As discussed below, I am willing to stay on longer to orient the incoming health officer. The action required here is for the Board Chair and Personnel Committee to instruct Melissa Bowerman to initiate a search process.

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

There are two main challenges posed by my departure. The first is the legal requirement to promptly replace the health officer. The second is to ensure good, ongoing leadership of the Department, which has performed very well during the current crisis.

Regarding legal obligations, under the Public Health Code, MCL 333.2428, counties are required to appoint a full-time local health officer who meets the minimum requirements set by the state health department (MDHHS). Our intergovernmental agreement echoes this in section VII (h). Those minimum requirements are spelled out by Michigan Administrative Rules R325.13001- 325.13004, which state that a local health officer must have a relevant graduate degree and five years of public health administrative experience, or less for an MPH. It is not difficult to comply with these requirements, and one possible approach is spelled out below.

As far as good ongoing leadership, I assure the Board I have been deliberate about timing my departure to ensure the administrative team is strong and can lead the department forward. In my opinion this is a good time for a health officer transition for two reasons. First, the department has gotten through the worst of the COVID-19 pandemic and clearly will have no further challenges in finishing that work. Second, the old model of public health in Michigan under which I served has been in a state of transformation since the Flint water crisis. Now, following the COVID pandemic and new initiatives out of Washington, the old system is ready to be being remade. It is a good time for a fresh start and new ideas suited to new times.

IV. Fiscal Impact and Cost:

The main costs of my retirement, as for all employees, are fixed and cannot be avoided and consist of pension obligations and any payout of unused leave. As I approach my retirement date, I intend to use

some vacation time which will reduce the final payout. I have about 503 hours of sick time, 250 hours of vacation and 16 hours of personal leave accumulated.

V. Recommendations:

Obviously, the Board must do whatever it feels is the responsible thing regarding my departure. However, I have put quite a bit of thought into this and have several recommendations.

First, I recommend that the Board conduct a vigorous search for a fully qualified candidate for health officer. I think this is a very attractive position and therefore believe the position should be advertised nationally on all relevant public health job boards including MALPH, NACCHO and APHA. MMDHD has accounts to do this. I also think that the job description alone (boring) should not be used to advertise the position, but the posting written earlier for director of environmental health should be modified to explain to potential candidates why this is a great community and a great job.

Second, I believe the Board should follow past practices of MMDHD and stand up a diverse search committee representing various community stakeholders. This is common practice among organizations that represent community interests (schools, community colleges, United Ways, collaboratives, etc.) including health departments. The search committee could include for example:

1. The personnel committee and/or Board Chair
2. A representative of Local Health Services at MDHHS
3. 2 to 4 representatives of community partners such as a school or college, economic development organization, community collaborative or United Way and a business group like a Chamber of Commerce or economic development group.
4. One member of the health department administration (not an internal candidate).

I suggest the search committee consider using the Lou Adler two question interview approach. I or another member of the Administration can provide the relevant documents to do that.

Finally, I suggest the Board consider asking me to stay and orient the incoming candidate if they are from outside the organization. A two-week orientation should be sufficient.

VI. Alternatives Considered:

These recommendations constitute the past practices for a health officer transition at MMDHD and include those in item 6 of my Employment Agreement. Upon termination that Board must offer 60 days pay even if I am dismissed immediately.

VII. Monitoring and Reporting Timeline:

Assuming you receive this May 5, my employment could be over by July 2. As I said I would be happy to stay through the end of the search process if it takes longer, and to orient an incoming health officer.



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MONTCALM OFFICE
 615 N. State St.
 Stanton, MI 48888-9702
 (989) 831-5237

BOARD OF HEALTH:	Bruce DeLong Dwight Washington, Ph.D.	George Bailey Chuck Murphy	Betty Kellenberger Adam Petersen
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May 19, 2021

ADMINISTRATOR: Melissa Selby, Administrator
 SUBJECT: Health Officer Search

Information Only Action Needed

I. Authority for This Action:

- Local Policy Intergovernmental Agreement of 2003
- Law or Rule Public Health Code, Michigan Administrative Rules

II. Summary:

Under the Public Health Code, MCL 333.2428, counties are required to appoint a full-time local health officer who meets the minimum requirements set by the state health department (MDHHS). With Dr. Cheatham’s retirement, we need to complete a search for a qualified candidate. These are some recommendations about how to do that, based on the process used in the past at MMDHD.

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

There are several things we need to consider going forward:

1. Compensation for the health officer position.
2. The position needs to be posted.
3. Applications need to be sorted and ranked.
4. We need to determine who will conduct interviews.
5. We may desire to conduct second round interviews.
6. Start date.

IV. Fiscal Impact and Cost:

We recommend using the current pay scale of the health officer as our starting point. This would put their probationary amount at \$97,259 and their final step (5) at \$114,214.

In the past when we studied it, we found it is in the middle range of compensation for local health departments of similar in size and complexity to MMDHD. Obviously, the personnel committee can amend this during negotiations if required.

V. Recommendations:

The position has already been posted with your approval on the main job boards for local public health including NACCHO, ASTHO and MALPH. Applications are starting to come in.

We recommend the Board should follow past practices of MMDHD and stand up a diverse search committee representing various stakeholders.

1. The personnel committee. We think the Board members should be limited to 3 unless the Board wants to conduct the interview as open meetings. Open interviews are not an unheard-of practice but might limit applications.
2. A representative of Local Health Services at MDHHS such as Orlando Todd or Laura de la Rangelje. This is because MDHHS must approve the finalist.
3. We recommend including another local health officer, especially one of our two Mid-Central partners, either Steve Hall or Kevin Hughes.
4. One member of the health department administration (not an internal candidate).

This would give us a six-person interview panel. The initial group of applications could be sorted and ranked by our local health and MMDHD panel members. Then the entire group of six could meet to select the applicants to interview. We also recommend that for a position like this it could be important to conduct second round interviews, even if only to confirm impressions of a favored finalist. Initial impressions can be misleading, and a second interview can clear up any areas of concern.

Coordinating the schedules of a six-person panel plus the candidates will be complicated. Cindy Partlo can be tasked to manage this to keep the process moving forward.

We recommend that a hybrid model be used for the interviews. It may be valuable to meet the candidates in person and assuming everyone is vaccinated it would be safe to do so. However some panelists such as MDHHS or a Mid-Central partners might be easier to schedule if they can do so remotely.

VI. Alternatives Considered:

These recommendations constitute the past practices for hiring a health officer at MMDHD and have worked very well.

VII. Monitoring and Reporting Timeline:

STEP	WHO	ESTIMATED DATE
1. Position posted	Human Resources	May 12
2. Posting closes		June 1
3. Sort applications	MC partner and Admin	June 7
4. Select interviewees	Interview Committee	June 11
5. 1 st round interviews	Interview Committee	Week of June 14-18
6. 2 nd round if needed	Interview Committee	Week of June 21-25
7. Offer made		June 29
8. Announce new HO		July 9
9. New Health Officer Start		July 30

APRIL 2021

- The Board of Health (BOH) accepted the FY 19/20 Audited financial Statements presented by Ali Barnes, CPA from Yeo & Yeo as proposed and placed them on file.
- The BOH approved the FY 21/22 Budget Development Schedule as proposed.
- As required by the State of Michigan to upgrade the agency's outdated vision screeners, the BOH approved the purchase of three Plusoptix vision screeners as proposed at a cost of \$5,995 per unit.
- M. Cheatham was requested by the BOH to present options to the BOH in three months about how the agency intends to move forward with an employee salary survey.
- Pending the outcome of Senate Bills 353 and 354, the BOH tabled the FY 20/21 Food Service Establishment Fees to each regular BOH meeting until the \$300,000 loss in revenue for the agency is resolved.

STAFFING REPORT – MAY 2021

AS

STATUS	POSITION	BRANCH OFFICE
VACANCY	FT IT Coordinator, Clinton Branch Office, effective October 1, 2020	Clinton
SEPARATION OF EMPLOYMENT	Josephine Faber, PT (0.6 FTE) Health Educator I, Montcalm Branch Office effective April 30, 2021	Montcalm
ELIMINATION OF POSITION DUE TO TRANSFER OF GRANT	PT (0.6 FTE) Health Educator I, Montcalm Branch Office effective May 3, 2021	Montcalm
SEPARATION OF EMPLOYMENT	Marcus Cheatham, FT Health Officer, Main Office, effective date yet to be determined	Main Office
VACANCY	FT Health Officer, Main Office, effective date yet to be determined	Main Office

CHED

STATUS	POSITION	BRANCH OFFICE
VACANCY	FT P.H. Representative, Montcalm Branch Office, effective April 26, 2021	Montcalm
SEPARATION OF EMPLOYMENT	Amanda Walker, PT (0.6 FTE) P.H. Representative (COVID), Gratiot Branch Office, effective April 30, 2021	Gratiot
VACANCY ON HOLD	PT (0.6 FTE) P.H. Representative (COVID), Gratiot Branch Office, effective May 3, 2021 through September 30, 2021	Gratiot
LAYOFF	Stacey Peterman, PT (0.7 FTE) Hearing/Vision Technician, Montcalm Branch Office effective May 24, 2021 through August 27, 2021	Montcalm
LAYOFF	Jeannette Sternhagen, PT (0.7 FTE) Hearing/Vision Technician, Gratiot Branch Office effective May 24, 2021 through August 27, 2021	Gratiot
LAYOFF	Mary Wallen, PT (0.7 FTE) Hearing/Vision Technician, Clinton Branch Office effective May 24, 2021 through August 27, 2021	Clinton

EH

STATUS	POSITION	BRANCH OFFICE
SEPARATION OF EMPLOYMENT	Ethan Israels, FT E.H. Specialist I, Montcalm Branch Office/Clinton Branch Office, effective May 7, 2021	Montcalm/Clinton
NEW HIRE	Alexis Dawkins, FT E.H. Specialist I, Montcalm Branch Office effective May 17, 2021	Montcalm
NEW HIRE	Jacqueline Purcell, FT E.H. Specialist I, Montcalm Branch Office/Clinton Branch Office effective May 24, 2021	Montcalm/Clinton