

BOARD OF HEALTH

Notice of Meeting
Meeting will be held at: 10:00 a.m. Friday, November 22, 2024 Wexford County Health Department 521 Cobb St., Cadillac, MI 49601

AGENDA

A.	Call to Order (Richard Schmidt, Chair)
В.	Roll Call
C .	Review and Approval of the Agenda
D.	Review and Approval of the Board of Health Meeting Minutes - October 25, 2024
E.	Public Comment
F.	Committee Reports
	1. Executive Committee (Richard Schmidt)
	a. Board of Health 2025 Meeting Dates (Action Item)6
	2. Finance Committee (Bryan Kolk)
	a. Finance Report
	b. Approve Accounts Payable and Payroll (Action Item)
	c. Retirement System Annual Report Status (Action Item)
	d. Environmental Health Fees (Action Item)
	3. Personnel Committee (Bob Baldwin)
	a. Employee Handbook Changes 2025 (Action Item)
	4. Legislative Committee (Nick Krieger)
G.	Board of Health Presentation
	 Kalkaska County Rental Property Project - Gary Hesslink RS, Environmental Health Supervisor
H.	Administration Reports
	1. Medical Director (Dr. Jennifer Morse, MD)17
	2. Deputy Health Officer (Sarah Oleniczak)
	3. Health Officer (Kevin Hughes)20
I.	Other Business
J.	Next Board of Health Meeting
	• December 20, 2024 at 10:00 a.m.
K.	Adjournment

Public Comment Rules

- 1. At each Board of Health regular meeting that is open to the public, there shall be a public comment period. It shall be held at the beginning of the meeting following approval of the meeting agenda and previous meeting minutes.
- 2. Any individual desiring to make a public comment shall be requested to first state their name and address for the record.
- 3. Any individual will not be allowed to speak more than once during the public comment period.
- 4. Any individual may not transfer, reserve, delegate, or yield any public comment time to other individuals.
- 5. All public comments shall be directed to and through the Chairperson of the Board of Health. Individuals shall not directly address any other member of the public, other Board of Health members, or staff.



BOARD OF HEALTH

Notice of Meeting

Meeting will be held at: 9:30 a.m. Friday, October 25 2024 Wexford County Health Department 521 Cobb St., Cadillac, MI 49601

Meeting Minutes

A. Call to Order (Richard Schmidt, Chair)

Meeting was called to order by Richard Schmidt, Chair at 9:30 a.m.

B. Roll Call

Members Present: Phil Lewis, Kristine Raymond, Richard Schmidt, Jeff Dontz, Ron Bacon, Nick Krieger, Tom O'Neil, Ray Steinke, Roger Ouwinga, Bryan Kolk, Jim Maike, Paul Erickson, Robert Walker, Julie Theobald, Gary Taylor

Members Absent: Shawn Kraycs, James Sweet, Dawn Fuller,

Members Excused: Star Houston, Robert Baldwin

Staff Present: Kevin Hughes, Dr. Jennifer Morse, Sarah Oleniczak, Christine Lopez, Christy Rivette,

Max Bjorkman, Sheila Parker, Britney Wright, Katy Bies.

Guests: Representative Joseph Fox

C. Review and Approval of the Agenda

Motion by Jim Maike to approve the meeting Agenda, seconded by Ray Steinke. *Motion Carried*.

D. Review and Approval of the Board of Health Meeting Minutes – September 27, 2024

Motion by Jim Maike, seconded by Ray Steinke, to approve the September 27, 2024, meeting minutes. *Motion Carried*.

E. Public Comment

N/A

F. Committee Reports

1. Executive Committee (Richard Schmidt)

Richard Schmidt, Committee Chair, stated they did not meet and nothing to report.

Kevin Hughes stated that potential dates for the meeting in November were shared earlier in the week, it was decided that the committee will meet on Friday, November 15, 2024 at 1:00 p.m. in Cadillac.

2. Finance Committee (Bryan Kolk)

Bryan Kolk, Committee Chair, deferred to Christine Lopez

a. Finance Report - Christine Lopez presented the finance report. The provided report was only a draft and the final will be presented at the November meeting for fiscal year 2024 Cash balance is \$13 million, total assets and liabilities \$15.3 million, with an increase in fund balance of \$92,053.42. YTD total revenue \$29,7743,005.19 million and YTD expenses of \$29,650,951.77 million. The current cash balance of October 24, 2024, is over \$13 million. Accounts Payable and Payroll totaled \$3,274,834.54

b. Approve Accounts Payable and Payroll (Action Item)

Motion by Ron Bacon, seconded by Ray Steinke, to approve the accounts payable and payroll in the amount of \$3,274,834.54.

Roll Call

Phil Lewis	Yes	Kristine Raymond	Yes
Richard Schmidt	Yes	Jeff Dontz	Yes
Ron Bacon	Yes	Nick Krieger	Yes
Tom O'Neil	Yes	Ray Steinke	Yes
Roger Ouwinga	Yes	Bryan Kolk	Yes
Jim Maike	Yes	Paul Erickson	Yes
Rober Walker	Yes	Julie Theobald	Yes
Gary Taylor	Yes		
Motion Carried.			

3. Personnel Committee (Bob Baldwin)

Robert Baldwin, Committee Chair, was excused from the meeting, deferred to Kevin Hughes.

There is not much to report, at last meeting the new paid sick time rules and minimum wage increases were shared. The agency continues to monitor this and at this time the agency fulfills this requirement with the only difference being, those part-time employees who were not receiving benefits will now occur 1 hour of sick leave for every 30 hours worked. The exempt vs. non-exempt employees effected is 29 and it will go into effect on January 1, 2025.

4. Legislative Committee (Nick Krieger)

Nick Kreiger, Committee Chair, did not have any updates and deferred to Kevin Hughes.

a. 2025 DHD#10 Legislative Priorities –

Kevin mentioned that there was a small tweak in the priorities from what was provided in the packet and it is the addition of "Support continuation of funding for Kindergarten Oral Health Assessment Program"

Motion by Nick Krieger and seconded by Bryan Kolk in support of DHD#10 2025 Legislative Priorities. Motion carried.

- b. Kevin discussed Senate Bill 875 discussing immunization practices and House Bill 5911, which concerns rental halls not having to have a food license.
- c. Tentative date for the day at the Capitol is April 09, 2025.

G. Board of Health Presentation

None.

H. Program Reports

1. Community Health Division - Christy Rivette

Christy reviewed and discussed the provided report in the packet. Highlighting on the WiseWoman program which provides diabetes and cholesterol screening along with lifestyle coaching and navigation of the healthcare system for women 35-64. Christy highlighted on the LiveWell REACH (Racial and Ethnic Approaches to Community Health) for Lake, Newaygo and Oceana Counties, there were 12 applicants to be Community Champion, which are a part of the REACH leadership team, 6-7 of those applicants will be chosen. This program makes assessments within the communities on the environmental impacts of living in a healthy community.

2. Environmental Health Division - Max Bjorkman

Max reviewed the included report, there were no questions on the numbers provided. Max discussed the sanitary code and also how the agency does not support the house bill asking that there be no food license for rental halls.

3. Family Health Clinical Division - Sheila Parker

Sheila discussed the communicable disease graph and that there was a slight increase in Lyme Disease cases which is normal for that time of year. There has been an increase in Pertussis, the complications of Pertussis were discussed. Sheila stated that the division is working on outreach resources. Telehealth has been a success and looking at expanding it. The division is looking to start providing treatment of Hepatitis C. There has been an increase in ordering COVID and Flu vaccines do to demand, back to school immunizations focused on MMR. Kristine Raymond asked about flu clinic in Lake County because in the flyers that have gone out, Lake County has not been listed and it makes it seem that there isn't any in the County. Sheila stated that there is one on November 09 from 10-4 but will look at listing Lake County for upcoming flyers.

4. Family Health Home Visiting - Britney Wright

Britney highlighted that staff were recognized by the state for their outstanding performance – Denise Davis was awarded, "Systems Star Award", Samantha Brado was recognized for her contribution to data analysis for not just the agency but for the Healthy Families America State office, and Lisa Burmeister was recognized for her work providing wonderful Reflective Supervision sessions. Starting on October 1 they are able to bill for more services, which allows for more capture of reimbursement. Staff went to a hearing and vision workshop in Traverse City, and for the first time in 19 years, the hearing and vision program has received an increase in funding.

5. Family Health WIC Division - Anne Bianchi

Anne Bianchi was not present and asked Kevin to review her report. WIC met 33 out of 34 of the minimum program requirements in their Management Evaluation Review and received several special recognitions. The report also provided breast feeding and lead prevention program updates.

6. School Health Division - Katy Bies

The report was reviewed with the Board, the following was highlighted. The new Wexford AWC was ready on August 15th for the new school year and there was an official ribbon cutting on October 10th. The fourth quarter data tables were reviewed. The new Manton Wellness Center is open to the students, grades pre-k to 12. Mesick and Manton used to share and now they both have their own full-time wellness centers. The McBain Wellness Center had its Child and Adolescent Health Program Site Visit in September and received an A grade, which means that a site visit won't have to happen for another five years.

I. Administration Reports

1. Medical Director - Dr. Jennifer Morse, MD

Dr. Jennifer Morse, Medical Director, provided a report on the risks of Halloween as they relate to Public Health. Dr. Morse recommendations include:

- Children should trick-or-treat with an adult and add reflective features to costumes.
- Promotion of safe use habits.
- Try to focus away from food on Halloween. Consider other events or alternatives to candy. Help children ration their candy intake or consider donating a portion of candy to our troops at Operation Shoebox.

Motion by Ron Bacon and seconded by Bryan Kolk, to approve Dr. Morse recommendation. *Motion Carried*.

2. Deputy Health Officer - Sarah Oleniczak

Sarah Oleniczak, Deputy Health Officer, reviewed the report provided, highlighting that the PHWINS survey is coming to an end and final data results will be available in the spring. The North Central Community Health Innovation Region (NCCHIR), in partnership with Healthy Places by Design, is hosting a social connectedness workshop. This half day session will explore community assets, drivers of social isolation, and generate solutions through collaborative action. This initiative is funded through our SDOH Hub grant from MDHHS which ends in December and aligns with the NCCHIR's strategic directions and Community Health Improvement Plan as well as aligning with their SDOH Accelerator Plan to address Chronic Disease. The MiThrive CHNA initiative recently finalized its community survey collection. Staff are working to clean up the data and a final summary of data collected by county should be available to share by next month. Work between now and the end of the year includes formally sharing the outcomes of the community input, development of issue briefs on the findings of both the primary and secondary data, prioritization of the issues to identify the top 3-5 by CHIR region, development of written reports for each health system and each local health department across the 31 counties (reports are due to organizations during the first quarter of 2025.

3. Health Officer - Kevin Hughes

Kevin Hughes, Health Officer, presented the standing agenda items.

• Epi team — EEE in an equine that was deceased and West Nile case in Crawford. PFAS- There is an upcoming townhall meeting in Cadillac. There has been some push back that the health department isn't providing assistance, Kevin wanted to mention that blood and any healthcare management is not provided by the health department, rather, that it is between the individual and their primary care physician.

- Enforcement Action One location in Mason County that was sited not fit for human habitation, it was posted for five days, if the property owners do not do anything it will then be taken to the prosecutor's office.
- As a follow-up to last month discussion on the issuance of well, septic and cemetery permits, DHD#10 Environmental Health staff met with Bryan Kolk, Zoning Administrator for Bridgeton and Big Prairie Township in Newaygo County, to discuss his concerns and explore potential solutions. Changes as a result of that meeting will be implemented in those Townships to see how they work. Also, efforts will be made following the November elections, to secure space at one of the quarterly Township Administrators' meetings to discuss issues and explore potential solutions.
- At this year's Michigan's Premier Public Health conferenced, it was announced that DHD#10 had been awarded the 2024 MDHHS Director's Award to Local Public Health. DHD#10 had submitted a project titled "Substance Use Stigma Assessment and Response Project for consideration of this award.

J. Other Business

Representative Joseph Fox stated that he brought a monthly report and for those interested he had copies.

K. Next Board of Health Meeting

• November 22, 2024, at 10:00 a.m.

L. Adjournment

Motion by Jim Maike and supported by Ray Steinke, to adjourn the meeting.

Richard Schmidt adjourned the meeting at 10:45am.

F.1.a.



BOARD OF HEALTH MEETING DATES

2025

Time: 10:00 a.m. Fall & Winter

9:30 a.m. Spring & Summer

Location: 521 Cobb Street, Cadillac MI

<u>Schedule</u>		
Last Friday of the mont	h unless otherwise noted	
January 31	10:00 a.m.	
February 21*	10:00 a.m.	
March 28	10:00 a.m.	
April 25	9:30 a.m.	
May 30	9:30 a.m.	
June 27	9:30 a.m.	
July 25	9:30 a.m.	
August 22*	9:30 a.m.	
September 26	9:30 a.m.	
October 31	9:30 a.m.	
November 21*	10:00 a.m.	
December 19*	10:00 a.m.	

^{*} Due to holiday scheduling, meeting will <u>not</u> be held on last Friday.

F.2.b.

Accounts Payable

	Amount	Date
Voucher # 135	\$ 968,719.64	11/1/2024
Voucher # 137	\$ 462,262.27	11/15/2024
Total Accounts Payable	\$1,430,981.91	

Payroll

Voucher # 134/135	\$ 542,946.99	11/1/2024
Voucher # 136/137	\$ 520,136.98	11/15/2024
Total Payroll	\$1,063,083.97	

Total Expenditures

\$2,494,065.88

District Health Department #10 Environmental Health Fee Schedule

PROGRAM/PROVIDED SERVICE	Effective: January 1, 2025				
SEPTIC PERMIT (Residential)	v /				
Residential (Evaluation without a backhoe)	\$330				
Residential (evaluation with a backhoe)	\$180				
Re-Inspection/Re-Evaluation Fee	\$100				
Septic Tank Only	\$80				
Vacant Land Evaluation (without a backhoe)	\$230				
Vacant Land Evaluation (with a backhoe)	\$140				
SEPTIC PERMIT (Commercial)					
Commercial < 1000 gallons (without a backhoe)	\$330				
Commercial <1000 gallons (with a backhoe)	\$180				
Commercial > 1000 gallons (without a backhoe)	\$400				
Commercial > 1000 gallons (with a backhoe)	\$250				
WELL PERMIT					
Private/Type III	\$180				
Type II	\$350				
Type II Level 2 Assessment	\$180				
WATER LABORATORY					
Bacterial Sample	\$20				
Nitrate Sample	\$20				
MORTGAGE EVALUATION					
Septic & Well Evaluation	\$275				
Septic OR Well Evaluation ONLY	\$180				
Water Re-Sampling	\$25 + laboratory costs				
Point of Sale Report Review	\$40				
BUILDING PERMIT APPROVAL (BPA)					
Office & Field Review	\$75				
Office Review Only	No Charge				
ADMINISTRATIVE FEES					
Informal Hearing	\$150				
Appeals or Formal Hearing	\$400				
Permit Renewal/Transfer	\$30				
Management Re-Evaluation	\$100				
Plan Review – Subdivision/Condo	\$450 + \$25/site (site fee waived				
	for storage units)				
CAMPGROUNDS					
Annual Inspection	\$120				
Temporary Campground Inspection (Local Fee) \$60 + \$0.25/over :					
Temporary Campground License (State Fee – As Follows)					

District Health Department #10 Environmental Health Fee Schedule

Campground with 5-25 sites \$146 Campground with 51-75 sites \$184 Campground with 51-75 sites \$184 Campground with 76-100 sites \$221 Campground with 101-500 sites \$330 Campground with 500 sites \$734 HIS INSPECTIONS Full Inspection \$250 Partial Inspection (Septic & Well Only) \$180 Water Re-Sampling \$25 + laboratory costs OTHER FEES Sewage Contractor License Sewage Contractor License \$30 Tanning Facility License \$60, one bed only \$40 Swimming Pool/Spa Inspection Fee \$80/cach Randon Kits \$10 Body Ard Plan Review \$300 Body Ard Temporary Event \$200 PODD SERVICE Fixed Food Service \$450 Seasonal (9 months or less) \$330 Incidental**Menu limited to popcorn, hot-dogs, hand-dipped ice cream, fountain pop. coffee, soft prefets, and satellite facilities with no food preparation** \$180 Transitory (Fee set by the State) \$155 Lic	TEMPORARY CAMPGROUND FEE SCHEDULE FOR	2 2024 (State Fee Amount)
Campground with 51-75 sites \$184 Campground with 76-100 sites \$221 Campground with 175-100 sites \$330 Campground with 1-500 sites \$734 HHS INSPECTIONS Full Inspection (Septic & Well Only) \$180 Water Re-Sampling \$250 Partial Inspection (Septic & Well Only) \$180 Water Re-Sampling \$25 + laboratory costs OTHER FEES Sewage Contractor License \$30 Saming Facility License \$60, one bed only \$40 Swimming Pool/Spa Inspection Fee \$80/cach Randon Kits \$10 Body Art Plan Review \$300 Body Art Plan Review \$300 Body Art Temporary Event \$200 FOOD SERVICE Fixed Food Service \$450 Seasonal (9 months or less) \$330 Incidental **Menu limited to popcorn, hot-dogs, hand-dipped/ice cream, fountain pop, coffee, soft prezels, and satellite facilities with no food preparation** \$180 Inspection \$90 Mobile <td>Campground with 5-25 sites</td> <td>\$109</td>	Campground with 5-25 sites	\$109
Campground with 101-500 sites \$330 Campground with 101-500 sites \$330 Campground with 500 sites \$734 HHS INSPECTIONS \$250 Full Inspection (Septic & Well Only) \$180 Water Re-Sampling \$25 + laboratory costs OTHER FEES Sewage Contractor License \$30 Tanning Facility License \$60, one bed only \$40 Swimming Pool/Spa Inspection Fee \$80/ceach Randon Kits \$10 Body Art Plan Review \$300 Body Art Annual Inspection \$200 Body Art Annual Inspection \$200 FOOD SERVICE Fixed Food Service \$450 Seasonal (9 months or less) \$330 Incidental**Menu limited to popcorn, hot-dogs, hand-dipped ice cream, fountain pop. coffee, sofi pretzels, and satellite facilities with no food preparation** \$180 Transitory (Fee set by the State) \$155 License \$155 Inspection \$90 Mobile \$135 Mobile Commissary \$100 TEMPORARY – Application Received le	Campground with 26-50 sites	\$146
Campground with 101-500 sites \$734	Campground with 51-75 sites	\$184
Campground with >500 sites \$734 HHS INSPECTIONS \$250 Partial Inspection (Septic & Well Only) \$180 Water Re-Sampling \$25 + laboratory costs OTHER FEES \$30 Sewage Contractor License \$60, one bed only \$40 Swimming Pool/Spa Inspection Fee \$80/each Randon Kits \$10 Body Art Plan Review \$300 Body Art Plan Review \$300 Body Art Temporary Event \$200 FOOD SERVICE Fixed Food Service Fixed Food Service \$450 Seasonal (9 months or less) \$330 Incidental**Menu Inmited to popcorn, hot-dogs, hand-dipped ice cream, fountain pop, coffee, soft pretzels, and satellite facilities with no food preparation** \$180 Transitory (Fee set by the State) \$155 License \$155 Inspection \$90 Mobile \$135 Mobile Commissary \$100 TEMPORARY – Application Received less than 7 business days prior to an event Fee Exempt \$60 Non-Profit \$120 Profit	Campground with 76-100 sites	\$221
Campground with >500 sites \$734 HHS INSPECTIONS \$250 Partial Inspection (Septic & Well Only) \$180 Water Re-Sampling \$25 + laboratory costs OTHER FEES \$30 Sewage Contractor License \$60, one bed only \$40 Swimming Pool/Spa Inspection Fee \$80/each Randon Kits \$10 Body Art Plan Review \$300 Body Art Plan Review \$300 Body Art Temporary Event \$200 FOOD SERVICE Fixed Food Service Fixed Food Service \$450 Seasonal (9 months or less) \$330 Incidental**Menu Inmited to popcorn, hot-dogs, hand-dipped ice cream, fountain pop, coffee, soft pretzels, and satellite facilities with no food preparation** \$180 Transitory (Fee set by the State) \$155 License \$155 Inspection \$90 Mobile \$135 Mobile Commissary \$100 TEMPORARY – Application Received less than 7 business days prior to an event Fee Exempt \$60 Non-Profit \$120 Profit	Campground with 101-500 sites	\$330
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Partial Inspection (Septic & Well Only) \$180	• =	
Partial Inspection (Septic & Well Only) \$180	Full Inspection	\$250
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Seasonal (9 months or less) \$330		\$200
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	Food Processing Fee	
		No Charge



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Website: www.dhd10.org Facebook: healthdept10

Locations:

Crawford County Office 501 Norway Street Suite #1 Grayling, MI 49738 (989) 348-7800

Kalkaska County Office 625 Courthouse Drive Kalkaska, MI 49646 (231) 258-8669

Lake County Office 5681 S. M-37 Baldwin, MI 49304 (231) 745-4663

Manistee County Office 385 Third Street Manistee, MI 49660 (231) 723-3595

Mason County Office 916 Diana Street Ludington, MI 49431 (231) 845-7381

Mecosta County Office 14485 Northland Drive Big Rapids, MI 49307 (231) 592-0130

Missaukee County Office 6180 W. Sanborn Road Suite #1 Lake City, MI 49651 (231) 839-7167

Newaygo County Office 1049 Newell Street White Cloud, MI 49349 (231) 689-7300

Oceana County Office 3986 N Oceana Drive Hart, MI 49420 (231) 873-2193

Wexford County Office 521 Cobbs Street Cadillac, MI 49601 (231) 775-9942 November 22, 2024

My signature below documents the support of the District Health Department #10 Board of Health for the continued utilization of the existing organizational Personnel Policies and the Employee Handbook for the period of January 1, 2025 – December 31, 2025. Questions related to these polices and Handbook can be directed to either Kevin Hughes, Health Officer, or Julie Hilkowski, HR Manager.

Richard Schmidt
District Health Department #10
Board of Health - Chairperson

Date

DHD#10 EMPLOYEE HANDBOOK: FY 2024 CHANGES

	Heading		Change
(s)		ent	
11	Tuberculin Tests and Employee Immunizations Strike other and replace with applicable Add medical and or a religious exemption Strike last sentence in third paragraph		ADD/change/delete: All other applicable All employees will be required to have the flu vaccine annually unless there is a medical contraindication which is verified by their physician or a religious exemption. All contraindications will be reviewed by the Medical Director.
12	Criminal Background Check	Every two years to every year	ADD/change/delete: Certain Criminal and Employee Background Checks may will occur a minimum of every year two year s for some employees due to program agreements/responsibilities.
18	Office Hours/Closing Office	Normal Office Hours	ADD/change/delete: or in tandem with other governmental office practices at particular locations. For example — If the other governmental units are 8:30am to 5:30pm, the Agency hours will be the same. School based locations hours may be different than normal office hours.
	Weather Related Closings	sentenc e	ADD/change/delete: If an employee is working remotely from home and the office is closed, the expectation is for them to continue to work their full day.
19	Attendance and Punctuality	paragra	ADD/change/delete: Any leave that is under the care of a physician for three days or more than three days may require a return-to-work slip.
23	Political Activity	Added to the end	ADD/change/delete:

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24	Dress Code and Appearance	Section	Other items that are not related to the Act, but are prohibited: • Employees may not use DHD #10 equipment or resources for making, copying or distributing political materials or messages. • Fundraising. • Circulating petitions. • Soliciting votes • Demonstrating Political messages that are inappropriate or offensive to co-workers are prohibited. Harassment of co-workers, customers or vendors regarding political preferences will not be tolerated. ADD/change/delete:
24		Section deleted and reword ed	Dress Code and Appearance You create the image many people will have about District Health Department #10; therefore, you should utilize good judgment in determining your dress and appearance. Employees of DHD #10 are expected to present a clean and professional appearance while conducting business, in or outside of the office. Dressing in a fashion that is clearly unprofessional, that is deemed unsafe, or that negatively affects DHD #10's reputation or image is not acceptable. Dress in the office is business professional or business casual and is expected to be tasteful and appropriate. In keeping with this, every employee is expected to present a neat, conservative, well-groomed, professional appearance. The following guidelines apply to all employees: - Employees should practice excellent personal hygiene and their clothing should be neat, clean, in good repair, and fit appropriately. If you have questions regarding appropriate work attire, please see your supervisor. - Examples of appropriate business wear include: dress slacks/skirts, dress shirts/blouses, business pantsuits. Jeans, may be worn on casual Fridays. Participation is voluntary in each of the offices through out the 10 counties. An office may choose to collect a voluntary donation to be used at the discretion of the staff in that office. - Examples of inappropriate attire include (this list is not all inclusive): revealing attire, sweatpants, "beach" sandals, hats (including visors and bandanas), biking shorts, tank tops, midriff shirts, shirts with spaghetti straps, tattoos and facial piercings. Tattoos and piercings may be allowed with minimal appearance. Directors have the responsibility to
			 address this individually with staff. Employees may be sent home to change their clothing if they report to work in improper attire. The employee will not be paid for that time. Employees may be required to meet special dress standards based on the nature of their job. Dress at client sites should be in accordance with client's business.

Dress Code and Appearance

You create the image that many people will have about District Health Department #10; therefore, you should utilize good judgment in determining your dress and appearance. Employees of DHD #10 are expected to present a clean and professional appearance while conducting business, in or outside of the office. Dressing in a fashion that is clearly unprofessional, that is deemed unsafe, or that negatively affects DHD #10's reputation or image is not acceptable. Dress in the office is business casual and is expected to be tasteful and appropriate. In keeping with this, every employee is expected to present a neat, well-groomed, professional appearance.

The following guidelines apply to all employees:

- Employees should practice excellent personal hygiene and their clothing should be neat, clean, modest, in good repair, and fit appropriately. If you have questions regarding appropriate work attire, please contact your supervisor/director.
- Employees may be required to meet special dress standards based on the nature of their job. Dress at community events should be in accordance with the employee's business.
- Examples of appropriate business casual wear include:
 - Dress slacks/skirts
 - Dress shirts/blouses
 - o Dresses must be knee length.
 - Jeans that are clean, wrinkle-free, not faded and with no rips/tears/holes.
 - Tops worn with jeans must follow the business casual protocol or have the DHD #10 logo on them.
 - Sweatshirts can ONLY be worn on casual Fridays and must be clean, neat, hole free and appropriate for the office – no inappropriate sayings. Employees working out in the field may wear sweatshirts for warmth – same quidelines apply for what can be worn.
 - Business casual shorts may be worn by staff that are out in the heat or in the field on warm days during the summer months (May-September). Shorts must not be of jean material, and not tight fitting. Shorts must reach mid- thigh.
 - o If wearing leggings, the bottom hem of shirt/tunic must reach mid-thigh.
 - Shoes must be appropriate and follow guidelines for your position

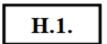
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	An office may choose to collect a voluntary donation on Fridays to be used at the discretio of the staff in that office. Examples of inappropriate attire include (this list is not all-inclusive): Revealing attire Sweatpants/joggers Tracksuits Beach" sandals/slides and flip flops Biking shorts Tank tops Midriff shirts Shirts/sweatshirts with inappropriate sayings Dresses or shirts with spaghetti strap No open toe shoes in clinic areas or inappropriate footwear related to the duties of your position Tattoos/Piercings -factors that HR Manager/Health Officer will consider when determining whether jewelry or tattoos pose a conflict with the employee's job or work environment include: Personal safety of self or others, or damage to company property. Productivity or performance expectations. Offensiveness to co-workers, customers, vendors, or others in the workplace. Customer complaints.
	If HR manager/health officer determines an employee's jewelry or tattoos present such a conflict, the employee will be encouraged to identify appropriate options, such as removal of excess or offensive jewelry, covering of tattoos, transfer to an alternative position, or other reasonable means to resolve the conflict. Directors and/or supervisors have the responsibility to address all items listed under the dress code and appearance section of this handbook individually with stawith exception to tattoos and piercings which will be addressed by HR manager/health officer. Employees may be sent home to change their clothing if they report to work in improper attire. The employee will not be parfor that time.

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Professional memberships are not include and are must be approved by an employee's response DHD #10.	ee's director
41 Time Off Benefits Holiday ADD/change/delete	

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43	Bereavement Leave	Last Paragra ph	ADD/change/delete With director approval, employees may request one day without pay to attend the funeral of others may use PDO or Personal Days to attend the funeral of others.
44	Donating Blood	1 st paragra ph	ADD/change/delete If approved by health officer, time covered is for the blood draw only – not for travel time.

Policies	
Pregnancy Workers Fairness Policy	Revised 2024



Report to the Boards of Health

Jennifer Morse, MD, MPH, FAAFP, Medical Director



Mid-Michigan District Health Department, Wednesday, November 27, 2024 Central Michigan District Health Department, Wednesday, November 20, 2024 District Health Department 10, Friday, November 22, 2024

Lead and Universal Testing Laws

With few exceptions, lead is no longer used in the US and Europe. Our exposure to lead in the US has dropped more the 95% since the 1970s but the amount of lead in our bodies is still 10 to 100 times higher than humans from preindustrial times, or pre-1800s. There may still be lead in older paint, water fixtures, coming from water lines, in the soil from deposits of leaded gasoline, and in the air from industrial emissions. Other countries still use lead in a wide range of things, including in pottery, spices, candies, and cosmetics. Worldwide one in three children have lead poisoning.

Chronic low-level lead poisoning is still a potential in the US. In adults, this is a risk factor for cardiovascular disease, chronic kidney failure, and hypertension. In pregnant women, it is a risk factor for preterm birth. Lead exposure in children is associated with learning disabilities, decreased intelligence, and behavioral problems, specifically attention deficit—hyperactivity disorder (ADHD) and antisocial behaviors.

There is no safe blood lead level and by the time an elevated blood lead is detected, harm may have already been done. Preventing lead exposure for occurring is the goal, and this involves removing lead from the environment.

In October 2023, two laws were passed, Public Act 146 of 2023 and Public Act 145 of 2023, requiring physicians to test, or order a test, for lead in the blood of

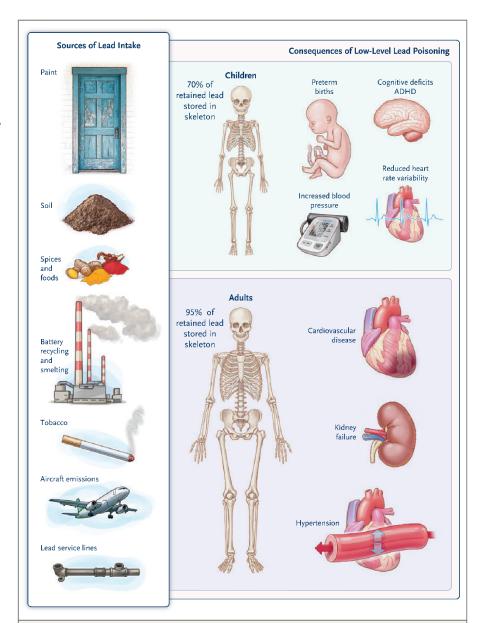


Figure 2. Sources of Lead Exposure and Health Effects of Lead Poisoning.

Many historical and current sources of lead continue to contribute to lead poisoning today. Most of the lead in human bodies is stored in bones, and long-term exposure increases the risk of preterm birth, learning and behavioral problems, hypertension, kidney failure, and coronary heart disease.

children at certain ages and with certain risk factors, and to ensure that test results are available in their immunization records. These laws added MCL 333.5474d and amended MCL 333 9206(1) to the Public Health Code. Before the laws can go into effect, Michigan Department of Health and Human Services (MDHHS) must establish administrative rules which are expected to be finished early 2025. The laws require the rules to include that, unless parents or guardians opt-out, children in Michigan have lead level testing at 1 year and 2 years of age.

In addition, if for some reason a child did not get testing when younger, they are to be tested between 2 years and 6 years of age. The rules must also identify areas in the state that are at higher risk for childhood lead poisoning and children living in these areas must have additional lead testing at the age of 4 years. The rules must also define factors that identify children at higher risk for lead poisoning, such as living in a home where other children have been diagnosed with lead poisoning or in a home that was built before 1978 and defining what intervals these children should receive any additional tests.

The CDC and American Academy of Pediatrics (AAP) do not recommend universal screening of all children, rather recommend targeted screening of children at increased risk of lead poisoning. As most sources for lead poisoning have been eliminated, the rates of childhood lead poisoning in the US have declined and identifying all children at risk can be difficult. Because of this, at least 12 other states and the District of Columbia have universal testing requirements.

Universal testing plans reduce the chance that at-risk children are missed and, by screening

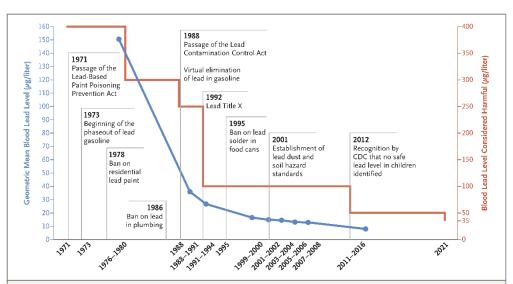


Figure 1. Mean Blood Lead Levels in U.S. Children between 1 and 5 Years of Age, Blood Lead Levels Considered Elevated in Children, and Regulations Reducing Lead Exposure.

Shown are the decline in mean blood lead levels in children from 1976 to 2008, successive reductions in blood lead levels that the Centers for Disease Control and Prevention (CDC) considered to be harmful in children, and regulations on lead contamination that were imposed between 1971 and 2001. In 2012, the CDC recognized that no safe level of lead had been identified in children. Adapted from Egan et al.²⁴ and Brown and Margolis.²⁹

all children, helps to provide the true picture of elevated blood lead levels in the state. It also makes the testing plan easier to communicate and implement for both families and the providers. Finding and addressing lead exposure early in a child's life has the potential to prevent more serious harm that could cause higher costs overall. One state with a universal testing program estimated that reducing all elevated blood lead levels in children aged one and two, identified through testing, would produce a return on investment of \$24 to \$142 for each dollar, in addition to the societal benefits both for children's health and wellbeing, and for society.

Unfortunately, universal testing and the additional follow up is costly. More testing will be done and billed to insurance. There will be more elevated levels discovered that will need follow up by public health nursing case management and lead remediation teams will be needed to remove the sources of lead. Additional funding and needed workforce were not accounted for in the new laws.

Recommendations:

- 1. If you have a child that is 1 or 2 years of age, talk to your healthcare provider about getting them tested for lead, especially if they have risk factors for exposure (listed at https://www.michigan.gov/mileadsafe/learn/lead-and-your-health).
- 2. Learn how to protect yourself and your family from potential sources of lead such as <u>Paint/Dust</u>, <u>Drinking water</u>, <u>Soil</u>, <u>Certain jobs and hobbies</u>, and <u>Household items & imported goods</u> at https://www.michigan.gov/mileadsafe/learn.
- 3. Support efforts to increase funding for statewide lead poisoning prevention, testing. (https://environmentalcouncil.org/ is one group working on this)

Sources

- Lanphear, B., Navas-Acien, A., & Bellinger, D. C. (2024). Lead Poisoning. New England Journal of Medicine, 391(17), 1621-1631.
- The Network for Public Health Law. 2019. State Lead Testing Policies for Children Note Enrolled in Medicaid: 50-State Survey. https://www.networkforphl.org/wp-content/uploads/2019/12/50-State-Survey-Lead-Screening-for-Children-Not-Enrolled-in-Medicaid.pdf
- Sager Chemicals Healthy Families. 2017. Children at Risk: Gaps in State Lead Screening Policies. https://toxicfreefuture.org/research/children-at-risk/universal-versus-targeted-screening/



Board of Health Health Officer Report

November 22, 2024

- 1. **Epi Team Update:** Information on current case counts, vaccination efforts, outbreaks and other CD related issues will be shared at the meeting.
- 2. **PFAS Update:** Site specific updates will be shared at the Board meeting based upon recent and ongoing developments.
- 3. **Enforcement Actions:** Updates on recent enforcement actions taken by DHD#10 will be shared at the meeting.
- 4. **Continuity of Operations Plan Review:** As a follow-up to a meeting with staff from the Grand Traverse County Health Department on lesson learned from their recent cyber-attack, DHD#10 will be reviewing our Continuity of Operations Plan (COOP) to assure that we are prepared with operational plans for our essential functions should we experience a similar attack.
- 5. Thank you from EGLE: Included in the Board Packet is a thank you letter from EGLE for assisting them in hosting one of the two in-person statewide soils training programs in the Cadillac office.
- 6. **Stakeholder Meetings:** We are in the process of scheduling our next Stakeholder Meeting in Manistee County for some time in early December.
- 7. **Septic Replacement Loan Program:** Effective November 15th connection to a municipal system rather than replacing a septic system, will be an allowed expense under this program.

Respectfully submitted:

Kevin Hughes, MA Health Officer



STATE OF MICHIGAN DEPARTMENT OF ENVIRONMENT, GREAT LAKES, AND ENERGY

LANSING



October 29, 2024

VIA EMAIL

Max Bjorkman District Health Department No. 10 501 Norway Street, Suite 1 Grayling, Michigan 49738-1711

Dear Max Bjorkman and Staff:

SUBJECT: Soil Trainings

The EGLE Onsite Wastewater Program would like to sincerely thank you for assisting our program in organizing and holding one of the two in-person soil trainings of 2024. We acknowledge that hosting a soil training added to the demand for your time. Without your willingness to host, these trainings would not have been possible.

Michigan's local health departments have seen an increase of new staff in the last several years. With your support, and the support of the other hosts, we were able to provide training to approximately 60 local health department staff. Over 80 percent (80%) of the attendees had less than two years of experience in environmental health. It is appreciated that meeting spaces were made available for the first day of training. The classroom sessions established that the new environmental health staff are interested in learning about the science behind wastewater treatment. Additionally, the field sites were well selected and offered a variety of soil types and educational talking points.

Thank you for your efforts and we look forward to working with your program in the future.

Sincerely,

Tanya Rule, R.S.

Environmental Manager

Onsite Wastewater Management Unit

Drinking Water and Environmental Health Division

Department of Environment, Great Lakes, and Energy

cc: Marisa Faraldo, EGLE