



2026 Board Officers:
Commissioner Leininger (Chair)
Commissioner Shaffer (Vice-Chair)

BOARD OF HEALTH Meeting

Agenda for August 27, 2026 at 9:00 AM

1. Call to Order
 - a. Opening ceremonies – Pledge Allegiance to the Flag of the United States of America
 - b. Roll Call
 - c. Approval of the Agenda*
 - d. Approval of the Minutes from July 23, 2026*
2. Public Comment - For the purpose of public participation during public hearings or during the public comment portion of a meeting, every speaker prior to the beginning of the meeting is requested but not required to provide the Board with his or her name, address and subject to be discussed. Speakers are requested to provide comments that are civil and respectful. Each speaker will be allowed to speak for no more than three (3) minutes at each public comment opportunity.
3. Health Officer's Report – pg 6
4. Medical Director's Report – pg 8
5. Departmental Reports
 - a. Personal Health & Disease Prevention – pg 11
 - b. Health Education & Promotion – pg 17
 - c. Environmental Health – pg 20
 - d. Area Agency on Aging – pg 31
6. Financial Reports
 - a. Approve Payments* - pg 33
 - b. Review Financials* - pg 36
7. Committee Reports – pg 41
 - a. Finance Committee – Approve minutes from August 17, 2026 meeting.
 - b. Program, Policy, and Appeals Committee – Approve minutes from the August 19, 2026 meeting.
8. Unfinished Business
 - a. None
9. New Business
 - a. County Appropriations – pg 44
 - b. 2027-2032 Strategic Plan – pg 49
 - c. 2027-2029 AAA Multi-Year Plan Contract RFP – pg 69
 - d. Asset Disposal Policy – pg 72

10. Public Comment

11. Commissioner Comments

12. Adjournment – Next meeting: September 24, 2026

Board of Health Training: AAA Planning Cycle

Upcoming Meeting Dates:

- September 16, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- September 21, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- September 24, 2026 @ 9:00 AM – Full Board Meeting
- November 2, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- November 4, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- November 12, 2026 @ 9:00 AM – Full Board Meeting
- December 2, 2026 @ 8:30 AM - PPA Committee (Leininger, Stoll, & Shaffer)
- December 7, 2026 @ 9:00 AM – Finance Committee (Hoffmaster, Houtz, & Collins)
- December 10, 2026 @ 9:00 AM – Full Board Meeting
- January 28, 2027 @ 9:00 AM – Full Board Meeting

2026 Board Education Schedule:

- February 27, 2025 – Regional Epidemiologist
- March 27, 2025 – Audit Presentation (during the meeting)
- April 24, 2025 – MMRMA Risk Management
- May 22, 2025 – AAA Multi-Year Plan
- September 25, 2025 – New BHSJ website
- November 13, 2025 – tbd



July 23, 2026 – Board of Health Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health meeting was called to order by Chair, Brent Leininger at 9:01 AM with the Pledge of Allegiance to the Flag of the United States. Roll call was completed as follows: Jon Houtz, Brent Leininger, Rick Shaffer, and Kevin Collins. Jared Hoffmaster and Tim Stoll were absent.

Also present from BHSJ: Rebecca Burns, Theresa Fisher, Heidi Hazel, Laura Sutter, Joe Frazier, and Kris Dewey.

Mr. Houtz moved to approve the agenda, as amended, to include item “j) P-card limit,” under new business. The motion received support from Mr. Collins. The motion passed.

Mr. Houtz moved to approve the minutes from the June 25, 2026 meeting with support from Mr. Shaffer. The motion passed.

Public Comment: No public comment was given.

Marne Daggett, MERS Regional Manager, provided a presentation on the 2026 MERS Annual Actuarial Valuation Report.

Rebecca Burns reviewed the monthly Health Officer’s Report with the following items included: Website Redesign, Community Health Improvement/Strategic Plan, MERS Annual Actuarial Valuation Report, Fund Balance, Mobile Unit, Kindergarten Oral Health, Vaccine Pricing, Compass Add-on, Wildfire Smoke & Unhealthy Air, MMRMA Request, Medical Director Agreement, Employee Satisfaction Survey Results, Staffing Update, Coldwater Office, Hillsdale Office, Sturgis Office, and Three Rivers Office.

Dr. Luparello reviewed the Medical Director’s monthly report. This month’s educational report was titled, “Cyclosporiasis”.

Departmental Reports:

- Area Agency on Aging
- Personal Health & Disease Prevention
- Health Education & Promotion
- Environmental Health

Financial Reports/Expenditures

- Mr. Shaffer moved to approve the expenditures for June with support from Mr. Collins. The motion passed.
- Mr. Houtz moved to place the financials for June on file with support from Mr. Collins. The motion passed.

Committee Reports:

- Finance Committee – Mr. Collins moved to approve the minutes from the July 20, 2026 Finance Committee meeting, with support from Mr. Houtz. The motion passed.
- Program, Policy, & Appeals Committee – Mr. Leininger moved to approve the minutes from the July 15, 2026 Program, Policy, and Appeals Committee meeting, with support from Mr. Shaffer. The motion passed

Unfinished Business:

- Mr. Leininger moved to approve the Procurement Policy, as presented, with support from Mr. Houtz. The motion passed.

New Business:

- Heidi Hazel presented the updated Vaccine Fee Schedule but no action was taken.
- Mr. Houtz moved approve the billing rate for kindergarten oral health screening, with support from Mr. Collins. The motion passed.
- Mr. Houtz moved to sell, or liquidate, the mobile unit under a policy that will be developed by the Program, Policy, and Appeals Committee. The motion received support from Mr. Collins. The motion passed.
- Mr. Collins moved to approve the purchase of the Compass Data System add-on for Information & Assistance and Options Counseling, with support from Mr. Shaffer. The motion passed.
- Mr. Collins moved to approve the Medical Director contract with support from Mr. Houtz. The motion passed.
- Mr. Leininger moved to approve and place on file the Community Health Needs Assessment, with support from Mr. Shaffer. The motion passed.
- Mr. Leininger moved to approve the Health Officer Evaluation Policy with support from Mr. Collins. The motion passed.
- The Employee Satisfaction Survey Results were discussed but no action was taken.
- Theresa Fisher presented an overview of the current fund balance but no action was taken.
- Mr. Collins moved to increase the credit limit on the agency P-Cards from \$5,000 to \$10,000, with support from Mr. Houtz. The motion passed.

Public Comment: None

With no further business, the chair adjourned the meeting at 10:47 AM.

Respectfully Submitted by:

Theresa Fisher,
Administrative Services Director
Secretary to the Board of Health

PUBLIC COMMENT

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Health Officer's Report to the Board of Health for August 27, 2026

Prepared by: Rebecca A. Burns, M.P.H., R.S.

Agency Updates

Health Officer Evaluation: I am requesting that my evaluation during the meeting in September be conducted in closed session. Thank you.

ELPHS & EGLE Funding Cuts: MDHHS has notified local health departments of a \$801,500 cut in ELPHS funding for FY27. This is about a 1.1% reduction overall. Local health departments are funded using a complex funding formula and our part of the total 1.1% may be more or less than 1.1% of what we currently are receiving. Therefore, we are unable to tell you our expected reduced funding amount until officially notified by MDHHS. EGLE also received a reduction in funding that we have been advised will result in cuts to those programs that we directly contract with that state agency. EGLE programs include Noncommunity Water Supply, Swimming Pools, Campgrounds, Septage Waste Hauling & Disposal. We also cannot predict the amount and await official notification from EGLE.

Appropriations: The agency is requesting for an increase in local appropriations. The Finance Committee moved this item to the full board meeting.

AAA Multi-Year Plan RFP: Every three years the Area Agency on Aging IIIC goes through a process of reevaluating needs of residents in Branch and St. Joseph county and then putting a request for proposal grant process for providers on available state and federal funds. The Program, Policy, and Appeals committee reviewed the bids, only one bid was competitive, and has made recommendations for board adoption at the meeting.

Asset Disposal Policy: The updated asset disposal policy is an action item for the meeting.

Website Redesign: At the September board meeting for the scheduled education; the topic will be the new website. An overview of the new and ADA compliant website will be reviewed and the section for Board of Health members will be demonstrated.

Community Health Improvement/Strategic Plan: The Strategic Plan has been completed and will be before the Board for adoption at the meeting. The Community Health Improvement Plan is nearly completed.

Staffing Update: The agency is currently seeking an Environmental Health Sanitarian for the St. Joseph County office and one for the Branch County office.

Coldwater Office: We have now had 2 contractors out to provide an estimate for duct cleaning at this office. I will be requesting a meeting with Frank Walsh once I have both estimates to discuss next steps and the 60/40 split in cost.

Hillsdale Office: A plumbing concern in the MCDC suite that shut-down business for 3 days last week has been resolved. A new transfer pump was installed and the alarm system battery was changed along with a snake of plumbing lines. I have been advised that the county is putting together a maintenance schedule for this suite that is intended to prevent another occurrence. We have two planned

maintenance items for this next year; a new roof for the original Hillsdale building (excludes the MCDC suite) and repair to the concrete sidewalk in front of the MSUE entrance. We will be preparing a request for bid process for the roof soon.

Sturgis: Nothing at this time.

Three Rivers Office: We are moving from 255 N US131 to 1110 Hill St on Friday, September 4th. That day our EH office in St. Joseph county will be closed. We will conduct clinical services in Sturgis, not Three Rivers, that day. We will reopen at 1110 Hill St at 8 am on Tuesday, September 8th. As of Thursday, August 20th the exterior of the west end of the building is nearing completion. The glass door and window repairs are scheduled to begin the week of August 24th. The HVAC contractor advised that they would be finished on August 20th and calling for final inspection. Yet to be completed besides above is drywall and finishing, new window blinds, paint, interior finish plumbing and electrical, carpet, then set-up of offices with new furniture and equipment. I have requested an estimated completion of the west end and been told mid to late October.

MEDICAL DIRECTOR'S REPORT

August 2026

1. Watching numbers of communicable diseases.
2. Director and Administrator meetings, in person and zoom.
3. Meetings via zoom and teleconference with several associations.
4. Continuing treatment of multiple patients.
5. Continued telephone conversations with area providers.
6. Vaccination and Tuberculosis subcommittees for the Michigan Association of Public Health and Preventive Medicine Physicians.
7. Continuous review of policies.

SWINE INFLUENZA

Swine influenza or swine flu is a respiratory disease, caused by type A influenza, that regularly causes outbreaks in pigs.

Outbreaks in pigs causes widespread illness, but rarely deaths. The virus circulates in pig herds throughout the year but outbreaks typically occur during the late fall and winter months.

These viruses do not typically infect humans, bur rare human cases have occurred.

Like influenza viruses in humans and other animals, swine flu viruses change constantly.

Pigs can be infected by avian and by human influenza. When viruses from different species infect pigs, the viruses can reassort and new viruses that are a mix of swine, human and/or avian influenza viruses can emerge.

SIGNS AND SYMPTOMS

- fever
- depression
- coughing (barking)
- discharge from the nose or eyes
- sneezing or breathing difficulties
- eye redness or inflammation
- and going off feed.

HOW IT SPREADS

Flu A viruses spread among pigs in the same way that human flu viruses spread among people. That is mainly through droplets containing flu A virus that spread through the air when infected pigs cough or sneeze. Swine flu viruses can also be spread among pigs mostly through close contact and possibly from contaminated objects moving between infected and uninfected pigs. Pigs also can be infected by flu A viruses from their human caretakers.

Infected swine herds, including those vaccinated against swine flu, may have sporadic disease, or may show only mild or no symptoms of infection.

VACCINES

Just as there are influenza vaccines for people, there are specific swine influenza vaccines available for pigs.

Flu vaccines for pigs can help reduce the risk of pigs getting flu but may not be 100% effective. Sometimes, flu vaccines used in pigs may not protect against the virus or viruses that are spreading in pigs, because the vaccine virus may not match the influenza A virus that is circulating in the pigs.

ANIMAL IMPACT

H1N1 and H3N2 swine flu viruses regularly occur among pig populations in the United States. Swine flu is something that the industry deals with routinely.

Preventing the spread of influenza viruses between pigs and their caretakers

- Animal caretakers who are at higher risk of serious flu complications should avoid pigs and swine barns if possible.
- If animal caretakers at higher risk of serious flu complications cannot avoid exposure to pigs, they should wear a well-fitting mask that covers the nose and mouth (e.g., an N95 respirator or KN95 respirator if available, or if not available, a surgical mask) when around pigs to reduce the risk of exposure to influenza A viruses from pigs. Animal caretakers at higher risk should also wash their hands with soap and running water before and after exposure to pigs or a swine barn. If soap and water are not available, use an alcohol-based hand rub.

Personal Health and Disease Prevention: August 27, 2026

Heidi Hazel, BSN, RN

Communicable Disease:

Data from our regional epi's.

Here is a link to the Respiratory Illness Dashboard: [Respiratory Illness Dashboard](#). Activity is still low in Michigan. COVID-19 is beginning to show early signs of growth in the western and southern regions of the United States.

Measles: As of August 7th there have been 2,465 confirmed measles cases in the United States for 2026. Per the CDC, 7% of those have been hospitalized. There have been 15 confirmed cases in Michigan. A confirmed case from Osceola county was announced in an unvaccinated child on August 5th.

Rabies: Currently 1 skunk and 31 bats. [2026 Rabies Positive Animals in Michigan](#). We have recently seen an increase in bats being brought into the agency for rabies testing.

Ebola: As of August 7th there have been 4,209 confirmed cases and 1,916 deaths. It is being recognized as the second largest outbreak on record.

Cyclosporiasis: As of August 6, there have been 12,485 reported cases of cyclosporiasis, including 279 hospitalizations and two deaths. The deaths were associated with dehydration in patients with significant underlying health conditions. Peak cases occurred between July 5 and July 11, with 86% of these cases traced to Taco Bell.

Cases from 05/10/2026-08/06/2026

- **Branch: 17**
- **Hillsdale: 68**
- **St. Joseph: 48**

Salmonella: The CDC is investigating a multistate outbreak of Salmonella linked to jalapeno peppers. These were being served at Chipotle Mexican Grill and QDOBA. There have been 345 cases and 36 hospitalizations across 27 states, including Michigan. These jalapeno peppers were grown in Sinaloa, Mexico and distributed by Coast Citrus Distributors.

Immunizations/STD/HIV:

The MCIR Modernization did successfully launch on August 10th. Seems to be going smoothly with minimal hiccups. The reporting feature is different with the new MCIR system, and the report I need to generate my clinic statistics was not working. As a result, I was unable to provide the data for the month of July. A ticket has been submitted to address the issue, and I will provide the July data with next month's report.

The agency recently completed a record audit for the STI program, which went very well. The following week, we participated in a virtual site visit for our Counseling, Testing and Referral (CTR) and STI

clinical programs. The site visit included a role-playing component in which staff demonstrated the testing process, as well as an assessment of the clinical environment and a review of our policies and protocols. Overall, the site visit went well and provided an opportunity to demonstrate our processes and ensure we are meeting program requirements.

Women, Infant, and Children (WIC):

We have hired a new International Board-Certified Lactation Consultant (IBCLC) to support our breastfeeding and lactation services. The IBCLC is the highest professional certification in lactation care and provides specialized clinical expertise in assessing and addressing complex breastfeeding and feeding concerns, including latch difficulties, milk supply, and other challenges that may impact successful breastfeeding.

Children's Special Health Care Services (CSHCS), Hearing/Vision and KOHA:

CSHCS: We continue to reach out to CSHCS clients and work closely with the Children's Special Needs Fund to help meet the needs of children with special health care needs. These funds provide financial assistance for medically necessary equipment and services when no other funding source is available. Examples of items that may be covered include van lifts and wheelchair tie-downs, platform lifts, stair lifts, ceiling lifts, home wheelchair ramps, air conditioners, therapeutic specialty bikes, and electrical service upgrades.

Hearing/Vision: Branch County GSRP roundups were held July 27–31, during which hearing and vision screenings were provided. 174 children were serviced during that event. Screenings also continue through our in-office clinics. Our full-time technicians will return on August 17.

KOHA: The KOHA program has been participating in our Back-to-School Clinics, providing Kindergarten Oral Health Assessments to children preparing for school.

Branch - Hillsdale - St. Joseph Community Health Agency
Personal Health and Disease Prevention

Confirmed & Probable Case Totals	Jun-26				FYTD 2025-2026 (Oct-Sept)				FYTD 2024-2025 (Oct-Sept)			
	BR	HD	SJ	Total	BR	HD	SJ	Total	BR	HD	SJ	Total
Anaplasmosis	0	-	-	-	-	-	3	3	-	-	-	-
Animal Bite/Rabies potential exposure	1	2	3	6	7	25	30	62	5	31	4	40
Babesiosis	-	-	-	-	-	-	1	1	-	-	-	-
Blastomycosis	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis	-	-	-	-	-	-	-	-	-	-	-	-
Campylobacter	2	4	3	9	8	8	8	24	8	8	8	24
Chicken Pox	-	3	-	3	4	3	4	11	-	-	-	-
Chlamydia	1	8	17	26	48	37	120	205	61	54	127	242
Coccidioidomycosis	-	-	-	-	-	-	-	-	-	-	-	-
CPO	-	-	-	-	-	-	-	-	-	-	-	-
CRE Carbapenem Resistant Enterobac.	-	-	-	-	1	-	-	1	-	-	-	-
Cryptosporidiosis	-	3	-	3	2	3	1	6	1	3	-	4
Cyclosporiasis	14	38	33	85	15	38	33	86	-	-	-	-
Giardiasis	1	1	-	2	2	1	-	3	1	-	1	2
Gonorrhea	-	3	3	6	10	5	38	53	6	10	40	56
H. Influenzae Disease - Inv.	-	-	1	1	1	3	1	5	-	1	2	3
Hepatitis B - Acute	-	-	-	-	-	-	-	-	-	-	2	2
Hepatitis B - Chronic	2	-	-	2	2	-	1	3	1	1	1	3
Hepatitis C - Acute	-	1	-	1	-	1	1	2	-	-	1	1
Hepatitis C - Chronic	-	1	2	3	1	6	15	22	1	4	8	13
Hepatitis C Unknown	-	-	-	-	-	-	-	-	1	-	-	1
Histoplasmosis	-	-	-	-	2	-	1	3	1	-	3	4
HIV/AIDS	1	-	-	1	2	2	-	4	1	-	-	1
Influenza	1	-	1	2	310	71	562	943	543	114	663	1,320
Kawasaki	-	-	-	-	5	-	-	5	-	-	-	-
Latent Tuberculosis	1	-	1	2	13	3	2	18	10	2	7	19
Legionellosis	-	-	-	-	7	1	4	12	7	1	5	13
Listeriosis	-	-	-	-	-	-	-	-	-	-	-	-
Lyme Disease	-	4	13	17	-	9	15	24	6	10	12	28
Measles	-	-	-	-	-	-	-	-	-	-	-	-
Menengitis - Aseptic	-	-	-	-	-	-	-	-	-	2	-	2
Menengitis - Bacterial	-	-	-	-	-	-	-	-	1	1	-	2
Meningococcal Disease	-	-	-	-	-	-	-	-	-	-	-	-
Mumps	-	-	-	-	-	-	-	-	-	-	-	-
Mycobacterium - Other	-	-	-	-	2	1	2	5	5	3	1	9
Norovirus	1	-	-	1	1	-	1	2	16	1	-	17
Novel Coronavirus	1	-	-	1	214	379	222	815	334	536	279	1,149
Pertussis	-	-	-	-	2	2	2	6	7	14	7	28
Salmonellosis	2	4	2	8	8	9	6	23	5	1	7	13
Shiga Toxin-prod. (STEC)	1	-	-	1	7	34	4	45	6	34	4	44
Shigellosis	1	-	-	1	2	-	-	2	-	-	1	1
Shingles	-	-	-	-	-	1	1	2	1	-	1	2
Staphylococcus Aureus Infect.	-	-	-	-	-	-	-	-	-	-	-	-
Strep Invasive Gp A	-	-	-	-	1	1	1	3	8	-	5	13
Strep Pneumonia Inv Ds.	-	-	-	-	4	3	8	15	1	3	2	6
Syphilis - Primary	-	-	-	-	2	-	-	2	1	-	10	11
Syphilis - Secondary	-	-	-	-	-	2	1	3	1	-	3	4
Syphilis To Be Determined	1	2	2	5	5	2	4	11	5	4	10	19
Trichinosis	-	-	-	-	-	-	-	-	-	1	-	1
Tuberculosis	-	-	-	-	2	-	-	2	1	2	-	3
Unusual Outbreak/Occurrence	-	-	-	-	-	1	1	2	-	-	1	1
VZ Infection, Unspecified	-	-	1	1	-	7	2	9	-	4	-	4
Yersinia Enteritis	-	2	2	4	-	2	2	4	-	1	1	2

Branch - Hillsdale - St. Joseph Community Health Agency
Personal Health and Disease Prevention

Jul-26						YTD 2025-2026					YTD 2024-2025				
	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total	BR	HD	ST	TR	Total
CHILD IMMUNIZATIONS															
# Vaccines Given CHA					-	756	952	583	277	2,568	1,943	1,578	553	1,526	5,600
All VFC Doses Given					-	4,655	2,303	-	4,847	11,805	5,975	3,497	157	5,611	15,240
Waivers	20	45	14	5	84	103	186	59	79	427	114	107	43	114	378
ADULT IMMUNIZATIONS															
# Vaccines Given					-	584	124	147	284	1,139	499	163	135	147	944
All AVP Doses Given					-	445	99	-	251	795	973	385	14	586	1,958
COMMUNICABLE DISEASE															
TB Tests Done					-	56	46	2	16	120	47	89	2	20	158
STD treatments	-	-	6	-	6	6	8	18	45	77	10	11	-	76	97
HIV Testing	-	2	4	-	6	3	24	22	55	104	3	17	-	77	97
ENROLLMENTS															
Medicaid & Michild	-	-	-	-	-	4	1	1	-	6	11	4	-	-	15
REFERRAL SERVICE															
MCDC Referrals	10	9	34	20	73	56	35	239	240	570	41	47	117	186	391
MIHP referrals	2	-	30	41	73	15	-	262	314	591	3	-	331	405	739
Program															
Pre-school	170	-	-	-	170	713	277	-	509	1,499	623	236	-	473	1,332
School Age	-	-	-	-	-	1,078	680	-	1,730	3,488	983	862	619	1,266	3,730
Vision Screens															
Pre-school	348	-	-	-	348	865	287	-	517	1,669	657	217	-	310	1,184
School Age	-	-	-	-	-	2,729	2,114	-	3,718	8,561	2,078	1,599	-	3,097	6,774
Children's Special Health Care Services															
Diagnostics	-	1	-	-	1	6	10	-	-	16	8	3	-	-	11
Assessments-Renewal	25	14	-	25	64	186	220	-	262	668	195	221	-	285	701
Assessments-New	8	14	-	16	38	40	158	-	77	275	32	79	-	56	167
					863					34,378					39,516
Leads completed	23	15	7	1	46	181	93	61	87	422					-
Leads >3.5	0	3	2	0	5	16	26	11	6	59					

2025 - 2026 Caseload [1] Management Report	LA #: 12
	Name: Branch-Hillsdale-St. Joseph Community Health

State Participation/Enrollment Ratio [2]:

Feb-26	Mar-26	Apr-26	May-26	Jun-26	Curr Year P/E Ratio (last 12 months)
96.0%	96.0%	96.2%	96.6%	96.2%	96.3%

Months	Enrollment [3]	Initial Participation [4]	Closeout Participation [5]	% Change in Participation [6]	Participation/ Enrollment Ratio[2]
Oct / 2024	4,449	4,160	4,195		93.50%
Nov / 2024	4,450	4,161	4,211	0.38%	93.51%
Dec / 2024	4,441	4,138	4,191	-0.47%	93.18%
Jan / 2025	4,461	4,153	4,198	0.17%	93.10%
Feb / 2025	4,373	4,079	4,127	-1.69%	93.28%
Mar / 2025	4,326	4,060	4,106	-0.51%	93.85%
Apr / 2025	4,332	4,099	4,122	0.39%	94.62%
May / 2025	4,304	4,015	4,062	-1.46%	93.29%
Jun / 2025	4,278	4,012	4,044	-0.44%	93.78%
Jul / 2025	4,277	4,073	4,091	1.16%	95.23%
Aug / 2025	4,246	4,027	4,048	-1.05%	94.84%
Sep / 2025	4,238	4,028	4,058	0.25%	95.04%
Oct / 2025	4,223	4,049	4,060	0.05%	95.88%
Nov / 2025	4,176	3,976	4,009	-1.26%	95.21%
Dec / 2025	4,099	3,901	3,930	-1.97%	95.17%
Jan / 2026	4,120	3,899	3,932	0.05%	94.64%
Feb / 2026	4,092	3,862	3,905	-0.69%	94.38%
Mar / 2026	4,112	3,884	3,901	-0.10%	94.46%
Apr / 2026	4,043	3,835	3,865	-0.92%	94.86%
May / 2026	4,043	3,826	3,849	-0.41%	94.63%
Jun / 2026	4,094	3,835	3,863	0.36%	93.67%
Jul / 2026	4,066	3,822	(est[7]) 3,921		94.00%
Aug / 2026	0	0	(est[7]) 3,940		
Sep / 2026	0	0	0		

Total (Year to date)	41,068	38,889	35,314		
Curr Year Avg	4,107	3,889	3,924	994.34%	94.26%
Months with Count	10	10	9	9	10
Average to Base %[8]		93.4%	94.28%		
Last yrs Base % [9]		105.5%	106.46%		
Last yrs Average	4,348	4,084	4,121		93.92%

Estimated average participation for current year to date:

Actual average monthly participation current year to date [10]:

3,925	Funding Allocation Information
3,924	Total Funding Allocation: \$908,156
	Assigned Funding Participation Count [11]:
	Current Yr Base: 4,162
	Previous Yr Base: 3,871

- [1] **Caseload:** The term used to refer to the number of clients being served in a given time. This is comprised of both enrollment and participation.
- [2] **Participation/Enrollment Ratio:** The number of clients participating divided by the number enrolled.
- [3] **Enrollment:** Number of clients certified to receive benefits in the given month. Final counts available for the month that just ended.
- [4] **Initial Participation:** Number of clients receiving benefits at the beginning of the month. Comparison between this and the closeout participation is indicative of the number of participants added over the course of the month. This can be used to inform staff of participation numbers at the start of the month and enable them to proactively improve participation before it is finalized.
- [5] **Closeout Participation:** Final number of clients who received benefits for the given month. Finalized approx. 5 weeks after the month ends.
- [6] **% Change in Participation:** The % difference in closeout participation when compared to the previous month.
- [7] **est:** It is the estimated participation for the given month. This is available prior to the closeout participation being available. It is a calculated value based on prior months' participation. **NOTE: Last two non 0 values are "Estimates"**
- [8] **Average to Base %:** Compares the current year average participation to the current year base.
- [9] **Last yrs Base %:** Compares last year's average participation to the last year base.
- [10] **Actual Avg. Part. For current year to date:** It is an average that includes the participation counts for all months in the current year where participation has been finalized.
- [11] **Assigned Funding Participant Count:** The value used in the calculation to determine the funding allocated to the local agency for the fiscal year. For additional details, refer to your agency's annual funding allocation letter.

AUGUST - BOARD OF HEALTH REPORT

HEALTH EDUCATION AND PROMOTION

Included in This Month's Report:

1. HEP Update
2. Community Health Worker (CHW) Update
3. Community Events
4. Social Media Update

1. Health Education & Promotion Department Update:

AJ Demond has transitioned from Health Education & Promotion to Environmental Health. We have conducted multiple interviews and hope to have a new team member starting soon.

The Health Education Team is preparing final reports for the Lock it Up program. The campaign was successful in distribution of safe storage devices and creating community awareness through our marketing campaign. We utilized our social media platforms and radio ads to support the campaign.

The Office of Highway Safety and Planning has approved our application for 2026-2027. We are excited to continue this campaign for the third year. We continue to work with our partners to support road safety and awareness. We worked with St. Joseph County Road Commission and Nottawa Township to add horse and buggy signage at the Community Youth Center. We also worked with the community to facilitate the addition of school signage to Sherman Hills school. In Hillsdale County, we are working with the Road Commission to add Horse and Buggy signage to the road segments in Reading, Camden, and Waldron areas identified as high risk.

The Health Education & Promotion team continues work on the Hillsdale County Opioid Committee's asset mapping project for substance use services. We have provided the Hillsdale County IT Department the information needed to complete the Recovery Resources webpage. We have also prepared the resource guide for printing. These will go to press once we can put the webpage address on the printed materials. Once complete, we will begin the marketing campaign to increase community awareness.

We continue our collaboration work across the three counties including Substance Abuse Task Forces, Child Abuse Prevention, Human Services Networks, Better Birth Outcomes, and Transportation.

There were 4 media stories in since the last Board of Health meeting that mentioned the agency. We have issued 1 press releases since the July Board of Health meeting. Radio Ads are running for MI Caregiver Connection and AAA. Joe Frazier, EH Director created a series of videos with Hillsdale Hospital. Topics included food safety, tick and mosquito safety and harmful algal blooms.

2. Community Health Worker Program:

The program has been very busy in the past month. We continue to receive referrals from multiple agencies across the jurisdiction. We have 40 active clients and held 15 face-to-face appointments in July. Rachel Baker left the agency on August 15, 2026 to begin her full-time position with Covered Bridge Healthcare.

The greatest needs requested were assistance with Housing or homelessness, MDHHS Services applications (Medicaid, Food Assistance, and State Emergency Relief), and Social Security applications for retirement and disability. We have been assisting residents in preparation of the changes coming from MDHHS related to Medicaid eligibility.

AUGUST - BOARD OF HEALTH REPORT

HEALTH EDUCATION AND PROMOTION

3. Community Events:

We have supported, participated, or will be participating in the following events:

- 7/10- Friendship Friday (St. Joseph County)
- 7/11- Amish Safety Day (St. Joseph County)
- 7/13 – Kings Kupboard (Hillsdale County)
- 7/17- Polish Festival (Branch County)
- 7/28- MSP Safety Day (Materials shared in Lansing)
- 8/7- Sturgis Head Start Enrollment Event (St. Joseph County)
- 8/8- Huss Community Carnival (St. Joseph County)
- 8/10- Kings Cupboard (Hillsdale County)
- 8/24- Eby Center (Branch County)
- 8/28- VA Resource Fair (Branch County)
- 9/12- Community Baby Shower (Branch County)
- 9/26- Insight Health Fair (Branch County)

Social Media Update

Social Media continues to spread our message to the community. In July, we covered the following topics:

- Fireworks/4th of July Safety
- Food Safety Tips for Gatherings
- WIC Mobile Clinics
- Tick/Mosquito Safety
- Sun Safety
- HAB Awareness
- Septic Loan Replacement Program- MI Saves
- STI Testing
- Narcan Locations
- Cyclosporiasis updates
- Water & Bike Safety
- Heat Safety/Look Before You Lock

Additionally, we support ongoing messaging of the following:

- WIC Monthly Social Media Toolkit
- Beacon Focus Groups- TR & Sturgis
- MDHHS Safe Sleep Toolkit
- Medicaid Navigation Assistance/New HMP Requirements
- BHSJ Nursing Nest
- Breastfeeding Classes
- Baby Wearing Classes
- Ready for Kindergarten Clinics

AUGUST - BOARD OF HEALTH REPORT

HEALTH EDUCATION AND PROMOTION

Social Media Data (As of August 1st, 2026)

	# of Followers Facebook & Instagram	Instagram Reach	YouTube Views Amount of times content was played or displayed	Next Door Impressions Total count of all views and related interactions.	Facebook Views Amount of times content was played or displayed.	Video # and Topic	Agency Mentions in Local Media	Boosted Activities # and Topic
July	4,509	3,700 <i>(up 20.8% from July)</i>	222 <i>(up 52% from July)</i>	11,386	108,000 <i>(up 20.8% from July)</i>	Videos shared (5): CSHCS, HPV, Bike Safety, Breastfeeding Awareness Giveaway, Heat Safety/Look Before You Lock	17	3- THC/Safe Storage, STI Testing, Routine Vaccines/Back To School.
TOTAL TO DATE Since 10/1/22	21 NEW followers since last report	40,955	367	14,391	1,647,720	97	578	55

**Branch-Hillsdale-St. Joseph Community Health Agency
Environmental Public Health Services
Report for the August 27, 2026 Board of Health Meeting
Prepared by Joseph Frazier R.E.H.S. , Director of Environmental Health**

Food Program Updates

Food staff are working hard on all of the temporary food inspections that have been taking place. Staff are also working to wrap up several plan reviews as the projects are coming to an end.

Staff conducted inspections at the Branch County Fair earlier this month. There were 19 temporary food inspections and 2 fixed food inspections. The flow of inspections and communication with the Branch County Fair Board went very well. The coordination between our Agency and the Fair Board really pays dividends, and we appreciate all of the hard work that goes into making this event successful.

Across the Tri-County area, several local food facilities have recently opened to the public:

- Reading Pizza Barn – Change of ownership

Wells, Septic, Pools, Vector, and Campgrounds

Staff across the well, septic, campground, and pool programs have been very active over the past month. In July alone, Tri-County staff issued and inspected 80 well permits and 75 septic permits.

At the time of this report, our Agency has offered the open Sanitarian position in St. Joseph County to a candidate, and they have accepted the position. They will be starting in our St. Joseph County office on September 8th.

Our open Branch County position has been filled by AJ DeMond, who was previously with Health Promotions. AJ started in the Branch County office on August 17th and has jumped right into Public Health Code and other required trainings.

EH Service Statistics Report

BRANCH - HILLSDALE - ST. JOSEPH COMMUNITY HEALTH AGENCY

ENVIRONMENTAL HEALTH SERVICE REPORT

2025/2026

	JULY				YTD 2025/2026				YTD 2024/2025			
	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL	BR	HD	SJ	TOTAL
WELL/SEWAGE SYSTEM EVAL.	-	-	-	-	5	7	2	14	2	6	27	35
CHANGE OF USE EVALUATIONS - FIELD	6	4	4	14	34	42	34	110	22	63	49	134
CHANGE OF USE EVALUATIONS - OFFICE	16	5	20	41	68	32	106	206	54	26	70	150
ON-SITE SEWAGE DISPOSAL												
PERMITS NEW CONSTRUCTION	4	6	5	15	42	59	67	168	32	74	85	221
REPAIR/REPLACEMENT	7	9	8	24	63	44	95	202	48	52	83	183
VACANT LAND EVALUATION	2	1	1	4	12	19	15	46	11	18	9	38
PERMITS DENIED	-	-	-	-	-	-	-	-	-	-	-	-
TOTAL	13	16	14	43	115	117	177	416	121	144	177	442
SEWAGE PERMITS INSPECTED	9	8	19	36	86	82	136	304	70	84	129	283
WELL PERMITS ISSUED	12	19	16	47	127	143	170	440	136	124	168	428
WELL PERMITS INSPECTED	11	12	10	33	116	151	135	402	116	93	163	372
FOOD SERVICE INSPECTION												
PERMANENT	28	16	39	83	215	217	323	755	217	224	335	776
NEW OWNER / NEW ESTABLISHMENT	-	2	-	2	13	11	16	40	9	6	18	33
FOLLOW-UP INSPECTION	-	-	-	-	6	6	6	18	2	6	10	18
TEMPORARY	12	5	9	26	40	15	51	106	40	19	54	113
MOBILE, STFU	1	5	15	21	33	27	93	153	27	31	80	138
PLAN REVIEW APPLICATIONS				-	7	9	8	24	11	5	9	25
FOOD RELATED COMPLAINTS	1	1	3	5	16	6	12	34	10	-	6	16
FOODBORNE ILLNESS INVESTIGATED	1	1	-	2	3	1	2	6	2	1	5	8
FOOD CLASSES												
MANAGEMENT CERTIFICATION CLASS	-	-	-	-	-	-	-	5	-	5	5	10
CAMPGROUND INSPECTION												
	11	2	3	16	17	2	4	23	27	6	17	50
NON-COMM WATER SUPPLY INSP.	-	8	11	19	7	33	33	83	15	18	27	60
SWIMMING POOL INSPECTION	2	-	-	2	21	12	11	44	21	15	17	53
PROPOSED SUBDIVISION REVIEW	-	-	-	-	-	-	-	-	-	-	-	-
SEPTIC TANK CLEANER	-	-	-	-	8	-	-	8	12	6	19	37
DHS LICENSED FACILITY INSP.	-	3	-	3	4	24	28	56	12	20	28	60
COMPLAINT INVESTIGATIONS	7	3	2	12	26	44	14	84	26	41	18	85
LONG TERM MONITORING	-	-	-	-	3	1	16	-	-	-	11	11
BODY ART FACILITY INSPECTIONS	-	-	-	-	3	1	10	14	4	5	10	19



570 Marshall Road
Coldwater, MI 49036
(517) 279 - 9561 ext. 106

20 Care Drive
Hillsdale, MI 49242
(517) 437 - 7395 ext. 311

1110 Hill Street
Three Rivers, MI 49093
(269) 273 - 2161 ext. 233

Inspection Type Count By County

For Date Range: 07/01/2026 - 07/31/2026

County	Inspection Type / Reason	Count
Branch County		
	<u>Food Safety</u>	
	Foodborne Illness Complaint - Initial	1
	Non Foodborne Illness Complaint - Initial	1
	Plan Review Activity - Initial	1
	Risk Based Inspection - Routine	28
	STFU Inspection - Routine	1
	Temporary Food Inspection - Routine	12
	Total # of Food Safety inspections - Branch County	44
Hillsdale County		
	<u>Food Safety</u>	
	Foodborne Illness Complaint - Initial	1
	Non Foodborne Illness Complaint - Initial	1
	Pre-Opening - Pre-Opening	2
	Risk Based Inspection - Routine	16
	STFU Inspection - Routine	5
	Temporary Food Inspection - Routine	5
	Total # of Food Safety inspections - Hillsdale County	30
St. Joseph County		
	<u>Food Safety</u>	
	Consultation - Plan Review Consultation	1
	Non Foodborne Illness Complaint - Initial	3

Inspection Type Count By County

For Date Range: 07/01/2026 - 07/31/2026

County	Inspection Type / Reason	Count
	Progress Note - New Inspection Reason	2
	Risk Based Inspection - Routine	39
	STFU Inspection - Routine	13
	STFU Pre-Opening - Pre-Opening	2
	Temporary Food Inspection - Routine	9
	Total # of Food Safety inspections - St. Joseph County	69
	<u>Total # of inspections - All counties</u>	<u>143</u>



570 Marshall Road
Coldwater, MI 49036
(517) 279 – 9561 ext. 106

20 Care Drive
Hillsdale, MI 49242
(517) 437 – 7395 ext.
331

1110 Hill Street
Three Rivers, MI 49093
(269) 273 – 2161 ext.
233

Food Establishment Inspection Report by Facility Name

For Date Range: 07/01/2026 - 07/31/2026 and Food Program

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
American Legion Post #454	Colon	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
Arby's # 5968	Three Rivers	07/21/2026	Risk Based Inspection - Routine	0	0	0	0
Asian Buffet and Sushi	Three Rivers	07/13/2026	Progress Note - New Inspection Reason	0	0	0	0
Aunt Mary's Sweets & Treats		07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
Bairds Willows Inc	Coldwater	07/01/2026	Risk Based Inspection - Routine	0	0	0	0
BEACH CONCESSIONS #82	Hillsdale	07/02/2026	STFU Inspection - Routine	0	0	0	0
BEACH CONCESSIONS #90	Hillsdale	07/02/2026	STFU Inspection - Routine	0	0	0	0
BHSJ CHA	Hillsdale	07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
Biggby 484	Sturgis	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
Biggby 592	Coldwater	07/30/2026	Risk Based Inspection - Routine	0	1	1	1
Biggby 766	Sturgis	07/23/2026	Risk Based Inspection - Routine	0	1	1	0
Bronson Kiwanis Club	Bronson	07/17/2026	Temporary Food Inspection - Routine	0	0	0	0
Bronson Nutrition	Bronson	07/21/2026	Risk Based Inspection - Routine	0	0	0	0
Bull's Holy Smoke	Sturgis	07/10/2026	STFU Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
BUNDY HILL DINER LLC	Jerome	07/23/2026	Risk Based Inspection - Routine	0	0	0	0
Burr Oak Fire Dept	Burr Oak	07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
Cavoni's	Three Rivers	07/20/2026	Risk Based Inspection - Routine	0	0	0	0
Clemens Food Group Coldwater	Coldwater	07/09/2026	Risk Based Inspection - Routine	1	0	1	0
Coach Eby Youth & Family Center	Coldwater	07/27/2026	Risk Based Inspection - Routine	0	0	0	0
Coldwater Burger King #4652	Coldwater	07/21/2026	Risk Based Inspection - Routine	0	0	0	1
Coldwater Lake Assoc	Coldwater	07/06/2026	Risk Based Inspection - Routine	0	0	0	0
Coldwater Treats DBA Dairy Queen	Coldwater	07/07/2026	Foodborne Illness Complaint - Initial	0	0	0	0
Coldwater United Methodist Church	Coldwater	07/31/2026	Risk Based Inspection - Routine	0	0	0	0
Colon United Methodist Church	Colon	07/28/2026	Risk Based Inspection - Routine	0	0	0	0
Cottage Inn Sturgis	Sturgis	07/10/2026	Non Foodborne Illness Complaint - Initial	0	0	0	4
Culvers #466	Coldwater	07/23/2026	Risk Based Inspection - Routine	0	0	0	0
Culver's #530	Sturgis	07/06/2026	Risk Based Inspection - Routine	0	1	1	0
DAD'S PLACE	Three Rivers	07/30/2026	Risk Based Inspection - Routine	1	0	1	1
Dickey's Barbeque Pit	Coldwater	07/07/2026	Risk Based Inspection - Routine	0	0	0	0
Dripping Diesel Coffee LLC	Howe	07/24/2026	STFU Pre-Opening - Pre-Opening	0	0	0	0
EL CERRITO	HILLSDALE	07/29/2026	Risk Based Inspection - Routine	0	0	0	1
El Cerrito Mexican Bar & Grill	Quincy	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
El Cerrito Mexican Restaurant	Coldwater	07/30/2026	Risk Based Inspection - Routine	1	0	1	2
El Patron Mexican Restaurant	Sturgis	07/23/2026	Risk Based Inspection - Routine	0	3	3	5
El Taco Loco II	Coldwater	07/24/2026	Temporary Food Inspection - Routine	0	0	0	0
Elks Lodge	Coldwater	07/28/2026	Risk Based Inspection - Routine	0	0	0	0
ELKS LODGE #1248	THREE RIVERS	07/31/2026	Risk Based Inspection - Routine	0	0	0	1
Firm Foundation Ministries	CENTREVILLE	07/20/2026	Temporary Food Inspection - Routine	0	0	0	0
Fisher's Ice Cream	Goshen	07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
Fiske Concessions - Cheese Curds	Brooksville	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Fiske Concessions - Cheese Curds #2	Brooksville	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
Fiske Concessions - French Fries	Brooksville	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
Fiske Concessions - Fries #2	Brooksville	07/08/2026	Temporary Food Inspection - Routine	0	0	0	0
Fiske Concessions - Lemonade	Brookesville	07/08/2026	Temporary Food Inspection - Routine	0	0	0	0
Fiske Concessions - Lemonade #2	Brookesville	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
Five Lakes Coffee INC	STURGIS	07/09/2026	Risk Based Inspection - Routine	0	0	0	0
FOE Ivanhoe Aerie 1314	Sturgis	07/17/2026	Risk Based Inspection - Routine	0	0	0	1
Fraternal Order of Eagles #1907	Coldwater	07/08/2026	Risk Based Inspection - Routine	0	0	0	0
Girard United Methodist Church	Coldwater	07/27/2026	Risk Based Inspection - Routine	0	0	0	0
GREEN VALLEY GOLF & RACQUET	Sturgis	07/29/2026	Risk Based Inspection - Routine	1	0	1	0
Healthies of Hillsdale	Hillsdale	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
HERE'S TO YOU PUB AND GRUB	HILLSDALE	07/16/2026	Risk Based Inspection - Routine	0	0	0	0
Hillsdale College Halter Center	Hillsdale	07/10/2026	Pre-Opening - Pre-Opening	0	0	0	0
Hillside Lanes & Lane 17	Hillsdale	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
Homestead Cinnamon Rolls	Colon	07/10/2026	STFU Inspection - Routine	0	0	0	0
Hoosier Mama Food Truck		07/10/2026	Temporary Food Inspection - Routine	0	0	0	0
Hoosier Mama Food Truck		07/24/2026	Temporary Food Inspection - Routine	0	0	0	0
Iyopawa Island Golf Course	Coldwater	07/08/2026	Risk Based Inspection - Routine	0	0	0	0
Janie's Donuts LLC	Lagrange	07/15/2026	STFU Inspection - Routine	0	0	0	0
Jimmy John's #3994	Three Rivers	07/20/2026	Risk Based Inspection - Routine	0	0	0	2
Jimmy John's Sturgis	Sturgis	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
Joyful Swirls	Sturgis	07/16/2026	STFU Inspection - Routine	0	0	0	0
Kate's Pizza	Centreville	07/08/2026	STFU Inspection - Routine	0	0	0	0
Katie's Ice Cream	Myakka City	07/08/2026	STFU Inspection - Routine	0	0	0	0
Katie's Strawberry Shortcakes	Myakka City	07/08/2026	STFU Inspection - Routine	0	0	0	0
KBACK	Coldwater	07/27/2026	Risk Based Inspection - Routine	0	0	0	0
Kernal Poppers	White Pigeon	07/10/2026	STFU Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Kick N Kafe	Coldwater	07/09/2026	Risk Based Inspection - Routine	1	1	2	1
KLINGER LAKE COUNTRY CLUB (Food)	Sturgis	07/29/2026	Risk Based Inspection - Routine	0	0	0	0
La Palma - Bronson Polish Festival	Sturgis	07/24/2026	Temporary Food Inspection - Routine	0	0	0	0
Lakehouse Coldwater	Coldwater	07/13/2026	Risk Based Inspection - Routine	0	0	0	2
LakeHouse Three Rivers	Three Rivers	07/01/2026	Risk Based Inspection - Routine	0	0	0	0
LEONIDAS SCHOOL	Leonidas	07/13/2026	Progress Note - New Inspection Reason	0	0	0	0
Lilly Pads BBQ LLC	Bronson	07/20/2026	STFU Inspection - Routine	1	0	1	0
Litchfield Fire Department	Litchfield	07/09/2026	Risk Based Inspection - Routine	0	0	0	0
LITCHFIELD-JONESVILLE LANES INC	Jonesville	07/30/2026	Risk Based Inspection - Routine	1	0	1	0
Little Caesars - Three Rivers	Three Rivers	07/29/2026	Consultation - Plan Review Consultation	0	0	0	0
LUIGI'S PIZZA	LITCHFIELD	07/09/2026	Risk Based Inspection - Routine	0	0	0	0
Magic Bunny BBQ	Colon	07/23/2026	STFU Inspection - Routine	0	0	0	0
Magic Lemonade	Craigville	07/24/2026	STFU Pre-Opening - Pre-Opening	0	0	0	0
Main Street Smokehouse	Mendon	07/22/2026	Risk Based Inspection - Routine	0	0	0	2
Mancinos of Coldwater	Coldwater	07/23/2026	Risk Based Inspection - Routine	0	0	0	0
Mary's Gourmet Elephant Ears	Morenci	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
McDonald's - Bronson Store 18846	Bronson	07/23/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
McDONALDS OF THREE RIVERS #2196	Three Rivers	07/30/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
MCDONALD'S-HILLSDALE	Hillsdale	07/23/2026	Foodborne Illness Complaint - Initial	0	0	0	0
Mitten Smoke BBQ	Hillsdale	07/31/2026	STFU Inspection - Routine	0	0	0	0
Montgomery Community Center	Montgomery	07/10/2026	Risk Based Inspection - Routine	1	0	0	0
Moose Lodge 677	Coldwater	07/24/2026	Risk Based Inspection - Routine	0	0	0	0
Nathan Wilber	Coldwater	07/20/2026	Temporary Food Inspection - Routine	0	0	0	0
No. 1 Chinese Food	Three Rivers	07/06/2026	Risk Based Inspection - Routine	0	1	1	0
Ohana Kalea Shave Ice	Lagrange	07/24/2026	STFU Inspection - Routine	0	0	0	0

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Olde Time Waffle cone	Constantine	07/10/2026	STFU Inspection - Routine	0	0	0	0
Ole State Line Bar	White Pigeon	07/01/2026	Risk Based Inspection - Routine	1	1	2	2
Omars Bar Inc	Coldwater	07/02/2026	Risk Based Inspection - Routine	0	1	1	0
Our Savior Lutheran Church	Union City	07/28/2026	Risk Based Inspection - Routine	0	0	0	0
PIPER'S GRINDERS GALORE	Constantine	07/21/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
Prowant Specialty Company	Dupont	07/08/2026	Temporary Food Inspection - Routine	0	0	0	0
Punjab Group Mendon Inc DBA Mendon Quick Stop	Mendon	07/13/2026	Risk Based Inspection - Routine	0	1	0	4
Quincy Golf Course	Quincy	07/21/2026	Risk Based Inspection - Routine	1	0	0	0
RACHAEL'S	White Pigeon	07/30/2026	Risk Based Inspection - Routine	1	0	1	0
RAMSHACKLE BREWING CO	Jonesville	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
Reading Pizza Barn	Reading	07/28/2026	Pre-Opening - Pre-Opening	0	0	0	0
River Lake Inn	Colon	07/17/2026	Risk Based Inspection - Routine	0	0	0	1
River Trade Brewing Co	Constantine	07/29/2026	Risk Based Inspection - Routine	0	0	0	0
Sam's Place of TR	Three Rivers	07/06/2026	Risk Based Inspection - Routine	0	0	0	1
Shorts Root Beer Drive-In	Coldwater	07/16/2026	Risk Based Inspection - Routine	0	1	1	1
Somerset Beach Campground	Jerome	07/21/2026	Risk Based Inspection - Routine	0	0	0	0
Spence Softball Complex	Sturgis	07/06/2026	Risk Based Inspection - Routine	0	0	0	0
St Anthony's Catholic Church	HILLSDALE	07/01/2026	Risk Based Inspection - Routine	0	0	0	0
St Joseph County Commission on Aging - St. Joseph County Commision on Aging	Three Rivers	07/01/2026	Risk Based Inspection - Routine	0	0	0	0
St. Edward's Catholic Church	Mendon	07/13/2026	Risk Based Inspection - Routine	0	0	0	0
ST. JOE VALLEY GOLF CLUB, INC.	Sturgis	07/17/2026	Risk Based Inspection - Routine	0	0	0	1
St. Paul's Lutheran Church	COLON	07/28/2026	Risk Based Inspection - Routine	0	0	0	0
STREET DOGS	Hillsdale	07/15/2026	STFU Inspection - Routine	0	0	0	0
Subway @ Main	Three Rivers	07/07/2026	Risk Based Inspection - Routine	0	0	0	0
Subway @ Tolbert	Three Rivers	07/07/2026	Risk Based Inspection - Routine	0	0	0	1
Subway 34903	STURGIS	07/06/2026	Risk Based Inspection - Routine	0	0	0	1

Name	Location	Date	Inspection Type/Reason	# of P	# of Pf	CDI	# of C
Sweet Basil	White Pigeon	07/10/2026	STFU Inspection - Routine	0	0	0	0
Tasteful Kreations Catering	Bronson	07/21/2026	Risk Based Inspection - Routine	0	0	0	0
The Chill Bean	CENTERVILLE	07/28/2026	Risk Based Inspection - Routine	0	0	0	0
THE GOSPEL BARN	HILLSDALE	07/15/2026	Risk Based Inspection - Routine	0	0	0	0
The Great Pages Circus	Myakka City	07/28/2026	Temporary Food Inspection - Routine	0	0	0	0
The Haven	White Pigeon	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
THE IN BETWEEN	Sturgis	07/29/2026	Risk Based Inspection - Routine	0	0	0	1
The Local Eatery	Hillsdale	07/16/2026	Risk Based Inspection - Routine	0	0	0	0
The Old Popcorn Stand	Centreville	07/07/2026	Risk Based Inspection - Routine	0	0	0	0
The Parlor Ice Cream & Coffee	Sturgis	07/17/2026	Risk Based Inspection - Routine	0	0	0	0
The Pretzel Wagon 1	Constantine	07/10/2026	STFU Inspection - Routine	0	0	0	0
The Remedy Church	Reading	07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
THE SALVATION ARMY	HILLSDALE	07/14/2026	Risk Based Inspection - Routine	0	0	0	0
The Well AC	Hillsdale	07/23/2026	Risk Based Inspection - Routine	1	0	1	0
The Yellow Daisy	Middlebury	07/27/2026	Temporary Food Inspection - Routine	0	0	0	0
TKO BBQ	Jonesville	07/23/2026	STFU Inspection - Routine	0	0	0	0
Ultzimate Eatz	Burr Oak	07/24/2026	Temporary Food Inspection - Routine	0	0	0	0
Useless Creatures Brewing Co	Three Rivers	07/10/2026	Risk Based Inspection - Routine	0	0	0	0
Vara Juice	Coldwater	07/30/2026	Plan Review Activity - Initial	0	0	0	0
VETERANS FOREIGN WARS	STURGIS	07/17/2026	Risk Based Inspection - Routine	0	0	0	2
Wendy's #4405	Hillsdale	07/06/2026	Non Foodborne Illness Complaint - Initial	0	0	0	0
Whiskey Creek Old #7	Burr Oak	07/31/2026	Risk Based Inspection - Routine	0	0	0	1
White Pigeon Fireman's Asso	White Pigeon	07/13/2026	Temporary Food Inspection - Routine	0	0	0	0
Wine About it LLC	White Pigeon	07/13/2026	Risk Based Inspection - Routine	0	0	0	0
Wing House	Coldwater	07/15/2026	Risk Based Inspection - Routine	0	0	0	0
				12	12	21	40

Food Inspection Codes

P-This indicates a priority violation which is a violation that includes a quantifiable measure to show control of hazards such as cooking, cooling, reheating and handwashing. It is in general terms a violation that can potentially lead directly to a foodborne illness.

Pf-This is a priority foundation violation which is a violation that supports a priority violation. For example, the lack of soap or towels at a handwash sink is a Pf. This supports the priority violation of not washing hands.

C- This is a core violation. This is an item that usually relates to general sanitation, operation controls and maintenance of facilities and equipment. Not cleaning floors is an example of a core violation.

CDI- This indicates a violation was observed during the inspection and was brought to the attention of the person in charge. At that time, the violation was corrected while the inspector was present at the facility.



Area
Agency on
Aging (III)
Branch-St. Joseph

August 27, 2026
Director's Report

Enclosure:

1. FY26 AAA Provider Assessment Summary
-

Updates:

1. **Services to Victims of Elder Abuse Program Updates:**

- Victim Specialists continue their work directly serving individuals in our communities, developing community partnerships, and leading monthly IDT meetings.
- Elder Justice Symposium updates: We were awarded a \$1,000 grant from the Sturgis Area Community Foundation to support food/refreshments for the day. We were approved for continuing education credits (MCOLES) for officers who attend the training!

Register today!!!! <https://survey.alchemer.com/s3/8862972/Elder-Justice-Symposium-Registration-Form>

2. **MI Options Updates:** Our team remains busy with calls, walk-ins and referrals for both Medicare Counseling and Options Counseling. The state budget for FY27 is still absent an allocation for MIOptions statewide... Advocacy is ongoing.

Welcome Savannah York, Options Counselor!

Savannah held a position in the Coldwater clinic before making the switch to the Area Agency. She has a great background in communication and is eager to support individuals to learn about long-term care options and navigate health insurance.

3. **Don't forget!** MICaregiver Connection: www.micaregiverconnection.com is a great resource for all Michigan families! Radio ads have begun to promote MICaregiver Connection locally. Transit authority bus wrap ads are on both BATA and StJoe Transit busses! Keep an eye & ear out!
4. **FY2025 Provider Assessment Summary** is enclosed for your review. Assessments went great this year, noting a few recommendations with a few providers. Should you have any questions or if you would like a copy of any provider's letter, please let me know.
5. **FY2027-2029 Annual Contract Request for Proposals** Thank you to the PPA Committee, Commissioners Stoll, Leininger and Shaffer, for helping us develop recommendations for today's Board Meeting. We appreciate your time and consideration of the great proposals received! The grants, totaling nearly \$775,000, will support hundreds of older adults and family caregivers live more independently in their homes and communities!

**Fiscal Year 2025-2026
Summary of Annual Provider Monitoring Visits
Presented to the Board of Health on August 27, 2026**

Agency Name	Date of Assessment	Fiscal Findings	Program Findings	Program and/or Fiscal Recommendations
Branch Area Transit Authority	05/15/2026	None	None	None
Branch County Commission on Aging	05/18/2026	None	None	Recommendation: (program) work w/ contracted meal vendor to review menus/components to ensure full compliance with ACLS Bureau Operating Standards for Nutrition Programs.
Legal Services of South Central MI	06/05/2026	None	None	None
St. Joseph County Commission on Aging	06/30/2026	None	None	Recommendation: (fiscal) book expenditures and payment for those expenditures in the same month the expenditures occurred.
St. Joseph County Transit Authority	05/29/2026	None	None	Recommendation: (fiscal) book expenditures and payment for those expenditures in the same month the expenditures occurred.

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 7/1/2026 Through 7/31/2026

Payee	Check Amount	Check Number	Effective Date
4Imprint	867.99	55232	7/24/2026
Action Quick Print Plus	98.00	26.07.24 A.01	7/24/2026
Aflac Group Insurance	2,190.63	26.07.31 R.01	7/31/2026
Alert Medical Alarms	169.70	55233	7/24/2026
Amazon Capital Services, Inc	351.76	26.07.10 P.01	7/10/2026
Amazon Capital Services, Inc	8,583.24	26.07.24 P.02	7/24/2026
Angela Shedd	3,200.00	26.07.10 A.01	7/10/2026
Angela Shedd	2,740.00	26.07.24 A.02	7/24/2026
Barbara Krzyzanski	297.50	26.07.10 A.02	7/10/2026
Barbara Krzyzanski	262.50	26.07.24 A.03	7/24/2026
Barbara P. Foley	46.16	55218	7/3/2026
Barbara P. Foley	46.16	55230	7/17/2026
Barbara P. Foley	46.16	55245	7/31/2026
Beacon Properties Administration	4,533.45	26.07.24 A.04	7/24/2026
Bison Grafix	375.00	55220	7/10/2026
Branch Area Transit Authority	1,769.17	26.07.24 A.05	7/24/2026
Branch County Clerk	10.00	55234	7/24/2026
Branch County Commission	37,840.07	26.07.24 A.06	7/24/2026
Branch County Complex	5,694.28	26.07.24 A.07	7/24/2026
BRANCH HILLSDALE ST. JOSEPH	75.00	26.07.24 A.08	7/24/2026
Card Services Center	3,950.14	26.07.24 P.06	7/24/2026
Century Bank - Hillsdale Maintenance	2,000.00	26.07.24 A.09	7/24/2026
Century Bank - Three Rivers Maintenance	2,000.00	26.07.24 A.10	7/24/2026
Century EFTPS	29,227.72	26.07.03 R.01	7/3/2026
Century EFTPS	30,424.46	26.07.17 R.01	7/17/2026
Century EFTPS	29,598.06	26.07.31 R.02	7/31/2026
Century FSA	129.00	26.07.03 R.02	7/3/2026
Century FSA	129.00	26.07.17 R.02	7/17/2026
Century FSA	129.00	26.07.31 R.03	7/31/2026
Century Mastercard	1,367.36	26.07.10 P.02	7/10/2026
Century State/Michigan State Treasury	16,035.75	26.07.31 R.04	7/31/2026
Cintas Corporation Loc 351	104.55	26.07.10 P.03	7/10/2026
City Of Coldwater	40.00	26.07.24 A.11	7/24/2026
City of Jonesville	280.00	26.07.24 A.12	7/24/2026
City Of Three Rivers	101.82	55221	7/10/2026
City Of Three Rivers	102.48	55222	7/10/2026
CLIAwaived Inc.	3,640.00	26.07.10 A.03	7/10/2026
Comcast	227.90	26.07.24 P.07	7/24/2026
ConnectAmerica	95.00	26.07.24 A.13	7/24/2026
Control Solutions Inc.	103.23	26.07.10 A.04	7/10/2026
Crossroads Home Care Inc.	987.57	26.07.24 A.14	7/24/2026
DELTA DENTAL	4,912.77	26.07.24 A.15	7/24/2026
DiningRD	4,895.88	26.07.10 A.05	7/10/2026
Donald Evans	190.00	55223	7/10/2026
Dr. Karen M. Luparello	4,642.50	26.07.10 A.06	7/10/2026
Empower	4,759.00	26.07.03 R.03	7/3/2026
Empower	8,018.21	26.07.03 R.04	7/3/2026
Empower	4,759.00	26.07.17 R.03	7/17/2026
Empower	8,282.23	26.07.17 R.04	7/17/2026
Empower	4,859.00	26.07.31 R.05	7/31/2026
Empower	3,068.90	26.07.31 R.06	7/31/2026
Erie Street Apartments	290.00	55224	7/10/2026

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 7/1/2026 Through 7/31/2026

Payee	Check Amount	Check Number	Effective Date
Eurotrol U.S.B.V.	278.00	55235	7/24/2026
FedEx	65.28	26.07.24 P.08	7/24/2026
GDI Services Inc.	3,339.00	26.07.24 A.16	7/24/2026
Glaxo-Smithkline Financial Inc.	600.25	26.07.24 A.17	7/24/2026
GT INDEPENDENCE	22,194.44	26.07.24 A.18	7/24/2026
Health Equity	3,449.58	26.07.03 PR.01	7/3/2026
Health Equity	3,584.58	26.07.17 PR.01	7/17/2026
Health Equity	3,584.58	26.07.31 PR.01	7/31/2026
Helping Angels Home Care LLC	3,233.12	26.07.24 A.19	7/24/2026
Hillsdale Board Of Public Utilities	1,641.38	26.07.10 P.04	7/10/2026
Hillsdale County Treasurer	845.50	26.07.10 A.07	7/10/2026
Home Roots Companion & Home Care Services LLC	3,100.80	26.07.24 A.20	7/24/2026
HomeJoy of Kalamzoo	5,883.46	26.07.24 A.21	7/24/2026
Indiana MI Power Company	990.82	26.07.10 P.05	7/10/2026
Indiana State Tax	311.89	26.07.31 R.07	7/31/2026
Inspiration Studio Designs	3,375.00	55225	7/10/2026
KALAMAZOO CHD	500.00	26.07.24 A.22	7/24/2026
LA Colonial Properties, LLC	3,421.99	55236	7/24/2026
Lajoy FI, LLC	2,572.36	26.07.24 A.23	7/24/2026
Legal Services Of S.Central MI	890.00	26.07.24 A.24	7/24/2026
Maplecrest, LLC	1,361.80	26.07.24 A.25	7/24/2026
Mary Kushion Consulting, LLC	12,854.00	55237	7/24/2026
McKesson Medical-Surgical Gov. Solutions LLC	237.66	26.07.10 P.06	7/10/2026
McKesson Medical-Surgical Gov. Solutions LLC	667.36	26.07.24 P.09	7/24/2026
Medical Care Alert	296.45	26.07.24 A.26	7/24/2026
Merck Sharp & Dohme LLC	10,347.37	55238	7/24/2026
MI Association for Local Public Health	189.00	55239	7/24/2026
Michigan Association for Local Public Health	189.00	55240	7/24/2026
Michigan Public Health Institute	1,352.82	26.07.24 A.27	7/24/2026
Michigan State Disbursement Unit	190.11	55219	7/3/2026
Michigan State Disbursement Unit	190.11	55231	7/17/2026
Michigan State Disbursement Unit	190.11	55246	7/31/2026
Nationwide	50.00	26.07.03 R.05	7/3/2026
Nationwide	50.00	26.07.17 R.05	7/17/2026
Nationwide	50.00	26.07.31 R.08	7/31/2026
PERENNIAL PARK SENIOR CENTER	25.00	55241	7/24/2026
Principal Life Insurance Company	2,094.78	26.07.24 P.10	7/24/2026
Prompt Care Express PC	160.00	55226	7/10/2026
Purfoods LLC dba Mom's Meals	213.00	26.07.24 A.28	7/24/2026
R&S Northeast LLC	429.08	26.07.24 A.29	7/24/2026
Republic Waste Services	241.60	26.07.10 P.07	7/10/2026
Richard Clark	2,901.85	26.07.24 A.30	7/24/2026
Riley Pumpkin Farm	825.00	26.07.24 A.31	7/24/2026
Sanofi Pasteur Inc.	6,238.51	26.07.24 P.11	7/24/2026
Schindler Elevator Corporation	2,771.70	55242	7/24/2026
Shred It	117.87	26.07.10 P.08	7/10/2026
Smilemakers	201.81	26.07.10 A.08	7/10/2026
St Joseph County COA	33,344.69	26.07.24 A.32	7/24/2026
St Joseph County Transit Authority	1,250.00	26.07.10 A.09	7/10/2026

Branch-Hillsdale-St Joseph Community Health Agency

Check/Voucher Register - Check Register for BOH

00103 - Cash - Accounts Payable

From 7/1/2026 Through 7/31/2026

<u>Payee</u>	<u>Check Amount</u>	<u>Check Number</u>	<u>Effective Date</u>
St Joseph County Transit Authority	2,493.15	26.07.24 A.33	7/24/2026
Staples	8.04	26.07.24 P.12	7/24/2026
State of Mich EGLE	180.00	55227	7/10/2026
State of Mich EGLE	36.00	55228	7/10/2026
State Of Michigan	11,569.00	55229	7/10/2026
State of Michigan	10.00	55243	7/24/2026
State of Michigan-Dept	52.05	55244	7/24/2026
Stratus Video, LLC	3,002.64	26.07.10 A.10	7/10/2026
TelNet Worldwide	1,769.32	26.07.10 A.11	7/10/2026
Tesco	629.00	26.07.24 A.34	7/24/2026
Verdant Commercial Capital	1,322.75	26.07.24 P.13	7/24/2026
Verizon	1,770.84	26.07.10 P.09	7/10/2026
VRI INC.	27.00	26.07.24 A.35	7/24/2026
Western Michigan Health Insurance Pool Trust	63,131.72	26.07.24 P.14	7/24/2026
Report Total	467,441.52		

Branch-Hillsdale-St Joseph Community Health Agency
Balance Sheet - Unposted Transactions Included In Report
As of 7/31/2026

	<u>Current Period Balance</u>
Assets	
Cash on Hand	9,638.24
Cash with County Treasurer	3,340,381.84
Community Foundation Grant	309,955.94
Cash HD Building Maintenance	76,734.74
Cash TR Building Maintenance	101,431.92
Accounts Receivable	42,521.98
Due from Dental DAPP	1,275.67
Due from State	392,665.37
Due from St. Joseph County	80,744.00
Due from Other Funding Sources	224,615.46
Prepaid Expenses	184,322.92
Biologic Inventory	127,981.31
Total Assets	<u><u>4,892,269.39</u></u>
Liabilities	
Accounts Payable	117,598.02
Payroll Liabilites	90,283.52
Deferred Revenue	181,492.85
Deferred Revenue BR	38,310.17
Deferred Revenue HD	40,409.00
Deferred Revenue SJ	53,829.33
Biologics	127,981.31
Total Liabilities	<u>649,904.20</u>
Net Assets	
Operation Fund Balance	671,191.82
Restricted Fund Balance	441,160.16
Designated Fund Balance	3,130,013.21
Total Net Assets	<u>4,242,365.19</u>
Total Liabilities and Net Assets	<u><u>4,892,269.39</u></u>

BHSJ Community Health Agency
Schedule of Cash Receipts and Disbursements
October 1, 2025 thru
July 31, 2026

Plus: Cash Receipts	\$628,471.27
Less: Cash Disbursements For Payroll/AP	\$ (772,650.24)
10/31/2025 Cash Balance	\$ 3,970,394.32
Plus: Cash Receipts	\$633,432.70
Less: Cash Disbursements For Payroll/AP	\$ (663,990.11)
11/30/2025 Cash Balance	\$ 3,939,836.91
Plus: Cash Receipts	\$620,491.36
Less: Cash Disbursements For Payroll/AP	\$ (639,361.22)
12/31/2025 Cash Balance	\$ 3,920,967.05
Plus: Cash Receipts	\$847,544.81
Less: Cash Disbursements For Payroll/AP	\$ (894,796.16)
1/31/2026 Cash Balance	\$ 3,873,715.70
Plus: Cash Receipts	\$572,212.52
Less: Cash Disbursements For Payroll/AP	\$ (635,104.49)
2/28/2026 Cash Balance	\$ 3,810,823.73
Plus: Cash Receipts	\$559,290.93
Less: Cash Disbursements For Payroll/AP	\$ (668,377.59)
3/31/2026 Cash Balance	\$ 3,701,737.07
Plus: Cash Receipts	\$1,040,050.49
Less: Cash Disbursements For Payroll/AP	\$ (876,171.90)
4/30/2026 Cash Balance	\$ 3,865,615.66
Plus: Cash Receipts	\$569,720.22
Less: Cash Disbursements For Payroll/AP	\$ (559,942.49)
5/31/2026 Cash Balance	\$ 3,875,393.39
Plus: Cash Receipts	\$515,433.73
Less: Cash Disbursements For Payroll/AP	\$ (744,301.68)
6/30/2026 Cash Balance	\$ 3,646,525.44
Plus: Cash Receipts	\$794,164.80
Less: Cash Disbursements For Payroll/AP	\$ (790,551.90)
7/31/2026 Cash Balance	\$ 3,650,138.34

12 Month Grants should be 83.33% expended.

	Current Month	Year to Date	Total Budget - Final	% Total Expended
024 MERS Pension Underfunded Liability All expenses for this have been completed for the year.	-	26,088.93	26,089.00	99.99%
275 Medical Marijuana SJ Short term grant, must be expended August 31. Will fall in line as the year progresses.	2,389.48	7,352.85	7,410.53	99.22%
230 Medical Marijuana HD Short term grant, must be expended August 31. Will fall in line as the year progresses.	2,068.54	10,858.11	11,046.72	98.29%
120 PH&DP Special Projects Short term grant. Will fall in line as the year progresses.	14,084.69	14,130.33	15,010.60	94.13%
212 Medical Marijuana BR Short term grant, must be expended August 31. Will fall in line as the year progresses.	3,703.58	17,676.97	18,888.48	93.58%
010 Agency Support Over budget due to revenue timing. Only 17 % of the expenses in this RU remain in the RU. The remaining expenses are cost allocated out to the other programs as indirect. The majority of the revenue for this RU have already been received, causing this RU to show over. This will fall in line as the year progresses.	16,500.57	280,850.77	304,955.00	92.09%
255 Community Health Direction Over budget; should come back in line as the year progresses and work begins in other grants that do not run the entire year.	4,909.01	145,340.72	160,500.00	90.55%
101 Workforce Development Over budget. The work plan for this grant has the majority of the work early in the year. This will come in line as the year progresses.	2,553.09	43,231.09	48,541.42	89.06%
325 CSHCS Must fully expend budget for 325 before using 112; therefore, they must be evaluated together. They are within budget at 81.69%.	-	193,684.02	222,409.00	87.08%
332 HIV Prevention Slightly over budget due to allocation expenses. Will	1,981.14	18,482.40	21,905.76	84.37%
717 EGLE Swimming Pools Slightly over budget due to higher staff time in the summer months; should even out as the year progresses. Will monitor.	937.41	15,671.00	18,698.36	83.80%
032 Emergency Preparedness Slightly over budget due to one-time equipment purchases. Will level out as the year progresses.	12,878.49	149,296.88	178,424.61	83.67%
341 Infectious Disease Slightly over budget due to one-time equipment purchases. Will level out as the year progresses.	48,565.72	357,106.74	427,126.41	83.60%

Branch-Hillsdale-St Joseph Community Health Agency
Statement of Revenues and Expenditures - Final - Expense By Program - Summary FY25-26 Unposted Transactions Included In Report
From 7/1/2026 - 7/31/2026

	Current Month	Year to Date	Total Budget - Final	% Total Expended
329 MCH Enabling Children	7,867.42	78,674.17	94,409.00	83.33%
326 Vision (ELPHS)	5,051.04	92,882.47	112,087.11	82.86%
286 HEP Special Projects	-	6,143.01	7,422.75	82.75%
109 WIC	97,647.19	946,863.59	1,150,390.82	82.30%
138 Immunization IAP	71,910.77	936,930.46	1,140,310.00	82.16%
405 Grant Writing	427.19	6,182.77	7,548.96	81.90%
021 Dental Clinic - Three Rivers	4,533.45	45,334.50	55,582.20	81.56%
345 Lead Testing	2,390.95	29,683.36	36,653.22	80.98%
714 Onsite Sewage Disposal	36,414.94	422,864.18	527,151.25	80.21%
704 Food Service	45,628.08	440,952.37	549,764.82	80.20%
327 Hearing (ELPHS)	4,650.88	87,477.62	109,545.34	79.85%
014 VOCA	15,315.35	161,401.10	205,743.00	78.44%
108 WIC Breastfeeding	10,404.65	95,666.79	122,031.29	78.39%
012 Area Agency on Aging	136,752.42	1,198,620.91	1,533,407.13	78.16%
745 Type II Water	18,544.53	174,421.17	223,414.33	78.07%
721 Drinking Water Supply	35,575.08	374,621.34	480,083.38	78.03%
605 General EH Services	1,692.78	16,475.89	21,552.19	76.44%
112 CSHCS Medicaid Outreach	27,733.08	94,283.49	130,103.26	72.46%
207 MCRH Community Health Workers	10,592.17	87,919.87	122,430.67	71.81%
331 STD	10,918.26	121,767.39	171,341.79	71.06%
029 Dental Clinic - Hillsdale	804.85	8,306.11	12,000.00	69.21%
107 Medicaid Outreach	927.46	10,363.82	15,157.22	68.37%
106 MI Options	49,757.22	148,392.20	225,082.00	65.92%
202 Oral Health	10,890.60	53,790.53	83,280.64	64.58%
035 Vector Borne Disease Surveillance	8,106.13	22,980.49	35,971.04	63.88%
338 Immunization Vaccine Handling	5,054.88	58,525.23	92,383.76	63.35%
025 PH Workforce & Infrastructure	16,230.53	144,955.12	233,242.23	62.14%
008 Salary & Fringe Payoff	1,192.72	45,250.22	80,000.00	56.56%
720 EH- Complaints	1,372.45	8,173.07	15,250.13	53.59%
205 OHSP Grant	6,417.43	52,999.19	107,011.75	49.52%
723 PFAS Response - White Pigeon	-	1,278.66	2,706.20	47.24%
018 Aging Mastery	1,242.17	6,877.04	15,000.00	45.84%
722 PFAS Response	-	943.05	2,157.14	43.71%
015 Local Expenses - Unallowable by Grants	2,603.93	16,850.46	50,544.34	33.33%
719 Body Art	6.07	1,993.48	6,135.41	32.49%
724 PFAS - Westside Landfill	-	812.64	2,820.00	28.81%
715 EGLE Long-Term Monitoring	215.59	1,120.13	4,061.30	27.58%
716 EGLE Campgrounds	2,397.37	3,750.92	18,092.85	20.73%
096 CSHCS Donations SJ	1,885.00	8,536.16	41,360.84	20.63%
718 EGLE Septage	317.59	654.32	5,352.73	12.22%
287 HEP Special Projects II	565.54	2,123.84	27,989.45	7.58%
102 EH San Training Jurisdictional Sharing	1,190.41	1,518.24	22,836.07	6.64%

Branch-Hillsdale-St Joseph Community Health Agency
Statement of Revenues and Expenditures - Final - Expense By Program - Summary FY25-26 Unposted Transactions Included In Report
From 7/1/2026 - 7/31/2026

	Current Month	Year to Date	Total Budget - Final	% Total Expended
097 CSHCS Donations BR HD	151.92	1,140.65	22,826.00	4.99%
023 Capital Expenditures	-	-	53,000.00	0.00%
999 Insurance Claims	6,836.63	38,100.72	-	0.00%
Total Expense	772,788.44	7,338,373.55	9,436,239.50	77.77%

The Agency is currently 5.57% under budget.



August 17, 2026 – Board of Health Finance Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Finance Committee meeting was called to order by Jared Hoffmaster at 9:02 AM. Roll call was completed as follows: Jared Hoffmaster, Jon Houtz, and Kevin Collins. No members were absent.

Also present from BHSJ: Rebecca Burns, and Theresa Fisher.

Mr. Collins moved to approve the agenda with support from Mr. Houtz. The motion passed.

Public Comment: No public comments were given.

New Business:

- Mr. Houtz moved to recommend that the full Board approve the increase in county appropriations by 3% with support from Mr. Collins. The motion passed.
- Rebecca Burns provided an update on the mobile unit. No action was taken.

Public Comment: No public comments were given.

With no further business, the Chair adjourned the meeting at 9:18 AM.

Respectfully Submitted by:

Theresa Fisher,
Administrative Services Director
Secretary to the Board of Health



August 19, 2026 – Board of Health Program, Policy, & Appeals Committee Meeting Minutes

The Branch-Hillsdale-St. Joseph Community Health Agency Board of Health, Program, Policy, & Appeals Committee meeting was called to order by Tim Stoll at 8:32 AM. Roll call was completed as follows: Tim Stoll, Brent Leininger, and Rick Shaffer. No members were absent.

Also present from BHSJ were Rebecca Burns, Theresa Fisher, and Laura Sutter.

Mr. Leininger moved to approve the agenda as presented, with support from Mr. Shaffer. The motion passed unopposed.

Public Comment

No public comments were given.

New Business

- Mr. Leininger moved to recommend that the Board approve the 2027-2032 Strategic Plan, with support from Mr. Shaffer. The motion passed.
- Mr. Leininger moved to recommend that the full Board approve the competitive grant proposal marked as BATrans for a total of \$20,735 in response to the AAA IIIC FY27 Request for Proposal as presented, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve the competitive grant proposal marked as BCTrans for a total of \$3,000 in response to the AAA IIIC FY27 Request for Proposal as presented, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve the Legal Services of South Central Michigan non-competitive grant proposal (legal services) for a total of \$12,000, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve the Kalamazoo HSC/Area Agency on Aging AAA 3A's non-competitive grant proposal (long-term care ombudsman) for a total of \$2,000, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve all Branch County Commission on Aging non-competitive grant proposals (caregiver support, case coordination & support, chore, congregate meals, health promotion, home delivered meals, homemaking, personal care, respite care) for a combine amount of \$283,608 in response to the AAA IIIC FY27 Request for Proposal as presented, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve all St. Joseph County Commission on Aging non-competitive grant proposals (caregiver education, case coordination & support, chore, friendly reassurance, health promotion, home delivered meals, homemaking,

home repair, personal care, respite care, unmet needs, and congregate meals) for a combine amount of \$389,272 in response to the AAA IIIC FY27 Request for Proposal as presented, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)

- Mr. Leininger moved to recommend that the full Board approve the St. Joseph County Transportation Authority non-competitive grant proposal for the amount of \$28,635 in response to the AAA IIIC FY27 Request for Proposal as presented, with support from Mr. Shaffer. A roll call vote was taken and passed 3-0 (Mr. Leininger, yes; Mr. Shaffer, yes; Mr. Stoll, yes)
- Mr. Leininger moved to recommend that the full Board approve the asset disposal policy as presented with support from Mr. Shaffer. The motion passed.
- Rebecca Burns provided an update on the Mobile Unit. No action was taken.

Public Comment

No public comments were given.

Mr. Shaffer moved to adjourn the meeting, with support from Mr. Leininger. The motion passed, and the meeting adjourned at 9:29 AM.

Respectfully Submitted by:

Theresa Fisher,
Administrative Services Director
Secretary to the Board of Health

FY2027 Request for a 3% Increase in County Appropriations

The Branch-Hillsdale-St. Joseph Community Health Agency is requesting a 3% increase in local county appropriations for 2027, increasing the combined county appropriation from \$795,657 to \$819,677. The requested increase is intended to preserve, as much as possible, the purchasing power of local county support, which has been significantly eroded by inflation over the past several years.

The requested increase is reasonable, modest, and necessary to maintain the Agency's ability to provide essential public health services to the residents of Branch, Hillsdale, and St. Joseph Counties. This request is particularly important as the Agency enters FY2027 facing not only continued inflationary pressures, but also uncertainty regarding reductions in state funding.

The Cost of Providing Public Health Services Has Increased

The Agency's costs have continued to rise. Personnel costs, benefit costs, contracted services, technology, equipment, utilities, maintenance, supplies, and other operating expenses have all been affected by inflation. These increases are cumulative and add up to significant changes in purchasing power over time.

Inflation Rates

Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Ave
2026	2.4	2.4	3.3	3.8	4.2	3.5	3.4						3.3
2025	3	2.8	2.4	2.3	2.4	2.7	2.7	2.9	3		2.7	2.7	2.7
2024	3.1	3.2	3.5	3.4	3.3	3	2.9	2.5	2.4	2.6	2.7	2.9	2.9
2023	6.4	6	5	4.9	4	3	3.2	3.7	3.7	3.2	3.1	3.4	4.1
2022	7.5	7.9	8.5	8.3	8.6	9.1	8.5	8.3	8.2	7.7	7.1	6.5	8.0
2021	1.4	1.7	2.6	4.2	5	5.4	5.4	5.3	5.4	6.2	6.8	7	4.7
2020	2.5	2.3	1.5	0.3	0.1	0.6	1	1.3	1.4	1.2	1.2	1.4	1.2

<https://www.usinflationcalculator.com/inflation/current-inflation-rates/>

County Appropriations Have Not Kept Pace with Inflation

County appropriations have remained unchanged since 2023, while the cumulative inflationary percentage for that same time period is 13%. The agency has been providing the same level of public health services with dollars that have progressively less purchasing power over this time period.

Although the funding amount has remained unchanged, the financial supporting percentage has reduced. Flat funding is effectively a reduction in purchasing power or overall support.

FY2027 Adds Additional Uncertainty Through State Funding Reductions

The Agency is also entering FY2027 with significant uncertainty regarding state funding.

The Agency has been notified that the new Michigan Department of Health and Human Services (MDHHS) budget has been reduced by approximately 1.1%, and that the Agency will experience reductions in funding for Essential Local Public Health Services (ELPHS). Additionally, the Michigan Department of Environment, Great Lakes, and Energy (EGLE) funding will also be reduced by an unknown amount.

At this time, the Agency has not yet been provided the specific dollar amount of its FY2027 reductions. The final amounts are not expected to be known until approximately the beginning of the fiscal year.

It is important to recognize that the Agency's anticipated reductions cannot simply be calculated by applying the 1.1% statewide MDHHS reduction to the Agency's current funding. State funding is allocated using complex formulas that consider multiple factors, and the percentage reduction experienced by an individual local health department may differ from the overall reduction to the MDHHS budget.

As a result, the Agency is preparing the FY2027 budget without knowing the full extent of these state funding reductions.

This uncertainty makes stable local county funding even more important. County appropriations are one of the few funding sources available to the Agency that are not restricted to a specific grant program or expenditure category. Maintaining and modestly increasing local support provides the Agency with greater flexibility to absorb unexpected reductions in state or grant funding without immediately reducing essential services.

The Agency Is Facing Both Increasing Costs and Decreasing/Uncertain Revenue

The combination of inflation and anticipated reductions in state funding creates a particularly challenging financial environment for FY2027.

The Agency is not requesting an increase in county appropriations simply because its overall budget has increased. Rather, the request recognizes that:

- The cost of providing public health services has increased substantially;
- County appropriations have remained flat since 2023;
- The purchasing power of those appropriations has declined by approximately 13% since 2023;
- The Agency has been notified that state funding will be reduced;
- The Agency's specific ELPHS and EGLE funding reductions are not yet known;
- The Agency cannot assume that its reduction will be equal to the 1.1% reduction in the overall MDHHS budget; and
- The Agency must prepare for these reductions while continuing to provide essential services to three counties.

A modest increase in local appropriations provides some stability in an otherwise increasingly uncertain funding environment.

The Historical Record Makes This Particularly Clear

The Agency's appropriation history demonstrates that county support has steadily declined as a percentage of the Agency's overall budget. This downward trend continues, even if a modest 3% increase is provided in 2027.

Fiscal Year	County Appropriation	Agency Budget	County % of Budget
2005	\$924,353	\$5,869,966	15.75%
2010	\$938,136	\$7,131,289	13.16%
2015	\$665,654	\$6,031,609	10.87%
2020	\$756,016	\$7,765,083	9.74%
2023	\$795,657	\$8,372,787	9.50%
2026	\$795,657	\$9,103,276	8.74%
2027 Requested	\$819,677	\$9,505,877	8.62%

If the requested increase is provided, both the percentage of the total budget and the funded amount will remain below the levels provided in 2005. When the historical funding is adjusted for inflation, the gap is significantly greater.

With or without the requested increase, county appropriations will represent the lowest percentage of the Agency's overall budget in the history shown above.

The requested 3% increase therefore does not represent an expansion of the counties' share of Agency funding. It represents a modest effort to prevent the purchasing power and relative contribution of local funding from declining even further.

Local Appropriations Provide Something Grants Cannot

It is also important to recognize that a significant portion of the Agency's budget comes from grants and other restricted funding sources. Grant funding is generally restricted to specific programs, activities, or expenditures. It cannot necessarily be used to offset increases in basic operating expenses.

Local appropriations provide the stable foundation that allows the Agency to maintain the infrastructure necessary to administer both locally funded and grant-funded programs. This includes staffing, facilities, technology, financial administration, human resources, information systems, emergency preparedness, and other foundational functions that support the Agency as a whole.

This flexibility becomes particularly valuable when grant funding is reduced, delayed, or restricted. Stable local funding allows the Agency to respond to those changes without immediately compromising the infrastructure necessary to deliver public health services.

The Agency Has Already Absorbed Significant Financial Pressure

The Agency has made significant efforts to manage increasing costs responsibly. Rather than simply passing increased costs on to the counties, the Agency has worked to absorb inflationary pressures through careful budgeting, expenditure controls, evaluation of staffing and programs, and responsible use of available resources.

However, there is a limit to how much additional cost can be absorbed without affecting services, staffing, infrastructure, or the Agency's ability to respond to emerging public health needs.

The anticipated state funding reductions further limit the Agency's ability to absorb continued increases in operating costs without additional local support.

Conclusion

A 3% increase in county appropriations for FY2027 is a modest request, particularly in light of the financial pressures facing the Agency.

The request recognizes that:

- County appropriations have remained flat for four consecutive years;
- Inflation has significantly increased the cost of goods, services, personnel, facilities, technology, and other Agency operations;
- The purchasing power of the existing county appropriation has declined;
- Cumulative inflation since 2023 is approximately 13%;
- The Agency has been notified that MDHHS funding will be reduced;
- ELPHS and EGLE funding provided to the Agency will also be reduced;
- The Agency will not know the specific dollar amount of those reductions until approximately the beginning of FY2027;
- The Agency's reduction cannot be assumed to equal the overall 1.1% reduction in the MDHHS budget because state funding is distributed using complex allocation formulas;
- The Agency's overall budget has grown significantly while county appropriations have not;
- County appropriations currently represent only 8.74% of the Agency's budget and would represent just 8.62% even after the requested increase;
- The Agency has already absorbed significant inflationary pressures through responsible fiscal management; and
- The requested \$24,020 increase is small compared with the size and scope of public health services provided across the three counties.

A 3% increase for FY2027 is a small step toward preserving the purchasing power of local public health funding at a time when the Agency is facing both rising costs and uncertainty regarding reductions in state funding.

Maintaining a strong local funding commitment will help ensure that Branch, Hillsdale, and St. Joseph Counties continue to have a stable public health infrastructure capable of meeting everyday public health needs while remaining prepared to respond to future emergencies and unexpected changes in state and grant funding.

The Agency respectfully requests approval of the FY2027 county appropriation of \$819,677, representing a 3% increase over the current combined county appropriation.

Branch-Hillsdale-St.Joseph Community Health Agency
Appropriations History

Year	Per Capita - Based on Calendar Year	Branch	Hillsdale	St. Joseph	Total	Total Agency Budget	% to Budget	Prior Year Increase (Decrease)
2005		273,608	278,231	372,514	\$924,353	\$5,869,966	15.75%	\$ 11,411
2006		277,028	281,708	377,172	\$935,908	\$6,600,370	14.18%	\$ 11,555
2007		281,877	286,635	383,772	\$952,284	\$6,865,897	13.87%	\$ 16,376
2008		284,871	293,592	390,487	\$968,950	\$7,205,684	13.45%	\$ 16,666
2009		293,417	302,392	402,201	\$998,010	\$7,739,501	12.90%	\$ 29,060
2010		275,812	284,255	378,069	\$938,136	\$7,131,289	13.16%	\$ (59,874)
2011		248,241	268,655	340,262	\$857,158	\$7,210,148	11.89%	\$ (80,978)
2012	5.15	219,482	240,443	324,470	\$784,395	\$5,991,536	13.09%	\$ (72,763)
2013	4.42	188,371	206,360	270,923	*\$665,654	\$6,000,892	10.93%	\$ (128,741)
2014	4.42	188,371	206,360	270,923	*\$665,654	\$6,174,625	10.62%	\$ -
2015	4.42	188,371	206,360	270,923	*\$665,654	\$6,031,609	10.87%	\$ -
2016	4.57	194,764	213,364	280,118	\$688,246	\$5,926,003	11.61%	\$ 22,592
2017	4.72	201,157	220,367	289,312	\$710,836	\$6,052,032	11.75%	\$ 22,590
2018	4.87	207,550	227,371	298,506	\$733,427	\$6,081,668	12.06%	\$ 22,591
2019	5.02	213,943	234,374	307,700	\$756,017	\$7,020,445	10.77%	\$ 22,590 +
2020	5.02	213,942	234,374	307,700	\$756,016	\$7,765,083	9.74%	\$ -
2021	5.02	213,942	234,374	307,701	\$756,017	\$8,366,875	9.04%	\$ -
2022	5.15	223,711	235,592	313,836	\$773,139	\$8,309,241	9.30%	\$17,122
2023	5.30	230,227	242,454	322,977	\$795,657	\$8,372,787	9.50%	\$ 22,519
2024	5.30	230,227	242,454	322,977	\$795,657	\$8,611,127	9.24%	\$ -
2025	5.30	230,227	242,454	322,977	\$795,657	\$9,051,356	8.79%	\$ -
2026	5.30	230,227	242,454	322,977	\$795,657	\$9,103,276	8.74%	\$ -
2027	5.46	237,177	249,773	332,727	\$819,677	\$9,505,877	8.62%	\$ 24,020

* Maintenance of Effort (Minimum State Allowed set in FY92/93 is \$664,834)

+ Increase of \$22,590 must be spent on unfunded pension liability until pension plan is fully funded

Proposed Per Capita Increases for 2027							
County	Population *Based on 2020 Census*	Current Per Capita	Current Allocation	Increase (Per Capita)	Increase (Total \$ Amount)	Proposed Allocation	Increase
Branch*	43,439	5.30	\$ 230,227	0.16	\$ 6,950	\$ 237,177	3.02%
Hillsdale	45,746	5.30	\$ 242,454	0.16	\$ 7,319	\$ 249,773	3.02%
St.Joseph	60,939	5.30	\$ 322,977	0.16	\$ 9,750	\$ 332,727	3.02%
Total	150,124		\$ 795,657		\$ 24,020	\$ 819,677	

*Census Data adjusted to remove persons incarcerated in prison. (44,862 - 1,423 = 43,439)

Branch-Hillsdale-St. Joseph Community Health Agency 2027-2032 Strategic Plan

Approved by the Branch-Hillsdale-St. Joseph Community Health Agency Board of
Health and its Health Officer

Brent Leininger, Chairperson

Rebecca A. Burns, Health Officer

August 27, 2026





In recent years, the work of public health professionals and public health agencies has been spotlighted. A sometimes-forgotten piece of the healthcare system, public health is being scrutinized and politicized calling for BHSJCHA to shape a well-defined path for the future with this strategic plan. At BHSJCHA our mission of “helping people live healthier” explains the work we do whether that is issuing a permit for a new on-site sewage system, inspecting a restaurant, providing an immunization, screening a child for hearing and vision, or the many other services our staff provide. This dedication to helping residents in the tri-county area live healthier, coupled with our vision of “being the trusted health resource for all people” is not just words on paper for our staff. With everything we do at BHSJCHA we mean what we say, and we strive to do everything with excellence using best practices. We do endeavor to be your trusted health resource.

As we take on the opportunity of providing public health services to all people in our tri-county service area, we value inclusion, innovation, and integrity; statements that define BHSJCHA’s commitment to how we do business. We have completed work on the 2026-2029 Community Health Needs Assessment. Based on the CHNA information and data, a new Community Health Improvement Plan will further define the activities that our local public health Agency will engage in over the next four years across the jurisdiction.

The development of this four-year plan was a collaborative effort that included community partners and leaders, BHSJCHA staff and administration, and the BHSJCHA Board of Health. A good plan takes direction from many voices and opinions and I am proud to present this plan which included input from a diverse set of stakeholders. The planning is done; let’s get to the work of implementation.

Sincerely,

Rebecca A. Burns, MPH, RS
Health Officer

Branch-Hillsdale-St. Joseph Community Health Agency

Mission: *The mission of the Branch-Hillsdale-St. Joseph Community Health Agency, Your Local Health Department is, helping people live healthier.*

Vision: *The vision of the Branch-Hillsdale-St. Joseph Community Health Agency, Your Local Health Department is, to be the trusted health resource for all people.*

Values:

- **Inclusion:** Ensuring all who seek services and our employees are treated with respect
- **Innovation:** Seeking effective and efficient ways to improve community health
- **Integrity:** Being fair and honest

Strategic Priorities:

- **Employee Development and Investment**
- **Community Engagement**
- **Proactive Planning**

Background

The Branch-Hillsdale-St. Joseph Community Health Agency (BHSJCHA), under the direction of public health officer, Rebecca A. Burns, MPH, RS, determined the need to update the agency's strategic plan which had been in place since 2022. The agency's executive team coordinated the planning process and hired an external consultant to facilitate meetings and draft the updated plan. The agency's front-line staff also participated in the planning process through their participation in the initial strategic planning survey and meetings during the planning process. Community partners, county officials, and board of health members were also survey participants. BHSJCHA internal participants included representation from all levels and all divisions within the department. Evidence of multi-level staff participation is provided in Appendix A.

The Strategic Planning Process

The team held its first planning session on June 10, 2026. During the initial session, the team reviewed the accomplishments and status of the 2022-2026 plan, the pre-planning survey results and participated in the Strengths, Weaknesses, Opportunities and Challenges (SWOC) analysis.

During the first meeting, the team reviewed its mission statement and compared it to the survey responses received. Based on the survey results, the participants believed the mission statement was still relevant, and the team decided to keep the current mission statement. The team also kept

the vision statement that was adopted during the previous planning process. The team then turned its attention to the values. The BHSJCHA has a set of values and again the survey participants deemed them to be accurate with no need to revise them. By the end of the first meeting, the team developed a draft of the Strengths, Weaknesses, Opportunities and Challenges (SWOC) assessment and a proposed set of strategic directions with goals and objectives to be further discussed and refined at the front-line staff meetings. The proposed strategic directions are:

- Employee Investment and Development
- Community Engagement
- Proactive Planning

On June 18, 2026, the front-line staff met in one of two identical (morning and afternoon) sessions. Both groups reviewed the information and draft materials provided and developed at the first meeting. Both sessions generated refinement to the strategic directions as well as the goals and objectives for each. Potential strategies to achieve the objectives and ultimately the goals were generated by the front-line staff. Additional proposed versions of the SWOC analysis were also developed.

The contracted consultant was then tasked with objectives capturing and merging the potential strategies voiced by the staff during the two meetings. These were sent to the health officer for review with her leadership team for further refinement and to determine which will then be incorporated into the draft plan for team member review and comment.

A SurveyMonkey survey was disseminated to staff, and they were asked to rank the strategic directions and the corresponding objectives. The consultant and leadership team used the results to set timelines and deadlines for the objectives and determine which areas to focus on in the first year of the plan. A total of 39 responses were received.

In communications with the health officer, the consultant provided the survey results and draft plan. The leadership team members developed time-framed targets for the objectives and strategies included in the plan and fine-tuned the narrative. The final draft was sent to the department staff on July 21, 2026.

Staff Involvement

The front-line staff of the department were provided with the opportunity to participate in a strategic planning online survey that was conducted prior to the first planning session. Staff were asked to provide feedback on the current trends they see in the community, the internal strengths and weaknesses and external opportunities and challenges. The information gathered was instrumental in the SWOC analysis. (See Table 1)

After the strategic directions and proposed objectives were developed, the staff were once again asked to participate in a second online survey to prioritize the goals and strategies to create the time-framed targets for the objectives. The first staff and community stakeholder survey garnered 36 responses and the second survey which was sent to staff received 39 responses. Both survey instruments and results are available upon request.

Stakeholder Engagement

The final draft document of the strategic plan was shared with the BHSJCHA's Board of Health Program, Policy and Appeals Committee on August 19, 2026, for input and feedback from both the Board and the public. **ADD A SENTENCE OR TWO ON THE RESPONSE OUTCOME.**

A total of four community partners participated in the strategic planning survey that was used to develop the plan's priorities.

Alignment with BHSJCHA Organizational Plans

Branch-Hillsdale-St. Joseph Community Health Agency Needs Assessment and Improvement Plan

In 2026, the BHSJCHA also engaged in a community health needs assessment (CHNA) for Branch County and health improvement planning process for the district. BHSJCHA will need to determine how to incorporate the CHIP action plan activities into the strategic plan and how the agency and in coordination with partners will work collectively to address them resulting in improving the health status within the three-county district.

It is anticipated that the strategic plan will be updated to include those areas (services, policy development, interventions, etc.) where BHSJCHA will serve in a leadership capacity during the health improvement plan implementation.

Quality Improvement, Workforce Development, and Performance Management Plans

The BHSJCHA has identified and implemented quality improvement (QI) projects throughout the department over the course of the past few years as we continue to develop a culture of quality. The strategic plan will be valuable resource for us to use to identify additional QI projects as we begin implementation of our plan.

Our strategic planning process has identified the need to focus on employee engagement and development. One of the strategic priority areas- Employee Development and Investment- is dedicated to the ongoing implementation of the BHSJCHA Workforce Development Plan.

We recognize we need to sustain our concerted effort to create a comprehensive performance management system within the department. The strategic plan with its measurable objectives and strategies will be a cornerstone for our performance management system as we develop department-wide performance goals. We have invested in the VMSG performance management software and are committed to training staff and utilizing the system to track our performance in both programs and policies.

External Trends and Events that Impact Our Work

As evidenced in the SWOC analysis provided in Table 1, the BHSJ Community Health Agency has multiple factors that potentially impact on our work. Both opportunities and challenges have been identified and are addressed in the strategic plan.

Across Michigan, public health agencies are navigating a rapidly shifting landscape marked by complex social, economic, and technological pressures. Communities continue to struggle with limited housing and transportation options, leaving many residents unable to access essential services, including healthcare, employment, and education. These structural barriers deepen existing inequities and place additional strain on local health departments that are already working at capacity.

At the same time, competition among public health agencies for limited state and federal funding has intensified. As overall funding decreases, agencies must do more with fewer resources, often competing against one another for grants that once reliably supported core programs. This financial pressure makes long-term planning difficult and threatens the sustainability of critical public health services.

Meanwhile, the healthcare landscape itself is evolving. The rise of artificial intelligence (AI) in healthcare presents both opportunities and challenges. While AI has the potential to improve diagnostics, streamline operations, and expand access to care, it also requires new skills, ethical considerations, and infrastructure investments that many rural and under-resourced agencies are not yet equipped to manage.

Behavioral health trends add another layer of complexity. Vaping continues to increase, particularly among youth, creating new prevention and education needs. This surge comes at a time when misinformation about health topics spreads rapidly online, making it harder for public health agencies to communicate evidence-based guidance.

The political environment further complicates these efforts, such as shifting priorities, polarization, and legislative changes influence funding streams, public trust, and the ability to implement community-wide interventions.

Demographic changes also demand attention. Agencies must work to keep up with population shifts, including aging residents, migration patterns, and changing socioeconomic conditions. These shifts affect service demand, workforce needs, and the types of health challenges communities face.

Finally, the recent closure of a local hospital and another hospital that is no longer offering obstetrics and behavioral health units within the jurisdiction is of growing concern. Loss of healthcare services in rural Michigan has created significant gaps in care. Residents must travel farther for emergency services, maternal care, and specialty treatment, increasing the burden on local health departments to fill the void through expanded outreach, partnerships, and community-based programs.

Together, these challenges form a complex environment in which public health agencies must adapt quickly, collaborate strategically, and innovate continuously to protect and promote the health of their communities.

During all the strategic planning sessions, discussions were held related to the current level of distrust in government and in public health. This is a primary reason our strategic plan will focus on community engagement in our continued efforts to restore the public's trust in public health and achieve our agency vision to be the trusted health resource for all people.

DRAFT

Table 1: Strength, Weaknesses, Opportunities and Challenges

Branch-Hillsdale-St. Joseph Community Health Agency

INTERNAL	STRENGTHS • Multi-disciplinary Expertise • Reputation within the community • “Policies stronger than ever” • Reliable leadership team • Knowledgeable, caring staff • Ability to make referrals • Transparency to the public • Longevity • Able to adapt to client needs • Teamwork • Focused on morale • Social media and marketing • Interoffice relationships • Doing much with minimal staff • Community resource • Improved communications • Leadership team looking for program options and funding opportunities • Good work environment	WEAKNESSES • Staff shortages • “Pockets” of negative staff • Multiple steps in decision making process • Limited resources to innovate • Policy and procedure changes with limited notice from state/federal agencies • Pay scales • Language barriers • Technology limitations inhibit productivity • Limited funding • Internal communication strategy could be improved • High employee turnover
	OPPORTUNITIES • Increased community collaborations • Funding opportunities • Housing and transportation opportunities • Staff volunteer opportunities • Community is supportive of agency • Advertising to immigrant populations • Need for shaded bus stop • Outreach opportunities to older population and people with disabilities • Community trust is on the rise • Interactions with school and ISD superintendents • Improved relationships with health care systems and providers	CHALLENGES • Lack of housing and transportation options • Competition among PH agencies in Michigan for funding • Funding decreases • Artificial intelligence (AI) in healthcare • Increases in vaping • Political environment • Keeping up with population shifts • Misinformation on health topics • Closure of local hospital

Strategic Plan Outline

The plan outlined on the following pages is displayed in a table format to improve readability. The tables indicate each Strategic Priority Area highlighted in blue, the Objectives are highlighted in gray, and the strategies highlighted in yellow. Each priority area includes the identified champion(s), and each strategy includes the metric/measure to be used to monitor progress.

Annual action plans will be developed and utilized to stay on track each year of the plan and to be able to analyze the work accomplished each year as well as to identify when adjustments to timelines and activities need to be modified.

Strategic Direction 1: Employee Investment and Development	
Goal: Demonstrate a commitment to continued learning and professional growth	
Champions: Rebecca Burns, Theresa Fisher, Laura Sutter, Joe Frazier, and Heidi Hazel	
Objective 1.1: Update the wage equity plan and present it to the board of health annually starting in 2027 and continuing throughout the plan	
Strategies	Metric/Measure
1.1.1 Continue to share wage equity review annually with all staff and the Board of Health	Wage equity review shared with board of health annually
1.1.2 Educate staff on how the pay scale is developed and maintained	Staff education completed by the established timeline
1.1.3 Investigate the development of health and wellness opportunities	Investigation completed by the established timeline
1.1.4 Investigate an incentive system within programs to win rewards	Investigation completed by the established timeline
Objective 1.2: Develop a resource for staff to access required and/or recommended virtual educational opportunities by June 30, 2027	
Strategies	Metric/Measure
1.2.1 Provide a directory/list of all training courses per position	Directory/list provided to staff by the established timeline
1.2.2 Update the Workforce Development Plan to include annual training courses for each job position	Workforce Development Plan updated by the established timeline
1.2.3 Educate staff on the process to request professional development and educational opportunities	Staff education completed by the established timeline

1.2.4 Create a mechanism for employees to follow up with supervisors after training is complete	Training follow-up mechanism created and implemented by the established timeline
1.2.5 Identify consistent trainers for each position to ensure every new employee in the position, regardless of office location, receives the same information	Trainers identified and system implemented by the established timeline
Objective 1.3: Create or update current job aids for all positions by December 2027	
Strategies	Metric/Measure
1.3.1 Members from each department/section to develop and update job aids annually, aligning them with policies and procedures.	Reviews and updates completed by the established timeline
1.3.2 Ensure all new employees have access to all required agency software applications on first day of orientation with follow-up from both IT and human resources	Review of orientation materials to ensure the information is included
1.3.3 Include visual examples in the job training materials	Creation of visual examples complete by the established timeline
1.3.4 Provide information as to how each position aligns with others in the division/agency	Information provided to staff
Objective 1.4: Work with each staff member to create an employee-centered skill development plan during the annual review process by December 2027	
Strategies	Metric/Measure
1.4.1 Develop a tool for staff to use for a self-assessment related to skill development	Self-assessment tool developed and implemented

1.4.2 Complete self-assessment annually to identify areas of opportunity	Compilation and analysis of self-assessments completed on an annual basis
1.4.3 Review goals that are put on annual reviews for completion	Review of goals completed by established timeline
1.4.4 Support staff in their chosen development plan	Annual review of the staff development progress in chosen development plan

Strategic Direction 2: Community Engagement	
Goal: Promote the role and extend the reach of public health in our communities	
Champions: Aimmee Mullendore, Samantha Keeney, Shelby Young, Kris Dewey, Kyle Moore, Terri Penney, and Nathan Francis	
Objective 2.1: Maintain, enhance, and build authentic relationships with key stakeholders within the communities on an ongoing basis	
Strategies	Metric/Measure
2.1.1 Health Officer, Medical Director, Directors and Supervisors increase the visual presence in the community by attending events, meetings, and scheduling appointments with community partners. (Chambers of Commerce, Hospital board, town councils etc.)	Number of meetings attended and number of partners engaged
2.1.2 Continue developing short videos on social media about what we do or processes on how to do something (well permits, CSHCS applications, etc.)	Number of videos produced
2.1.3 Continue to create and disseminate “What to Expect”, Tip Sheets, “How-To” and “Where do I go” videos and fact sheets by department about how to do business with public health. Place on website	Number of tip sheets, videos and fact sheets added to the website annually
2.1.4 Continue participating and hosting partnership meetings within the communities – both in person and virtually	Number of meetings participated in with partners Number of meetings hosted with partners
2.1.5 Continue building relationships with businesses (including their HR departments) to educate about public health services	Number of business contacts annually
2.1.6 Increase the distribution of agency promotional brochures in all languages to locations such as housing complexes, laundry facilities,	Number and locations of agency brochure distribution

domestic violence shelters, international food stores, libraries, and locations where cultural groups gather for resources	
2.1.7 Continue building relationships with hospitals, health care providers, and clinics	Number of collaborative projects with hospitals, health care providers, and clinics
Objective 2.2: Build relationships with four non-traditional partners by December 2027	
Strategies	Metric/Measure
2.2.1 Continue to seek relationships with, and be present in places, where we can connect to people of various cultures, religions, and ethnicities	Number of new connections made with people of various cultures, religions, and ethnicities annually
2.2.2 Investigate partnerships with transit authorities for outreach opportunities	Number of partnerships created annually
2.2.3 Offer in-service learning opportunities to community partners to increase awareness of mission and services	Number of in-service opportunities annually
Objective 2.3: Develop four stories annually to help the community connect with public health beginning in 2027 and ongoing	
Strategies	Metric/Measure
2.3.1 Collect client testimonials and place them on websites and social media and include a link to the associated program	Number of client testimonials collected and placed on website on an annual basis
2.3.2 Highlight a program with a team member(s) each month with a story of what they do at the agency	Number of programs highlighted annually

2.3.3 Investigate alternative methods of seeking client/customer feedback continuously	Number of alternative methods tried to seek client/customer feedback on an annual basis
Objective 2.4: Nominate individuals and/or groups for annual public health awards annually beginning in 2027	
Strategies	Metric/Measure
2.4.1 Seek nominations from staff for individuals and groups to be submitted to available award programs	Number of nominations sought and submitted annually
2.4.2 Create an online portal for staff to submit nominees to Health Education and Promotion	Portal created by the established timeline

Strategic Direction3: Proactive Planning	
Goal: Implement policies that mitigate risk, promote innovation and support organizational success	
Champions: Rebecca Burns, Theresa Fisher, Laura Sutter, Joe Frazier, and Heidi Hazel	
Objective 3.1: Develop a succession plan for supervisors, directors, and health officer by December 2027	
Strategies	Metric/Measure
3.1.1 Develop paths to leadership development for staff	Paths developed by the established timeline
3.1.2 Develop a mechanism for staff to apply, or to be nominated, for additional leadership development opportunities	Mechanism established and implemented by the established timeline
Objective 3.2: Develop and complete cross training for department staff beginning in 2027 and complete by June 2028	
Strategies	Metric/Measure
3.2.1 Create a directory of staff with their area(s) of expertise when assistance is necessary	Directory created by the established timeline
3.2.2 Standardize program training check lists to provide consistent job performance across the jurisdiction	Program training check lists developed by the established timeline
3.2.3 Develop a procedural manual or reference guide for agency positions	Procedural manual/reference guides completed for agency positions by the established timeline
Objective 3.3: Ensure all staff retain, understand, and utilize developed policies and procedures by December 2028	
Strategies	Metric/Measure

3.3.1 Create a checklist for Supervisors to ensure new staff understand and utilize agency policies and procedures	Checklist created by the established timeline Annual analysis of staff understanding and utilization of agency policies and procedures
3.3.2 Continue the creation of policy quizzes and develop a schedule to be utilized agency-wide	Number of policy quizzes created, and staff success/scores analyzed Schedule developed and implemented
3.3.3 Educate staff on where to find all agency policies and procedures	Staff education completed on an annual basis
3.3.4 Create a “Fun Fact Friday” posting for the BHSJ Insider	Number of “Fun Fact Friday” postings created on an annual basis
Objective 3.4: Mitigate the agency’s risk related to cybersecurity on an ongoing basis	
Strategies	Metric/Measure
3.4.1 Provide a cybersecurity and IT risk educational opportunity with an external speaker (MMRMA) for all staff	MMRMA educational opportunity provided by the established timeline
3.4.2 Investigate opportunities to provide cybersecurity webinars to all staff quarterly	Number of webinars identified and provided to staff on quarterly basis
3.4.3 IT to provide important updates to staff related to cybersecurity at the monthly All Staff meeting	Number of IT updates provided to staff on an annual basis
3.4.4 Monthly tests by IT staff to identify cybersecurity weaknesses and improve staff member’s ability to identify “phishing”	Number of monthly tests provided annually
3.4.5 Implement multifactor authentication where possible	Implementation of multifactor authentication by the established timeline

Appendix A

Strategic Planning Meeting Participants

June 10, 2026, Leadership Team Meeting

Rebecca A. Burns, MPH, RS – Health Officer

Kris Dewey, BSHA, CPH - Health Education & Promotion Supervisor

Theresa Fisher, BS - Administrative Services Director

Joe Frazier, REHS - Environmental Health Director

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

Samantha Keeney, BSN, RN - Coldwater Clinic Supervisor, Immunization Program Manager

Kyle Moore, REHS - Environmental Health Supervisor

Terri Penney, RN - Hearing/Vision & Children's Special Health Care Supervisor

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

Shelby Young, BSN, RN - Hillsdale Clinic Supervisor, WIC Program Manager

June 18, 2026, Front Line Staff Meeting -AM session (Sign-In Sheet available upon request)

Abby Fader- EH Administrative Assistant

Adam Willis – Sanitarian

Alan Elliott – IT Manager

Alecia Campbell – PH Nurse

Amber Alexander- PH Nurse

Amey Little- Breastfeeding Peer

Annalisa Rice – Sanitarian

April Nordahl – Breastfeeding Peer

Bonnie Angus – Biller

Brianna Ellsworth- Clinic Tech

Candy Cox – Clinic Administrative Assistant

Diana Rogers – Administrative Assistant

Isabella Gutierrez – Health Educator

Kaity Gross – PH Nurse

Lina Perafan – Clinic Tech

Mackenzie Horsfall – Sanitarian

Mary Susland – Clinic Tech

Nate Francis – Emergency Preparedness Coordinator

Nina Smth -AAA Outreach

Olivia Jacobs -Sanitarian

Savanna York – Breastfeed Peer

Stephanie Hightree- CSHCS Rep

Tenia Dossett – Clinic Tech

Toni Laughlin – AAA Victim Specialist

Vera Sierminski- Clinic Tech

Connie Elliot - EH Administrative Assistant

June 18, 2026, Front Line Staff Meeting -PM session (Sign-In Sheet available upon request)

Abby Littlefield – PH Nurse

Alivia Karamatic – Sanitarian

Amanda Brooks – CSHCS Nurse

Angie Cole- Clinic Tech

Barb Keith- Sanitarian

Daniela Carmona – Clinic Tech

Emily Motes – Sanitarian

Jen Hull – Accountant

Jolene Sheffer- Clinic Administrative Assistant

Julia Brosnan – Sanitarian

Justin Hicks – IT Manager

Kaleigh Bonner – Sanitarian

Kayse O'Donnell – HR Assistant

Kim Boyter -Clinic Tech

Lisa Palmer – PH Nurse

Lisa Redmond – Community Health Worker

Lori Hibbs – Clinic Tech

Melissa Gilbert – Clinic Tech

Nichole Simon – AAA Administrative Assistant

Nicole Ewers – CSHCS Rep

Tina Scheidiller – PH Nurse

Wendy Nowicke – AAA VOCA

BRANCH-ST. JOSEPH AREA AGENCY ON AGING (IIIC)

Program, Policy & Appeals Committee Recommendations to the Board of Health - August 27, 2026

FY27-29 Contract Awards ~ AND ~ FY27 Grant Awards * (October 1, 2026 - September 30, 2027)

NON-COMPETITIVE BIDS

Bidder & Service(s)	County	Avail. Funds	Bid Request	Award Amount	Recommendations
Branch County COA	Branch				
<i>Case Coordination & Support</i>		6,219	6,219	6,219	award contract as proposed
<i>Homemaking</i>		33,180	43,329	43,329	award contract as proposed
<i>Personal Care</i>		12,609	7,500	7,500	award contract as proposed
<i>Chore Services</i>		3,360	5,460	5,460	award contract as proposed
<i>Respite Care</i>		9,886	16,606	16,606	award contract as proposed
<i>Health Promotion - Evidence Based</i>		3,610	3,610	3,610	award contract as proposed
<i>Home Delivered Meals</i>		137,790	137,790	137,790	award contract as proposed
<i>Congregate Meals</i>		46,491	46,491	46,491	award contract as proposed
<i>Caregiver Support</i>		3,612	8,003	8,003	award contract as proposed
<i>SHIP/MIPPA Health Insurance Counseling**</i>		**	n/a	6,800	award pending CareWell Services agreement &/or ACLS Bureau agreement
<i>TOTAL</i>				281,808	
Legal Services of South Central MI	Branch&St. Joe				
<i>Legal services</i>		12,000	12,000	12,000	award contract as proposed
St. Joseph County Transportation Authority	St. Joe				
<i>Transportation (demand/response & medical escort)</i>		28,635	37,223	28,635	award contract at \$28,635

Bidder & Service(s)	County	Avail. Funds	Bid Request	Award Amount	Recommendations
St. Joseph County COA	St. Joe				
<i>Case Coordination & Support</i>		8,589	8,589	8,589	award contract as proposed
<i>Homemaking</i>		45,820	45,820	45,820	award contract as proposed
<i>Personal Care</i>		17,412	17,412	17,412	award contract as proposed
<i>Chore Services</i>		4,640	4,640	4,640	award contract as proposed
<i>Respite Care</i>		13,653	22,933	22,933	award contract as proposed
<i>Home Delivered Meals</i>		190,281	197,821	197,821	award contract as proposed
<i>Friendly Reassurance</i>		2,320	2,320	2,320	award contract as proposed
<i>Health Promotion - Evidence Based</i>		4,986	7,886	7,886	award contract as proposed
<i>Unmet Needs</i>		1,740	1,740	1,740	award contract as proposed
<i>Home Repair</i>		2,900	2,900	2,900	award contract as proposed
<i>Caregiver Education</i>		4,903	11,051	11,051	award contract as proposed
<i>Congregate Meals</i>		64,202	56,662	56,662	award contract as proposed
<i>SHIP/MIPPA Health Insurance Counseling**</i>		**	n/a	6,800	award pending CareWell Services agreement &/or ACLS Bureau agreement
<i>Senior Medicare Patrol**</i>		**	n/a	2,700	award pending ACLS Bureau agreement
TOTAL				389,274	
Area Agency on Aging Region 3A - Kalamazoo Health & Community Services	Branch&St.Joe				
<i>Long Term Care Ombudsman Program</i>		2,000	2,000	2,000	award contract as presented, ACLS Bureau maintenance of effort

* Available funding based on FY27 service allotments, FY27 AIP budget, \$0 carry forward planned, includes planned transfers

All awards made are subject to FY23-25 MYP/FY23AIP Commission on Services to the Aging approval and subsequent grant awards from the Bureau of Aging, Community Living & Supports

** FY2027 SHIP/MIPPA & Senior Medicare Patrol Contracts are pending - Contract not awarded at this time (CareWell Services/MIOptons project & SMP through ACLS Bureau). SHIP/MIPPA/SMP funding is not bid out in the RFP process as it is not a part of our regular OAA/OMA grant allocations. Anticipated funding is noted.

BRANCH-ST. JOSEPH AREA AGENCY ON AGING (IIIC)

Program, Policy & Appeals Committee Recommendations to the Board of Health

August 19, 2026

COMPETITIVE BID(S)

BRANCH COUNTY - Transportation

Available Funds \$ 20,735

	BIDDER 1 BATrans	BIDDER 2 BCTrans
Bid Request	\$ 20,735	\$3,000
Grant Unit Rate	\$3.66	\$16.00
Number of Units	5,537	312
Program Income	227	900
Unduplicated Clients Served	180	60
Other Resources	Transit Millage, MDOT	Senior Millage

PPA Recommendations:

BIDDER 1 - Award contract as proposed at \$20,735

BIDDER 2 - Award contract as proposed at \$3,020

Program: Administration

Subject: Asset Disposal Policy

Effective Date: December 2, 2010

Updated: 8/27.2026

Purpose

The purpose of this policy is to establish consistent procedures for the disposition of Agency-owned property that is no longer needed, obsolete, damaged, or otherwise unsuitable for Agency operations. This policy applies to all Agency-owned assets, regardless of funding source, and ensures compliance with applicable federal, state, local, and grant-specific requirements.

Policy Statement

The Branch-Hillsdale-St. Joseph Community Health Agency is committed to the responsible management and disposition of Agency assets. All Agency-owned equipment, furniture, vehicles, technology, machinery, and other tangible property shall be disposed of in a manner that protects Agency resources, safeguards confidential information, complies with all applicable laws and regulations, and satisfies any restrictions imposed by grant agreements or other funding sources.

Assets purchased in whole or in part with grant funds shall not be disposed of until all applicable federal, state, and grant-specific requirements have been reviewed and satisfied. When grant requirements conflict with this policy, the grant requirements shall take precedence.

Implementing Procedures

A. Identification of Surplus Property

Department supervisors shall notify the Health Officer or designee when Agency property is no longer needed, is obsolete, damaged beyond economical repair, or otherwise unsuitable for continued use. Following review, the Health Officer or designee may declare the property surplus.

B. Review of Funding Source

Prior to disposal, the funding source for the asset shall be verified.

1. Assets purchased with federal, state, or other grant funds shall be reviewed to determine whether ownership, disposition, reimbursement, prior approval, or reporting requirements apply.
2. All grant requirements shall be satisfied before the asset is transferred, sold, traded, donated, or discarded.
3. When required, disposition shall be coordinated with the granting agency.

C. Inventory and Records

Prior to disposal:

1. Agency identification tags or inventory labels shall be removed or documented as retired.
2. The asset shall be removed from the Agency's fixed asset or inventory records, as appropriate.
3. Records of the disposal shall be maintained, including:
 - Description of the asset;
 - Asset identification number, if applicable;
 - Method of disposal;
 - Date of disposal;
 - Sale price, if applicable; and
 - Approval documentation.

D. Protection of Agency Information

Before any electronic device leaves Agency possession, all confidential, protected, or proprietary information shall be permanently removed using methods approved by the Agency's Information Technology staff. When electronic media cannot be securely sanitized, storage devices shall be physically destroyed or otherwise disposed of in a secure manner.

E. Internal Reassignment

Before being offered outside the Agency, surplus property should be evaluated to determine whether it can be reassigned to another Agency program or department.

F. Disposal Methods

When property is no longer needed by the Agency and all applicable grant requirements have been satisfied, disposition may occur through one or more of the following methods, as determined to be in the Agency's best interest:

1. Transfer or donation to another governmental entity or nonprofit organization, when permitted.
2. Trade-in toward the purchase of replacement equipment.
3. Public auction.
4. Sealed bid.
5. Online marketplace or auction service.
6. Sale through another commercially reasonable method.
7. Recycling or environmentally responsible disposal.
8. Disposal as scrap when the property has no remaining market value.

G. Sale of Surplus Property

When surplus property is expected to have significant market value, the Agency shall use a method intended to maximize the return to the Agency while ensuring fairness and transparency.

The Health Officer may determine the most appropriate method of sale based on the estimated value, condition of the property, and administrative efficiency. Public notice may be provided when appropriate, and minimum bids may be established.

H. Property with Minimal or No Value

Reviewed Date:

Property determined to have little or no market value may be recycled, scrapped, or otherwise disposed of in a manner that is safe, environmentally responsible, and in the best interest of the Agency.

I. Proceeds from Sale

Proceeds from the sale of Agency property shall be deposited into the appropriate Agency account. When required by grant agreements or applicable regulations, proceeds shall be distributed or remitted in accordance with those requirements.

J. Exceptions

The Health Officer may authorize alternative methods of disposition when determined to be in the best interest of the Agency and when consistent with applicable laws, regulations, Board policies, and grant requirements.

Reviewed Date:

PUBLIC COMMENT

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