



## **Plan of Organization**

### **Local Public Health Accreditation**

### **Cycle 8**

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## **BENZIE-LEELANAU DISTRICT HEALTH DEPARTMENT**

### **PLAN OF ORGANIZATION 2021-2024**

**SUBMITTED JULY 2024**

#### **1. LEGAL RESPONSIBILITIES AND AUTHORITY**

##### **a. State and Local Statutory Authority**

Each county in the State of Michigan has a statutory obligation to provide public health services. The Benzie-Leelanau District Health Department (BLDHD) operates under the authority of State and local statutes and regulations, including the Michigan Public Health Code, Michigan Food Law, local Sanitary Code, and other various regulations. A list of applicable statutes is provided below.

- Public Health Code (P.A. 368 of 1978)
  - MCL § 333.1105 – Definition of Local Public Health Department
  - MCL § 333.1111 – Protection of the health, safety, and welfare
  - Part 22 (MCL §§ 333.2201 *et seq.*) – State Department
  - Part 23 (MCL §§ 333.2301 *et seq.*) – Basic Health Services
  - Part 24 (MCL §§ 333.2401 *et seq.*) – Local Health Departments
  - Part 51 (MCL §§ 333.5101 *et seq.*) – Prevention and Control of Diseases and Disabilities
  - Part 52 (MCL §§ 333.5201 *et seq.*) – Hazardous Communicable Diseases
  - Part 53 (MCL §§ 333.5301 *et seq.*) – Expense of Care
  - Part 59 (MCL § 333.5923) – HIV Testing and Counseling Costs
  - Part 91 (MCL § 333.9131) – Family Planning
  - Part 92 (MCL §§ 333.9201 *et seq.*) – Immunization
  - Part 93 (MCL §§ 333.9301 *et seq.*) – Hearing and Vision
  - MCL § 333.11101 – Prohibited Donation or Sale of Blood Products
  - MCL § 333.12425 – Agricultural Labor Camps
  - Part 125 (MCL §§ 333.12501 *et seq.*) – Campgrounds, etc.
  - Part 127 (MCL §§ 333.12701 *et seq.*) – Water Supply and Sewer Systems
  - Part 138 (MCL §§ 333.13801 *et seq.*) – Medical Waste  
(Required to investigate if complaint made and transmit report to EGLE – 13823 and 13825)
  - MCL § 333.17015 – Informed Consent
  - Part 131: Body Art Facilities
  - Smoke Free Air Law, May 1, 2010
- Appropriations (Current: Act 119, P.A. 2023)
  - Sec. 1222 – Essential Local Public Health Services

- Michigan Attorney General Opinions
  - OAG, 1987-1988, No 6415 – Legislative authority to determine appropriations for local health services
  - OAG, 1987-1988, No 6501 – Reimbursement of local department for required and allowable services
  - OAG, 1983-1984, #6196 - Local health regulations adopted by District Boards of Health, may apply to only one county
  - OAG, 1996, #6891 – Application of the Administrative Procedures Act of 1969 to local health departments
  - OAG, 2002, #7117 – County authority to regulate withdrawal of well water from underground aquifer
  - OAG, 2007, #7205 – Local health department’s authority concerning immunization requirements
- Food Law of 2000 (P.A. 92 of 2000)
  - MCL §§ 289.1101 *et seq.*  
Specifically:  
MCL § 289.1109 – Definition of local health department  
MCL § 289.3105 – Enforcement, delegation to local health department
- Natural Resources and Environmental Protection Act (PA 451 of 1994)
  - Part 31- Water Resources Protection  
Specifically:  
MCL §§ 324.3101, *et seq.*
  - Part 22 - Groundwater Quality Rules (on-site wastewater treatment)  
R 323.2201, *et seq.*
  - Part 117 - Septage Waste Services  
Specifically:  
MCL §§ 324.11701, *et seq.*
- Land Division Act (P.A. 288 of 1967)
  - MCL § 560.105(g) - Preliminary Plat Approvals
  - MCL § 560.109a - Parcels Less than One Acre
  - MCL § 560.118 - Health Department Approval

- Condominium Act (P.A. 59 of 1978 as amended)
  - MCL § 559.171a - Approval of Condominiums not served by public sewer and water
- Safe Drinking Water Act (P.A. 399 of 1976 as amended)
  - MCL § 559.171a - Approval of Condominiums not served by public sewer and water
  - MCL § 325.1016 - Public Water Supplies
  - Agreements with local health departments to administer
- Ron Davis Smoke Free Air Law, Act No. 188, PA of 2009
- Public Health Clean Indoor Air Regulation of 2005
- Body Art Facility Licensing, Public Act 375, enacted December 2010
- [Benzie-Leelanau District Health Department – District Sanitary Code for Benzie and Leelanau Counties, 2023](#)
- Other Resources:
  - [Public Health Code \(PA 368 of 1978\)](#)
  - [Public Health Law Bench Book for Michigan Courts](#)
  - Local Health Department Matrix of Services

**b. Governing Entity's Relationship with LHD**

Public Health Code, Act 368 of 1978, as amended, authorized the formation and governance of a district health department through:

- Section 333.2406 (b): Defines “local governing entity” of a district health department as the county boards of commissioners of the counties comprising the district
- Section 333.2415: Creation of district health department; composition of the board of health

Benzie-Leelanau District Health Department, a local health department serving Benzie and Leelanau counties, was formed in 1996. The Board of Health consists of two members from each County Board of Commissioners and one member at large from each county in the district.

The Board of Health conducts regular monthly meetings on the 4th Wednesday of each month. The meetings are attended by the members of the Board of Health (or their designated alternate) and the Leadership Team, composed of the Health Officer, Medical Director, and Division Directors, as well as interested community members.

Monthly meetings provide an opportunity for communication between Board of Health and the health department Leadership Team. Information provided to the Board members at the meetings includes the financial status of the health department, reports from the operational divisions, programming and staffing updates, and other matters of public health significance. The Board of Health approves the annual operating budget, health department administrative and personnel policies, and unbudgeted or unexpected expenditures over \$5,000.

The County Boards of Commissioners, as the local governing entity of BLDHD, authorizes individual county allocations in accordance with the distribution formula adopted by the Board of Health, and in accordance with the Michigan Public Health Code. Each county Board of Commissioners reviews and approves regulations adopted by the Board of Health.

**c. Briefly describe the manner in which a local health department defends and indemnifies employees for civil liability.**

The health department provides [professional liability insurance](#) for employees through the Michigan Municipal Risk Management Authority (MMRMA). MMRMA was created by authority granted by the laws of the State of Michigan to provide risk financing and risk management services to eligible Michigan local governments. It is a separate legal and administrative entity as permitted by Michigan laws.

**d. Agreement, contract, arrangement for others to assist local health department in its Food Service Sanitation Program.**

All Food Service Sanitation Program responsibilities are carried out by Benzie-Leelanau District Health Department staff and not through any subcontracts.

**e. Exposure Plan for Blood Borne Pathogens and Chemical Hygiene Plan**

[Exposure Control Plan](#) and [Chemical Hygiene Plan](#) were updated in May 2024.

## **2. LOCAL HEALTH DEPARTMENT ORGANIZATION**

**a. Organizational Charts**

There are two BLDHD Organizational Charts: An [Agency-Wide chart](#) and a [Personal Health Division chart](#).

**b. Board of Health Approval of Plan of Organization**

The Plan of Organization was approved at the July 30, 2024, Board of Health meeting.

**c. Annual Total Operating Budget Amount and Total Number of FTEs for Public Health Services**

[Total Operating Budget](#) for 2024 is \$6,471,121. The FY 2024 Budget was [approved by the Board of Health](#) at its September 27, 2023, meeting.

Total FTEs funded in the BLDHD FY 2024 Budget is 50 FTEs.

**d. Information Technology capacity available to access and distribute current public health information**

- Microsoft 365, including Outlook email and Teams video conferencing
- Pathway Technology Solutions
- Email group to media outlets
- BLDHD [website](#)
- MailChimp
- Social media: Facebook, X (Twitter), Instagram, and You Tube
- Health Alert Network (HAN)
- Email group to local physicians, Emergency Departments
- State Drinking Water Information System (SDWIS)
- Safe Water Information Field Tool (SWIFT)
- 800 MHZ Radios
- Landline and smart telephones

**e. Most recent Audit**

Most recent [audit](#) was completed by Anderson Tackman & Company CPA for fiscal year 2023; there were no findings and no corrective action plans needed.

**3. MISSION, VISION, AND CORE VALUES**

**a. Mission**

The health department's mission is *to prevent disease, prolong life, and promote public health through prevention and control of environmental Health Hazards, prevention and control of disease, prevention and control of health problems of particularly vulnerable populations, development of health care facilities and health services delivery systems, regulation of health care facilities and health services systems to the extent provided by law.*

**b. Vision**

The health department's vision is *Optimal community health and well-being supported by equitable services, outreach and education, delivered by expert, caring and compassionate trusted public health professionals.*

**c. Core Values**

The health department's Core Values define who we are and what we stand for. They are important measures during annual staff reviews.

- |  |  |
|--|--|
| 1. Collaboration: Making a daily commitment to work well with others.                | 4. Drive and Initiative: Showing a strong motivation to work, and work well.       |
| 2. Conflict Resolution: Making the right choice to deal appropriately with conflict. | 5. Customer Focus: Providing excellent service to external AND internal customers. |
| 3. Demeanor: Consistently displaying a positive demeanor and outlook.                | 6. Fulfilling Job Expectations: Meeting and exceeding performance goals.           |

**4. LOCAL PLANNING AND COLLABORATION INITIATIVES**

**a. Outline or list local health department-specific priorities**

- [MiThrive Community Health Needs Assessment Initiative](#)

Priorities identified by residents and community partners for the 2021-2023 community health needs assessment cycle are: affordable and safe housing; access to behavioral health services; access to healthcare; and chronic disease prevention.

- [Agency Strategic Plan](#)

The BLDHD 2021-2025 Strategic Plan was developed with input from most staff and identified the following Strategic Directions:



- Reinvigorating community engagement and equitable access to services.
- Capitalizing on workforce potential.
- Supporting staff with healthy workplace culture and strong leadership.
- Maximizing financial resources.
- Workforce Assessments

In June 2023, BLDHD employees participated in the Permah Wellbeing Survey Tool for workplaces. This survey measured wellbeing in the areas of positive emotions, engagement, relationships, meaning, accomplishment and health. Wellness scores were in the Healthy Average or Exceptionally Healthy range for all areas except for Health (eating well, moving regularly, sleeping well, etc.). In September 2024, health department employees will have the opportunity to complete a similar survey tool, PH WINS. Results from the Permah Wellbeing Survey and the PH WINS survey inform agency strategic planning, staff training, and employee led initiatives led by the BLDHD Wellness Committee and the Employee Committee.

**b. Outline local health department plan to pursue priority projects**

The health department's Mission, community health needs assessment results, Agency Strategic Plan, workforce assessments, as well as post-COVID environmental scan informed identification of the following Priority Goals:

- Reduce barriers to social determinants of health (SDoHs)

BLDHD's plan to reduce barriers to SDoHs, like affordable housing, access to behavioral health, access to healthcare, and chronic disease prevention, has several components. First, staff working in all personal health programs assess SDoH needs and provide assistance or referrals. Second, the health department's Community Connections Hub, serving Benzie, Leelanau and Grand Traverse Counties, offers individuals and families navigation support to secure needed resources in the community. Third, the MiThrive assessment produces detailed data that quantifies and prioritizes community health needs and develops collaborative community health improvement plans for each prioritized need.

- Educate people about public health

BLDHD coordinates public health messages across multiple methods/platforms, including [news releases](#), Facebook, X (Twitter), and Instagram. Topics include crisis communications, beach advisories, national and state observances, award announcements, and program-specific information. Most public messaging is tracked on an [Outreach Log](#). Other outlets for public health messages are [Annual Reports and quarterly Provider Updates](#). For additional details, please see Section 6.b: List of LHD's mechanisms to report on its activities.

In addition to these ongoing communication and education efforts specific to the agency, the health department participates in a Northern Michigan Public Health Alliance project to increase awareness of the role of public health and foundational public health initiatives. The project consists of a series of videos and social media posts: [What is Public Health?](#), [Breastfeeding/WIC](#), [Community Connections](#), [Food Safety](#), [Immunizations](#), and [Safe Water](#).

- Maintain relationships with regional health departments

BLDHD has built positive relationships with local health departments across Northern Michigan: Health Department of Northwest Michigan, District Health Department #2, District Health Department #4; District Health Department #10, Central Michigan District Health Department and Grand Traverse County Health Department.

Collaborative initiatives with these regional health departments includes Dental Clinics North, Home Visiting Regional Leadership Program, Northern Michigan Community Health Innovation Region (including Community Connections and MiThrive), Northern Michigan Health Consortium, Northern Michigan Public Health Alliance, and Northern Michigan Regional Laboratory. These are discussed below in Section C: Community Partnership and Collaborative Efforts.

- Advocate for public health funding

The health department advocates for public health funding on its own behalf as well as collectively through Michigan Association for Local Public Health (MALPH) and the Northern Michigan Public Health Alliance (NMPHA).

NMPHA implemented a Legislator Education Plan in FY2023 that included alerting Senators and Representatives of the need to [increase the Essential Local Public Health \(ELPHS\) allocations](#), sharing common

messages/materials for the [MALPH Day at the Capitol](#) and other visits with Michigan Senators and Representatives, and following approval of ELPHS funding increase, a Legislator Appreciation Event in Lansing.

- Continue to educate and engage the Board of Health regarding important public health issues

Educating and engaging Board of Health members is an ongoing activity. As new members join the Board, they receive an orientation to the Agency that includes overviews of *Michigan's Guide to Public Health for Local Governing Entities*, Michigan Public Health Code, and BLDHD programs and services.

The Leadership Team provides written reports for monthly meetings and there is typically an in-depth program presentation as well. The Health Officer maintains ongoing contact with Board of Health members in between monthly meetings and standing committee meetings and Board members are copied on all News Releases issued to the media.

- Increase focus on workforce development

[The Agency Strategic Plan](#) focused two Strategic Directions on workforce development: *Capitalizing on Workforce Potential and Supporting Staff with Healthy Workplace Culture/Strong Leadership*. Together, the BLDHD Leadership Team created the [2024 Focused Implementation Plan \(FIP\)](#) for this section of the Agency Strategic Plan. This FIP includes specific activities, assignments, and timelines for completing them.

**c. Outline or list community partnerships and collaborative efforts:**

**Northern Michigan Health Alliance/NMPHA (31 County Region)**

The [Northern Michigan Public Health Alliance](#) (NMPHA) is a partnership of seven local health departments: Benzie-Leelanau District Health Department, Central Michigan District Health Department, District Health Department #2, District Health Department #4, District Health Department #10, Grand Traverse County Health Department and Health Department of Northwest Michigan.

Within the NMPHA, the health department is the recipient of a shared services agreement with the Health Department of Northwest Michigan for the Health Officer and Medical Director.

Health Department staff also participate in the following NMPHA workgroups:

- Maternal-Child Health CQI Workgroup
- Public Information Officer Workgroup
- Environmental Health Directors Workgroup

### **Community Health Innovation Region**

The [Community Health Innovation Region](#) (CHIR) is a collective impact model which aims to increase quality of life and length of life by reducing barriers to social determinants of health at individual, sector and system levels across the Northern Michigan Public Health Alliance (NMPHA) service area.

The CHIR consists of 3 interrelated programs:

1. Community Connections Navigation Hub

[Community Connections](#) is a centrally administered community health worker (CHW) program with [six hubs](#), each operated by a different local health department. The hubs share certification from the Pathways Community HUB Institute, data portal, and electronic health record, among other administrative functions. The [Community Connections Data Dashboard](#) posts detailed data that is monitored at the CHIR level to spur needed action in the community. It is also an important component of the MiThrive community health needs assessment.

Benzie-Leelanau District Health Department operates the Grand Traverse Community Connections Hub which serves Grand Traverse, Benzie, and Leelanau Counties. In addition to accepting referrals from healthcare providers and community partners, the Grand Traverse Hub has piloted targeting students and families in a school setting and patients in an obstetric setting, hospital emergency department and Dental Clinics North.

2. MiThrive Community Health Needs Assessment

[Mi-Thrive](#) is a regional community health needs assessment. Every three years, BLDHD participates on the MiThrive planning and steering committee and lends staff support for data collection, analysis, and presentation within the Northwest region, which encompasses 10 counties in the 31 county MiThrive service area. The current three-year MiThrive cycle began on January 1, 2024. [2021-2023 BLDHD MiThrive Report](#)

3. Collaborative Community Improvement Plan

Following each MI-Thrive cycle, the health department participates in the creation, distribution and implementation of the [Collaborative Community Health Improvement Plan](#) and [MiThrive Strategy Guide](#).

The [Regional Behavioral Health Initiative](#) and [Learning Community](#) are projects that address the Collaborative Community Health Improvement Plan. BLDHD staff participate in both of these projects.

BLDHD Staff participate in the following CHIR workgroups/committees:

- Northwest CHIR Steering Committee
- NW CHIR Learning Community
- Regional Clinical Community Linkages Workgroup
- MIThrive Steering Committee
- Regional Behavioral Health Initiative

### **Northern Michigan Health Consortium**

The Northern Michigan Health Consortium (NMHC) is a 501c3 not-for-profit that serves as the fiduciary organization for the NMPHA, CHIR and other regional initiatives. The BLDHD Health Officer serves on the Board of Directors of the NMHC.

### **Substance Use Prevention Coalitions**

Benzie-Leelanau District Health Department staff participate in county substance use prevention coalitions to utilize evidenced-based practices to increase awareness of the risks of youth substance use; enhance skills of community members; and create opportunities for youth to participate in substance-free activities. The coalitions work with stakeholders to create incentives and disincentives; support changes in physical design that prevent youth substance use; and modify or implement policies and procedures.

- BAY (Benzie Area Youth) Initiative is the Benzie County coalition. Recent initiatives target youth vaping, including a poster contest and implementation of Catch My Breath vaping prevention for 6<sup>th</sup> graders; and an information campaign and lockbox distribution to encourage adults to keep marijuana and drugs/medications locked and inaccessible to youth.
- Leelanau Substance Abuse Prevention Coalition (LSAPC) is the Leelanau County coalition and addresses substance use across the lifespan, with a priority focus on youth. Initiatives include increased community access to Narcan and implementation of the Natural High program for high school students. The coalition partnered with NMPHA to conduct a community wide [substance use assessment for Leelanau County](#).

### **School-Based Programs**

- Husky Health and Wellness Community Advisory Committee
- Comet Clinic Community Advisory Committee
- Norseman Health Community Advisory Committee

- FEAS SWP Community Advisory Committee

### **Emergency Preparedness**

- Local Emergency Planning Committees (Benzie and Leelanau County)
- Region 7 Emergency Preparedness Coordinators (includes Healthcare Coalition and Grand Traverse Band of Ottawa and Chippewa Indians)
- Region 7 Planning Board Team

### **Multipurpose Collaborative Bodies**

- Benzie Human Services Collaborative
- Leelanau County Family Coordinating Council

### **Environmental Health**

- Michigan Association of Local Environmental Health Administrators (MALEHA)
- Northern Michigan Environmental Health Directors Committee
- Northern Michigan Regional Noncommunity Public Water Supply Coordinators Workgroup
- Northern Michigan Regional Food Program Coordinators Workgroup
- Regional Watershed Committee

### **Personal Health**

- Regional Perinatal Quality Collaborative
- Regional MCH CQI Workgroup
- Perinatal Substance Use Disorders Steering Committee
- Health Futures Steering Committee
- Northwest Michigan Breastfeeding Coalition
- Traverse Bay Child Advocacy Center Board
- Benzie Cares for Kids/Child Abuse Council Board
- Local Leadership Group for Region 2
- Benzie Family Services Workgroup
- Grand Traverse Family Support Group
- Migrant Resource Council
- National Association of School Nurses
- 5ToOne Leelanau Advisory Group
- Leelanau 0-6 Workgroup
- Parenting Communities Advisory Committee
- Leelanau County League of Women Voters Early Childhood Needs and Services Committee
- Leelanau Early Childhood Development Commission Workgroup
- Great Start Collaborative

- Northwest Education Services School Readiness Advisory Committee
- Northwest Chapter of the Association of Infant Mental Health
- MIHP Medicaid Managed Health Plan quarterly meetings

**d. State Initiatives and Committees**

**Administrative Team**

- American Academy of Pediatrics and Michigan Chapter
- Keep MI Kids Tobacco Free Alliance
- Michigan Advisory Committee for Immunizations
- Michigan Association of Public Health and Preventive Medicine Physicians
- Michigan State Medical Society
- MALPH Administrator's Forum
- MALPH Nurse Administrator's Forum
- MALPH Board of Directors
- MALPH Environmental Health Directors Forum
- Michigan Council for Maternal Child Health

**Personal Health**

- MALPH Health Promotion and Health Education Forum
- School Community Health Alliance of Michigan
- Michigan Association of School Nurses
- Michigan Data Modernization Workgroup
- Patagonia User Groups
- Hearing and Vision Screening State-Local Workgroup
- Regional IAP Group
- Michigan Council for Maternal Child Health

**Environmental Health**

- Michigan Environmental Health Association
- Michigan Association of Local Environmental Health Administrators
- Michigan Failing Septic Loan Program Standards Committee
- EGLE Noncommunity Water Supply Program Workgroup
- Statewide Code Stakeholders Workgroup

**5. SERVICE DELIVERY**

In addition to offering public health services within its jurisdiction (Benzie and Leelanau Counties), BLDHD operates four School Wellness Programs (SWP) in 4 school districts and provides school nursing support in an additional 3 schools.

County	Health Department Offices	School Health Programs
<b>Benzie County</b>	6051 Frankfort Hwy Benzonia, MI 49616 231-256-0200 M-F, 8-4:30	Husky Health and Wellness Center (SWP) Benzie Central Middle/High School 9222 Homestead Rd Benzonia, MI 49616 M, W, F, 8-4
		Huskey Health and Wellness Center (SWP) Homestead Hills Elementary School 849 Husky Trail Benzonia, MI, 49616 T, Th, 8-4
		Lake Ann Elementary School 19375 Bronson Lake Rd, Interlochen, MI 49643 M, W, 8-4
		Betsie Valley Elementary School 17936 Cadillac Hwy Thompsonville, MI 49683 T, Th, 8-4
		Frankfort Elberta Area Schools Middle/High School (SWP) 534 11 <sup>th</sup> St Frankfort, MI 49635 M-F, 8-4
		Frankfort Elberta Area Schools Elementary School (SWP) 613 Leelanau Ave Frankfort, MI 49635 M-F, 8-4
<b>Leelanau County</b>	Personal Health Office 7401 E. Duck Lake Rd Lake Leelanau, MI 49653 231-256-0200 M-F, 8-4:30  Environmental Health Office 8527 E. Government Center Dr, Ste LL-007 Suttons Bay, MI 49682 231-256-0201 M-F, 8-4:30	Suttons Bay Public Schools (SWP) 310 Elm St Suttons Bay, MI 49682 M-F, 8-4
		Leland Public Schools Comet Clinic (SWP) 200 N. Grand Ave Leland, MI 49654 M-F, 8-4
		Northport Public School 104 S. Wing St Northport, MI 49670 T, W, Th, 8-4

### Personal Health Division

- School Health Programs



- SWP -Husky Health and Wellness Center (Benzie Central Community Schools)
- SWP - Frankfort Elberta Area Schools
- SWP - Comet Clinic (Leland Public School)
- SWP - Suttons Bay Public Schools
- School-Based Nursing Services: Benzie-Central Community Schools – Lake Ann Elementary School and Betsie Valley Elementary School
- School-Based Nursing Services: Northport Public School
- Emergency Preparedness
  - Public Health Emergency Preparedness
  - COVID-19 Response
- Blood Lead Testing
- Breastfeeding Support Services
- Children’s Special Health Care Services
- Communicable Disease and Infection Control
- Community Connections
- Fluoride Varnish
- Healthy Families Northern Michigan
- Hearing and Vision Screening
- HIV/STI Testing
- Hepatitis C Testing
- Immunizations
- Maternal Infant Health Program
- Medicaid Enrollment
- Newborn Home Visits/Healthy Futures
- Parenting Communities
- Harm Reduction Services
- WIC Nutrition Program

### **Environmental Health Division**

- Land Use Programs
  - Beach Monitoring
  - Emerging Contaminants (PFAS, vapor intrusion, etc.)
  - Public/Private Onsite Wastewater
  - Public/Private Water Supply
  - Radon Prevention Program
  - Residential Water Testing
  - Septic Care
  - Subdivision and Site Condo Review
  - Time of Transfer Evaluation

- Type II Non-Community Water Supply Monitoring
- Well and Septic evaluation and permits
- Long term monitoring (groundwater contamination)
- Disinfectant Permitting
- Vacant Land Evaluation
- Emerging Threats (PFAS, Vapor Intrusion, Etc.)
- Food Service Programs
  - Food Protection
  - Food Service – Permanent Establishment
  - Food Service – Temporary
  - Transitory Food Units and Mobile Units
  - Food Service – Food Safety Manager Classes
- Inspections
  - Body Art/Tattoo Facility Inspection
  - Campground Inspection
  - MDHHS Day Care/Foster Home Inspection
  - Nuisance Complaints
  - Public Swimming Pool Inspection

## 6. **Reporting and Evaluation**

### **a. LHD's efforts to evaluate its activities**

- Medical Director monitors and evaluates epidemiological information for local, state, national, and international communicable infections and chronic diseases.
- Personal Health Division's program and clinical data are entered daily into Patagonia software. Reports linked to program objectives are generated on a monthly basis. These updates are used to monitor projected financial and program goals. Managers review program goals and statistics with staff on a regular basis and adjust clinic and program activity as needed to meet projections.
- Continuous Quality Improvement is conducted for school-based programs, including client satisfaction surveys and workplan adherence with education components. Other programs operate by workplan, often with pre- and post-tests. Yearly evaluation data drives expansion/contraction.

- Satisfaction Surveys are administered to all clients receiving Personal Health services. Clients may receive surveys that are program specific, such as Parenting Communities or CSHCS. Remaining clients receive an agency-specific rather than program specific satisfaction survey. Surveys are electronic and accessed through a link or QR code and are completed anonymously. School-based satisfaction surveys are paper forms completed by students and dropped into an anonymous dropbox at each school.
  - Staff daily activities are recorded in electronic software programs and monitored by supervisors and Leadership Team.
  - Quarterly reports of Environmental Health Division activities are reported to Michigan Departments of Agriculture and Rural Development; Environment, Great Lakes and Energy; and Health and Human Services as part of Minimum Program Requirements
  - Quarterly reports required by specific Personal Health programs are completed and reported to funding source (Medicaid Outreach, SWP, STD, CSHCS, etc).
  - Quarterly reports to the Office of Public Health Preparedness on community and regional activities of the Northern Michigan Emergency Preparedness Team
  - The Health Department's Finance Department reviews and summarizes program financial information and facilitates third party billing. During this process, monthly Financial Status Reports are prepared and reviewed with program division directors and the Health Officer to assist in program management and evaluation. Quarterly Financial Status Reports required by contracts with the State of Michigan are prepared and reviewed prior to submission to the State. An independent financial audit is conducted and reported to the Board of Health on an annual basis.
- c. List of LHD's mechanisms to report on its activities to its governing entity and community (Also see section 1b.)**
- Website
  - Board of Health meeting packets and recordings
  - News Releases to local media, also placed on website and shared through social media
  - Interviews with television and radio stations and newspapers

- Physician's Update, a quarterly newsletter from Medical Director
- Posters, flyers, brochures, display tables at community sites
- Presentations at conferences, civic group meetings, and multipurpose collaborative bodies
- [BLDHD Publications Webpage](#), includes Annual Reports, Provider/Physician Updates, Press Releases, etc

## **7. HEALTH OFFICER AND MEDICAL DIRECTOR**

### **a. Local health department procedure for the appointment of a Health Officer and Medical Director**

According to the [BLDHD By-Laws](#), there are two standing committees of the Board of Health: Program and Evaluation Committee and the Personnel and Finance Committee.

The duties of the Personnel and Finance Committee include the responsibility to implement a policy and procedure for health officer and medical director replacement. In the event this is necessary, the Board of Health utilizes the Local Health Department Health Officer and Medical Director Requirements and Qualification Review guidance document provided by the Michigan Department of Health and Human Services. This document sets forth qualifications and a verification and approval process for the appointment of a Health Officer or Medical Director.

### **a. Correspondence from MDHHS approving the qualifications of the Health Officer and Medical Director**

- Daniel R. Thorell, M.S., R.S., Administrative Health Officer  
[MDHHS correspondence with approval](#), [Board of Health approval](#), [resume/CV](#), [diploma\(s\)](#), and [sanitarian registration](#)
- Joshua R. Meyerson, M.D., M.P.H., Medical Director  
[MDHHS correspondence with approval](#), [Board of Health approval](#), [resume/CV](#), [diploma\(s\)](#), and [license to practice medicine](#)