HEALTH DEPARTMENT OF NORTHWEST MICHIGAN
BOARD OF HEALTH MEETING

Meeting will be held at:
10:00 a.m. Tuesday, July 2, 2024
Charlevoix County Shirley Roloff Center
13513 Division Street, Charlevoix, MI 49720
(231) 547-7663

ZOOM OPTION AVAILABLE

Safety Capacity
In person attendance will be limited to allow for spacing and following the Charlevoix County Shirley Roloff Center capacity limits as established by the Fire Marshall. Attendees are reminded they can also view the meeting via Zoom with the link provided. Public comment will not be allowed via Zoom.

Submission of Comments on Agenda Items
Public Comment on any agenda item may be shared through our website to address the Board of Health by clicking this link: PUBLIC COMMENT CARD. To have your comment electronically delivered to Board of Health members for review prior to the meeting, they must be submitted by 10 a.m. the day prior to the scheduled public meeting. Public comment cards submitted after that time will be printed and provided to Board of Health members at the scheduled meeting. NOTE: Public comments submitted via public comment card will be reviewed but not read at the meeting.

Meeting Accessibility
Pursuant to the American with Disabilities Act, individuals who, because of a disability, need special assistance to attend or participate in the Board of Health meeting, may request assistance by calling (231) 547-7663 or by emailing m.bosman@nwhealth.org. Requests should be made by Sunday, June 30, 2024.

The availability of Public Comment is recognized by Robert’s Rules of Order and the Michigan Open Meetings Act to provide for orderly comment from the public. Public comments are welcome and are important to the Board of Health. To that end, the following information is provided:

1. Speakers are encouraged to use the podium and microphone so that Board members can clearly hear their message.

2. Before beginning, a speaker should clearly state their name.
3. The Chairperson may implement a sign-up sheet for public comment at any time during a meeting if it becomes necessary to better organize a large public turnout.

4. There is a three (3) minute time limit for each speaker. Timing will begin after a speaker’s name is established. Upon notification that thirty (30) seconds remain, speakers must make every effort to conclude their comments within this timeframe.

5. Upon the oral request of a member of the public (“donor”) who is present at a public meeting and who wishes to donate his or her speaking slot to another member of the public (“speaker”), and with the permission of the Chairperson which shall not be unreasonably withheld, a speaker may comment for up to six (6) minutes, equivalent to two (2) public speaking slots.

6. Public comment shall be addressed to the Chairperson, not to Health Department staff or individual Board of Health members.

7. Speakers should be germane, courteous, and respectful during their speaking time; strongly worded advocacy, however, is to be expected, and shall not by itself be considered discourteous or disrespectful by the Board of Health.

8. If a speaker desires to provide materials to Board members during the meeting, the speaker or a designee will give the materials to the Board’s secretary for distribution.

9. The Chairperson has the discretion to permit members of the public to speak at times other than those times reserved for public comment.

10. These Public Comment Rules will be incorporated with the posted agenda for each public meeting of the Board of Health so that they are readily available to each person who desires to speak at the meeting. The Board of Health expects that each person desiring to speak at the meeting will have read and will comply with these rules.
AGENDA

BOARD OF HEALTH MEETING
10:00 a.m. Tuesday, July 2, 2024
Meeting will be held at the Charlevoix County Shirley Roloff Center
13513 Division St., Charlevoix, MI 49720

For more information, please call (231) 547-7663
ZOOM OPTION
Please click this URL to join.
https://us06web.zoom.us/j/86851649313?pwd=L0yXz0WxmxY3lPS1ba4MY08NFDr4b.1
Passcode: 228598
Or dial: 1 929 205 6099
Webinar ID: 868 5164 9313
Passcode: 228598

I. Call to Order Commissioner Hankins

II. Pledge of Allegiance Commissioner Hankins

III. Invocation Commissioner Hankins

IV. Roll Call Commissioner Hankins

V. Add or Remove Agenda Items Commissioner Hankins

VI. Review/Approval of the Meeting Minutes from June 4, 2024 Commissioner Hankins

VII. Public Comment

VIII. Staff Reports

   a. Health Officer Report Dan Thorell

Written Reports Submitted By:
   a. Family Health Director Melissa Hahn
   b. Environmental Health Director Jeremy Fruk
IX. Committee Reports
   a. Personnel & Finance Committee
      1. May Bill and Employee Expense Approval
         (Action Item) Commissioner LaVanway
      2. Employee Compensation Committee Request
         (Action Item) Commissioner LaVanway
   b. Program & Evaluation Committee
      1. Draft Board of Health By-Laws and Rules of Order
         (Action Item) Commissioner Chamberlain
      2. FOIA Procedures & Guidelines
         (Action Item) Commissioner Chamberlain

X. Unfinished Business

XI. New Business

XII. Public Comment (Three Minute Limit)

XIII. Commissioner Comment (Three Minute Limit)

XIV. Adjournment
Call to order: A regular meeting of the Board of Health was held at the Shirley Roloff Center in Charlevoix on June 4, 2024. The meeting was called to order at 10:00 a.m. by Commissioner Hankins, Chairperson. Eight (8) members of the Board of Health were in attendance establishing a quorum.

Members in attendance, roll call: Commissioners Scott Hankins, Josh Chamberlain, Dawn LaVanway, Terry VanAlstine, Neil Ahrens, Don Mapes, Jonathan Turnbull, and Henry Mason

Members absent/excused: None

Staff in attendance: Dan Thorell, Dr. Joshua Meyerson, Shannon Klonowski, Melissa Hahn, Kathleen Jakinovich, Jen Vollmer, Jeremy Fruk, Janenne Pung, Tim Hella, Chris LaCroix, Nate Damer, and Melanie Bosman

PLEDGE OF ALLEGIANCE

INVOCATION

APPROVAL OF AGENDA

MOTION: Commissioner VanAlstine made a motion to remove item IX. New Business, a. Iron Pig Appeal Discussion (Open or closed session TBD) from the agenda. Supported by Commissioner LaVanway. Roll call. Six (6) ayes. Commissioners Mapes, Ahrens, VanAlstine, Hankins, LaVanway, and Chamberlain. Two (2) no. Commissioners Turnbull and Mason. Motion carried.

Dan requested that we add the July 2, 2024 meeting under IX. New Business on the agenda. Eight (8) board members agreed by consensus to add this item to the agenda.

APPROVAL OF THE MAY 7, 2024, BOARD OF HEALTH MEETING MINUTES:

MOTION: Commissioner Chamberlain made a motion to approve the May 7 meeting minutes as presented. Supported by Commissioner Mapes. Roll call. Eight (8) ayes. Motion carried.

APPROVAL OF THE MAY 21, 2024, BOARD OF HEALTH SPECIAL MEETING MINUTES:

MOTION: Commissioner VanAlstine made a motion to approve the May 21 special meeting minutes as presented. Supported by Commissioner Chamberlain. Roll call. Eight (8) ayes. Motion carried.

PUBLIC COMMENT: Public comment was heard.

NEW BUSINESS

MOTION: Commissioner LaVanway made a motion to authorize the Health Department of Northwest Michigan to participate in the Michigan CLASS. Supported by Commissioner Chamberlain. Roll call. Eight (8) ayes. Motion carried.

BOH MEETING JULY 2, 2024

Discussion was held regarding the upcoming BOH meeting scheduled for July 2, 2024. Commissioner Hankins asked each board member if they will be available to meet for the July 2 meeting. All commissioners said that they can attend. It was decided unanimously by consensus that we will still hold our regular BOH meeting on July 2, 2024.
STAFF REPORTS
Dan Thorell, M.S., R.S. Health Officer – Oral and written reports were shared, including Workforce Development and Retention, Benzie-Leelanau District Health Department Decision and Charlevoix Office to Get Roof Repairs.

Written reports:
- Joshua Meyerson, MD, MPH, Medical Director – Submitted a report on Spring 2024 Provider Update.
- Kathleen Jakinovich, MPH, Director of Community Health – Submitted a report on Community Anti-Drug Coalitions of America, SAFE Youth Highlights, St Patrick’s Day Stickers, and SAFE Spirit Nights.
- Melissa Hahn, MPH, BA, RN, Director of Family Health – Submitted a report on Community Connections.
- Jeremy Fruk, M.S.A., R.E.H.S., Director of Environmental Health – Submitted a report on Land Use Program Permits and Evaluations from 2019 to Present.

PERSONNEL & FINANCE COMMITTEE
ACCOUNTS PAYABLE:
MOTION: Commissioner LaVanway made a motion that the finance committee met to review the bills and employee expenses and recommended approval of the full board of the April 2024 bills in the amount of $785,823.61 and the April 2024 employee expenses of $21,247.72. Supported by Commissioner Ahrens. Roll call. Eight (8) ayes. Motion carried.

PUBLIC COMMENT: Public comment was heard.

COMMISSIONER COMMENT: Commissioner comment was heard.

ADJOURNMENT
Commissioner VanAlstine made a motion to adjourn the meeting. Supported by Commissioner Chamberlain. Voice vote. All ayes. Motion carried. Meeting adjourned at 10:50 a.m. Tuesday, June 4, 2024. July 2, 2024, at 10 a.m. was the fixed date and time for the next regular meeting of the Board of Health at the Charlevoix County Shirley Roloff Center.

Respectfully submitted,

Dan Thorell, Health Officer
July 2, 2024

Scott Hankins, Chairperson
MEMORANDUM

Date: July 2, 2024

To: Board of Health

From: Daniel R. Thorell, Health Officer

Re: July Board Update

Succession Planning

The Health Department of Northwest Michigan (HDNW) leadership team attended a Succession Planning Workshop presented by Cindy Cameron of Cameron Leadership Consulting. Succession planning is part of the HDNW Agency Strategic Plan (ASP). In fact, succession planning is an important factor that contributes to the success of strategic direction number one which is: *Fostering excellence, engagement, leadership, and resiliency in a highly skilled workforce.* The timeline that was initially developed in the ASP indicates that the succession plan will be implemented in October. Leadership is on track with this timeline. However, succession planning is ongoing and should be revisited often to address workforce changes.

The workshop provided tools and materials to help the leadership team develop the succession plan through a distinct process. Each step is important and helps agency leadership identify and develop future leaders in the organization. The process involves assessing needs, identifying potential leaders, discerning professional development needs, designing a personalized development path, and providing staff with room for growth.

The Succession Planning Process

The first step of assessing need began several months ago but has been mostly informal through conversations at leadership staff meetings. A more intentional approach will be taken by looking at the agency’s organizational chart and determining who is likely to leave in the near future due to retirement or transition.
Once the assessment is done, the next step is to identify potential future leaders. There are best practices to consider when reviewing talent within the agency.

- Define the process
- Conduct pre-review discussions
  - What are the needs of the agency now and in the future?
  - What are your assumptions about what leadership looks like?
  - Who will support the organization’s mission, vision, and values?
- Evaluate talent at all levels
- Establish guidelines

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<th>POTENTIAL</th>
<th>PERFORMANCE</th>
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<td>High</td>
<td>Under Achiever</td>
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<td>Moderate</td>
<td>Inconsistent Player</td>
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<td>Low</td>
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The next steps, after identifying the potential future leaders in the organization, are to determine the professional development needs and develop personalized plans to achieve goals. This can be tailored to fit specific positions where the agency has the most need in coming months or years. There are key questions that must be addressed when developing what success looks like for specific positions.

- What are the most important functions of the job?
- What does it take to be successful in this job?
- What characteristics distinguish the excellent from the average for this position?
- Other observations about the job?

Delegation is an important tool to help future leaders grow their abilities. Delegation is powerful and can achieve improvement in several areas.

- Builds leadership capacity
- Develops new skills
- Increases sense of belonging
- Improves communication
- Boosts moral
- Develops trust
At HDNW, with significant turnover in leadership staff and inevitable changes at all levels, succession planning will be an important part of the work ahead in the next 2 to 3 years. Regular meetings are being scheduled to work through the succession planning process with the goal of fostering leadership growth from within whenever possible. The methods and tools used during this process are also helpful if the only option is to hire from the outside. The analysis of key leadership positions will provide insight and help guide recruitment.

**Health Officer Highlights from June**

- Janenne Pung was named Director of Community Health. Janenne has been serving as the agency’s Public Information Officer and Community Outreach Coordinator since April of 2022. She brought with her years of experience managing communication and outreach projects in the private sector as an Editorial Director in the shipping industry as well as a Communication Specialist in the nuclear industry. Janenne has been instrumental in leading several initiatives here at HDNW to improve internal and external communications. After the creation of the School Health Division, the Community Health Division was reorganized to include additional programs such as Community Connections, Regional Planning, and Regional Clinical Lab. Janenne’s work experience at the agency and in previous roles will help guide the new Community Health Division moving forward.

- Community Health continues to work through the process of applying for the grant previously approved by the Board from the Office of Highway Safety Planning. We are entering the second of two stages in the application process. A more thorough update will be provided based on the outcome.
Date: July 2, 2024

To: Board of Health

From: Melissa Hahn, MPH, RN, Director of Family Health

Re: WIC Produce Connection (Formerly Project Fresh)

WIC has been participating in a partnership with local farmer’s markets since 1989 in Michigan. This year, there are many updates, including a name change. Project Fresh will now be known as WIC Produce Connection.

WIC Produce Connection helps to provide healthy and nutritious produce to Michigan WIC clients, while fostering economic development by promoting agricultural products. This provides clients with locally grown, fresh, unprepared fruits and vegetables from local farm markets.

One of the major changes is that the benefits will be directly loaded onto the client’s WIC card to use at the farmer’s markets, as opposed to paper vouchers. Local markets have worked over the last few years to implement a system to incorporate EBT cards through Michigan’s Supplemental food programs. This work has paved the way for WIC to move to this format as well. Another added benefit this year is that clients can use their monthly cash value benefit (fresh fruits and vegetables) at authorized growers throughout the year rather than just during the summer months.

2023 Project Fresh Numbers

- 2,057 coupons redeemed
- $10,285 added to the local economy at farmer's markets
- $10,285 worth of fresh fruits and vegetables added to regular WIC benefits in families with pregnant mother's and children from birth to age 5
MEMORANDUM

Date: June 28, 2024

To: Board of Health

From: Jeremy E. Fruk, M.S.A., R.E.H.S., Director of Environmental Health Director

Re: Beach Monitoring Program

2024 Beach Monitoring Program
Northwest Michigan is known for its recreational waters, with hundreds of miles of Lake Michigan shoreline, as well as hundreds of miles of shorelines on inland waterways and inland lakes. Each year thousands of visitors, as well as many local citizens, visit our beaches to take advantage of these beautiful resources. HDNW has historically conducted sampling and limited beach surveys at these beaches to maintain the safety of our beaches for recreational use.

The beach program has been a hugely successful endeavor for our agency and has garnered appreciation within the community and with visitors to our area. Our most popular beaches are sampled once a week for 11 weeks. Beach sampling this year started the week of June 17. Our secondary beaches, which are not as heavily used historically, are sampled twice during the summer.

When beach samples show elevated bacteria, HDNW will either post a partial body contact advisory or a no body contact advisory based on sample results. Partial body contact advisories occur when beach sample results are between 300 E. coli per 100ml to 1000 E. coli per 100 ml. A partial body contact advisory indicates that the beach shall be used for wading, boating, paddling, and fishing. When beach sample results are elevated above 1000 E. coli per 100ml, the beach will be advised for no body contact. This procedure aligns with the E. coli standards for swimming provided in the Michigan Public Health Code and Rule 323.1062(1) of the Part 4 Water Quality Standards (as promulgated pursuant to Part 31 of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended.

Our regional lab has worked hard on preparing rapid testing for sampling our beaches this year. Rapid testing involves the use of qPCR methods and results are obtained within the same day as opposed to traditional Colilert methods that have next day results. HDNW will use rapid methods to test 8 beaches that have had the highest number of advisories over a 5-year period. This provides a better service for locals and tourists who frequent our beaches through closer to real-time notifications.

Our regional lab has also been conducting microbial source tracking (MST) for beaches that require repeat testing. MST identifies fecal sources of water contamination by detecting microbes found in a variety of animals. Currently, we are testing microbials for humans, bovines, and geese. MST can provide valuable information, especially if a beach water has consistent advisories or very high levels of E. coli. With MST results, it's possible to identify the source of the contamination to help correct an issue at a beach.

The following list provides the names of the beaches that we are currently sampling this summer.
Monitored Primary Beaches

Barnes Park  
Elk Rapids Veterans Memorial  
Elk Rapids North Beach  
Richardi Park  
Torch Lake Day Park  
Wooden Shoe Park  
Echo Twp Park  
Eastport  
Fisherman's Island  
Lake Michigan Beach  
Young State Park  
Elm Point Beach  
East Jordan Tourist Park  
Whiting Park

Monitored Secondary Beaches

Antrim County Day Park  
Banks Twp Park  
Thurston Park  
Eastern Ave. Beach  
Norwood Park  
Glenwood Beach  
Washington St Beach  
Michigan Ave Beach  
Resort Pike Rd. Beach  
Center Twp./ Pioneer  
Magnus Park  
Readmond Twp Beach  
Channel Beach  
Zoll Street  
Bear Lake SFCG  
Melrose Twp. Park  
Ferry Beach  
Depot Beach  
Thumb Lake Beach  
Zorn Park  
Petoskey State Park  
Mackinaw 1  
Mackinaw 2  
Middle Village  
Cross Village  
Wilderness State Park  
Sturgeon Bay  
Camp Petosega  
Oden  
Little Traverse Township  
Arbutus Beach  
Otsego County Park  
Otsego Lake State Park  
WahWahSoo Beach  
Big Lake
FINANCE COMMITTEE – ACCOUNTS PAYABLE

JULY MEETING: 2024

MOTION: The finance committee met to review the bills and employee expenses and would like to make a motion for the full board to approve the MAY 2024 bills, in the amount of $676,502.62 and the MAY 2024 employee expenses of $23,921.49.
June 13, 2024

Mr. Neil Ahrens  Mr. Josh Chamberlain  Mr. Scott Hankins  Ms. Dawn LaVanway
Mr. Don Mapes  Mr. Henry Mason  Mr. Jonathan Turnbull  Mr. Terry VanAlstine

Compensation Proposal for Fiscal Year 2025

Dear Board Members:

The compensation committee appreciates the Board of Health for their ongoing support of the employees of the Health Department of Northwest Michigan. Working together with the Board of Health has been effective in serving our communities and implementing our agency’s mission statement.

“The mission of the Health Department of Northwest Michigan is to serve the entire community and to achieve health equity by promoting well-being, preventing disease, and protecting the environment through partnerships, innovation and excellence in public health practice.”

Thank you for your leadership and for your careful review of the proposal for fiscal year 2025. Our proposal addresses employee morale, retention, and recruitment, while remaining fiscally responsible.

Fiscal year 2025: Cost of living and inflation have steadily increased over the last two years, and we have seen significant staff turnover. Employees have been shouldering both burdens. As a public entity, HDNW has not been able to keep pace with appropriately adjusted compensation. We recognize the need to balance this reality with maintaining fiscal responsibility. Cost of living and staff retention remain top priorities for our employees. We recognize the need for creative solutions when addressing employee compensation. Our modest plan for fiscal year 2025 is defined below:

1. **A Cost of Living Adjustment (COLA)**
   A wide variety of county entities have received cost of living adjustments, raises, and one-time wage adjustments since the last time we addressed our compensation package in 2022. We acknowledge the recently approved cost of living adjustment for county employees for upcoming fiscal years, while recognizing the importance of remaining fiscally responsible. Therefore, we are asking for a conservative 3% COLA.

2. **Office Closure With Pay Between Christmas Observed & New Years Eve Observed**
   Employee turnover and retention remain significant concerns for the agency. Increasing numbers of area employers, including multiple county medical care facilities in our jurisdiction, are offering substantial sign-on bonuses, premium pay, and financial incentives for employees. Our team agrees with the need to properly compensate employees, however, we recognize that there is a more sustainable and fiscally responsible solution to retain quality and experienced staff. In lieu of asking for the addition of paid holidays for Veteran’s Day, MLK Day, and a full day on Good Friday, we propose an office closure with pay between Christmas Observed and New Years Eve Observed. This additional paid time off will partially bridge the gap.
between sustained inflation and the agency’s ability to fiscally respond. We strongly feel that the selection of these days maximizes the impact on staff morale, recruitment, and retention, while minimizing any impact on operations.

We propose a Cost of Living Adjustment (COLA) of 3% and an office closure with pay between Christmas Observed and New Years Eve Observed. The office closure with paid time off between Christmas Observed and New Years Eve Observed will be a permanent adjustment to employee compensation.

Thank you for your support,

Employee Compensation Committee
Employee Compensation Committee Request
Suggested Motion Languages

Motion #1: 3% COLA (Cost of Living Adjustment)
I move to provide a 3% Cost of Living Adjustment for Health Department staff to be implemented for fiscal year 2025.

Motion #2: Office Closure With Pay Between Christmas Observed and New Years Eve Observed
I move that the Health Department of Northwest Michigan close offices for the three days between Christmas Observed and New Year’s Eve Observed for a one-year trial period beginning December 2024 to provide staff with paid days off to spend with family and friends.
HEALTH DEPARTMENT OF NORTHWEST MICHIGAN  
Established in 1930 as District Health Department No. 3  

BOARD OF HEALTH  

BY-LAWS AND RULES OF ORDER  

AS APPROVED BY THE BOARD OF HEALTH ON XXXXXX, 2024  

PREAMBLE  

The purpose of these By-Laws is to provide for the orderly process of conducting business and meetings of the Board of Health and to ensure full compliance with Act 368 of 1978 which is the legislative basis of the District Board of Health. If there should be a conflict in the interpretation of these By-laws and Act 368 of 1978, Act 368 shall prevail. The Board of Health has an important role in protecting and promoting the health of the people who live, work, learn, play, age, and visit in the community. The Board of Health is an essential function of government and is entrusted to maintain and enhance the quality of life for the people they serve.  

ARTICLE I  

MEMBERSHIP  

Membership of the Board of Health shall consist of two members of each of the Boards of Commissioners for Antrim, Charlevoix, Emmet and Otsego Counties. The members are appointed through the normal committee appointment of each county. Each individual member shall have full voting authority. In rare circumstances, temporary alternative members with full voting authority may be appointed by the respective Chairperson of the County Board of Commissioners.  

ARTICLE II  

OFFICERS  

The Board of Health will have the following officers: Chairperson and Vice-Chairperson.  

All officers will be elected at the first regularly scheduled meeting following the appointment of Board members by the respective County Boards of Commissioners. These appointments are generally made after the seating of the new Boards of Commissioners at the first meeting in January.  

ARTICLE III  

QUORUM  

A quorum shall consist of a majority of the Board members which will include at least one representative from each county.
ARTICLE IV

PROCEDURES FOR BOARD OF HEALTH MEETINGS

1. Meetings of the Board of Health shall be held monthly and at other times as called by the chairperson. Dates and times of meetings for the Board of Health shall be at the discretion of the Board of Health. All efforts will be made to conduct meetings during the regular operative hours of Health Department of Northwest Michigan.

2. Meetings of the Board of Health shall be conducted in accordance with the Michigan Open Meetings Act, P.A. 167 of 1976, as amended and shall follow the guidelines of Robert’s Rules of Order.

3. At the organizational meeting of the Board of Health, at the beginning of each year in January or February, the Chairperson and Vice-Chairperson shall be selected. The Health Officer may assume the temporary Chair for the purpose of conducting the voting on the Chairperson and Vice-Chairperson positions (the Health Officer does not have a vote). Once the Chairperson has been approved, standing committee chairpersons will be selected and committee assignments will be made.

4. The health department shall provide a Recording Secretary for the purposes of taking minutes of the Board. The minutes shall be signed by the Chairperson and the Health Officer after approval in accordance with parliamentary procedure and the Open Meetings Act.

5. The Health Officer will prepare a tentative agenda of business for the regularly scheduled Board of Health Meeting. The Health Officer will review the tentative agenda with the Board Chairperson. The Chair has the discretion to add or delete issues. Requests to place items on the agenda must be received by the Health Officer no later than five (5) business days before the regular meeting for which the agenda is being prepared. Items not received by this deadline will not be considered by the Board except upon a majority vote of the members present.

The Board of Health Packet containing the agenda, reports and materials will be mailed or electronically transmitted to each Board Member and posted on the health department website not later than four (4) business days in advance of the regular meeting.

All agenda items requiring a vote of the Board will be supported by a written proposed motion for consideration by the Board.

Meeting agenda: Unless otherwise altered and approved by the Board of Health, the following will be the standard meeting agenda:

I. Call to Order
II. Opening Ceremony (i.e. Pledge of Allegiance)
   Board Organization, Election of Officers, and Committee Assignments (First meeting of the year only)
III. Roll Call
IV. Approval of the Agenda
a. Add or Remove Agenda Items

*Individual items require a vote of the board to be added or removed. The agenda will be considered approved after the members vote to add or remove items regardless of the final outcome of the agenda.*

V. Review/Approval of the Meeting Minutes
VI. Public Comment (three-minute limit)
VII. Staff Reports
VIII. Committee Reports
IX. Unfinished Business
X. New Business
XI. Public Comment (three-minute limit)
XII. Board Member Comment (three-minute Limit)
XIII. Adjournment

6. Public comment rules are established by the Board of Health and included in the public notice for any meeting of the Board of Health that is subject to the Open Meetings Act.

7. The place of the meetings will be the offices of the health department or at other locations as specified by resolution of the Board of Health.

8. Special meetings of the Board of Health may be scheduled with the approval of the Board Chairperson and public notice will be posted in accordance with the Open Meetings Act.

**ARTICLE V**

**POWER AND AUTHORITY OF BOARD**

The Board of Health of the Health Department of Northwest Michigan (HDNW) retains all authority vested in Boards of Health of District Health Departments as specified in Act 368 of 1978 including the audit, allowances and appropriations of claims. The Board will establish an annual budget and a formula for distribution of local appropriations of the department. All Board members and HDNW staff will adhere to all policies adopted by the Board. The Board of Health will appoint a Health Officer who will function as the Administrative Officer of the Board and the Department. Through its Administrative Officer the Board of Health will oversee all activities of the Health Department of Northwest Michigan.

In accordance with Act 368 of 1978 the Board of Health may adopt health regulations to properly safeguard the public health and prevent the spread of diseases, approve health programs and services, establish schedules for fees and enter into intergovernmental agreements.

**Board of Health Members should be familiar with the following sections of the Public Health Code:**

<table>
<thead>
<tr>
<th>Local Governing Entity Authority/Action</th>
<th>Act 368 of 1978 Reference</th>
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<tbody>
<tr>
<td>Administration and governance of public health at the local level.</td>
<td>MCL 333.2413</td>
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<tr>
<td>Provide the funds and approve the budget for operation of the Local Health Department (LHD).</td>
<td>MCL 333.2413 &amp; MCL 333.2483</td>
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<tr>
<td>Composition of district health board.</td>
<td>MCL 333.2415</td>
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<tr>
<td>Appoint a full-time local health officer who meets requirements set by State Health Department.</td>
<td>MCL 333.2428</td>
</tr>
<tr>
<td>Concurrence or disapproval authorizing LHD to adopt regulations.</td>
<td>MCL 333.2441 &amp; MCL 333.2442</td>
</tr>
<tr>
<td>Fix and require payment of fees for services authorized or required to be performed by the LHD.</td>
<td>MCL 333.2444</td>
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<tr>
<td>A LHD and its local governing entity shall provide or demonstrate the provision of each required service which the LHD is designated to provide.</td>
<td>MCL 333.2473</td>
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**ARTICLE VI**

**RESPONSIBILITIES OF BOARD OF HEALTH MEMBERS**

Board of Health members should be aware of the 10 essential public health services and support the Health Department to those ends.

**The 10 Essential Public Health Services are as follows:**

**Assessment**
- Assess and monitor health of the community.
- Investigate, diagnose, and address health hazards and root causes.

**Policy Development**
- Communicate effectively to inform and educate the public.
- Strengthen, support, and mobilize communities and partnerships.
- Create, champion, and implement policies, plans, and laws.
- Utilize legal and regulatory actions.

**Assurance**
- Enable equitable access to services.
- Build a diverse and skilled workforce.
- Improve and innovate through evaluation, research, and quality improvement.
- Build and maintain a strong organizational infrastructure for public health.
The health department will provide orientation materials to new Board of Health members and also act as a resource for the board members throughout their term. In addition, training resources are available and should be reviewed by new board members.

**CONFLICT OF INTEREST – STANDARDS OF CONDUCT**

A. A Board of Health (BOH) member shall not divulge to an unauthorized person confidential information acquired by the BOH member in the course of his or her duties as a BOH member in advance of the time prescribed for its authorized release to the public, if it is to be released to the public. Confidential information means information, written or non-written, that has been obtained by a BOH member in the course of acting as such, that is not available to members of the public pursuant to closed sessions as prescribed by the Michigan Open Meetings Act, being MCL 15.268 et seq., Michigan Freedom of Information Act, being MCL 15.231 et seq., or pursuant to other law, regulation, policy, or procedure recognized by law, and that the BOH member is unauthorized to disclose.

B. BOH members shall represent the official policies, positions, and mission of the health department to the best of their ability when representing the health department. When presenting their individual opinions and positions, a BOH member may not represent, nor allow the inference of, his or her personal opinion or position as that of the Board of Health or the Health Department of Northwest Michigan.

C. A BOH member shall not appear or advocate on behalf of the private interest of third parties, including the BOH member’s immediate family members, before the Board of Health, any committee, or other proceeding of the Board of Health.

D. A BOH member shall not solicit or accept a gift or loan of money, goods, services, or other things of value for the benefit of a person or organization other than the health department which tends to influence the manner in which the BOH member or employee of the health department performs official duties.

E. Except as permitted by state law, a BOH member shall not engage in a business transaction in which the BOH member may derive a personal profit or gain, directly or indirectly, from his or her official position or authority or benefit financially from confidential information which the BOH member has obtained or may obtain by reason of that position or authority.

F. Except as permitted by state law, a BOH member shall not engage in or accept employment or render services for a private or public interest when that employment or service is incompatible or in conflict with the discharge of the BOH member’s official duties or when that employment may tend to impair his or her independence or judgment or action in the performance of official duties.

G. Except as provided by state law, a BOH member shall not participate in the negotiation or execution of contracts, issuance of permits or other regulation or decision relating to a business entity in which the BOH member has a personal or ownership interest.
H. Except as permitted by state law, a BOH member shall not vote or participate in any other question on which the BOH member has a substantial direct or indirect financial, personal or ownership interest other than an interest similar to that of other citizens affected.

I. Whenever the performance of official duties shall require a BOH member to deliberate and vote on any matter involving the BOH member’s financial or personal interest, the BOH member shall publicly disclose the nature and extent of the interest and is disqualified from participating in the deliberations and voting on the matter. The disclosure shall be made public at a meeting of the Board of Health before the matter is voted upon or in any other manner required by law.

J. This Code of Conduct is intended to encourage and promote the highest standards of ethical conduct and behavior by members of the Board of Health and is not intended to be a code enforceable by punitive measures. Violations of this code are not intended to subject BOH members to reprimand or censure by the Board of Health. A violation of this code shall not be considered the basis for challenging the validity of a BOH member’s decision or position as a BOH member.

ARTICLE VII

COMMITTEES

Types of Committees: The types of committees of the Agency shall be standing and special. Standing committees shall be as follows: Program and Evaluation Committee, Personnel and Finance Committee. The Board may from time establish special committees and additional standing committees for other matters of concern to the Agency. All committee recommendations shall be considered by the Board of Health.

PROGRAM AND EVALUATION COMMITTEE: Shall be responsible to:

1. Investigate new program concepts.
2. Develop long range public health strategy.
3. Review existing programming.
4. Review grant opportunities pursuant to policy.
5. Annual review bylaws.

PERSONNEL AND FINANCE COMMITTEE: Shall be responsible to:

1. Review appropriations and allocation recommendations.
2. Review and approve agency budget.
3. Review and evaluate staffing and compensation schedule.
4. Review and evaluate Personnel Policy.
5. Review monthly expenditures prior to the full Board of Health meeting.
7. Recommend process for Health Officer replacement as necessary.

Proceedings of Committees: Except as already provided in these By-laws, the Board may, by resolution passed by majority vote of the Board, establish membership requirements, meeting requirements, reporting duties, and other substantive and procedural standards for the operation of any committee. In the absence of any such standards in these By-laws or Board resolution, committees shall establish their own standards of operation, subject always to the power of the Board, in its discretion, to review, modify, ratify, disapprove or otherwise control such standards.

ARTICLE VIII

AMENDMENT

These By-laws may be altered by a majority vote of all Board members. Notice of proposed amendments shall be posted with the regular notice of the Board Meeting.

REVISIONS

March 4, 2003

July 2, 2024
Proposed Motion:

I move to approve the amended Health Department of Northwest Michigan Board of Health By-Laws and Rules of Order draft document and authorize final legal review.
Health Department of Northwest Michigan

Public Summary of FOIA Procedures and Guidelines

It is the public policy of this state that all persons
(except those persons incarcerated in state or local correctional facilities)
are entitled to full and complete information regarding the affairs of government and
the official acts of those who represent them as public officials and public employees.

The people shall be informed so that they may fully participate in the democratic process.

Consistent with the Michigan Freedom of Information Act (FOIA), Public Act 442 of 1976, as amended, the following is the Written Public Summary of the County’s FOIA Procedures and Guidelines relevant to the general public.

This is only a summary of the Agency's FOIA Procedures and Guidelines. For more details and information, copies of the Agency's FOIA Procedures and Guidelines are available at no charge at any office and on the Agency's website at www.nwhealth.org/foia.

1. How do I submit a FOIA request to the Agency?

- A request must sufficiently describe a public record so as to enable the Agency to find it.

- Requests from an individual must include the requesting person’s complete name, address, and contact information, and if the request is made by a person other than an individual, the complete name, address, and contact information of the person’s agent who is an individual. An address must be written in compliance with U.S. Postal Service addressing standards. Contact information must include a valid telephone number or email address.

- Please include the words “FOIA” or “FOIA Request” in the request to assist the Agency in providing a prompt response.

- Requests to inspect or obtain copies of public records prepared, owned, used, possessed or retained by the Agency may be submitted on the Agency's FOIA Request Form, in any other form of writing (letter, fax, email, etc.), or by verbal request.

  - Any verbal request will be documented by the Agency on the Agency's FOIA Request Form.

  - No specific form to submit a written request is required. However, a FOIA Request Form and other FOIA-related forms are available for your use and convenience on the Agency's website at www.nwhealth.org/foia

- Written requests may be delivered to the following Agency in person or by mail:

  - If the request is for a public record retained by the Agency's Office, the written request needs to be delivered to:

    - Health Department of Northwest Michigan
    Attn: FOIA Request
    220 W. Garfield Ave.
    Charlevoix, MI 49720
If the request is for a public record retained by the Health Department, the written request needs to be delivered to:

- Health Department of Northwest Michigan
  Attn: Health Officer
  220 W. Garfield Ave.
  Charlevoix, MI 49720

If the request is for a public record retained by all other Agency, including the Board of Health, and other elected officials, the written request needs to be delivered to:

- Health Department of Northwest Michigan
  220 W. Garfield Ave.
  Charlevoix, MI 49720

Requests may be faxed to the following Departments:

- If the request is for a public record retained by the Agency’s Office, the written request needs to be faxed to: (231) 547-6238.
- If the request is for a public record retained by the Health Department, the written request needs to be faxed to: (231) 547-6238.
- If the request is for a public record retained by all other Departments, including the Board of Health, and other elected officials, the written request needs to be faxed to (231) 547-6238.

To ensure a prompt response, faxed requests should contain the term “FOIA” or “FOIA Request” on the first/cover page.

Requests may be emailed to:

- If the request is for a public record retained by the Agency’s Office, foiarequest@nwhealth.org,
- If the request is for a public record retained by the Health Department, nwhealth.org
- If the request is for a public record retained by all other Agency Departments, including the Board of Health and other elected officials, foiarequest@nwhealth.org
- To ensure a prompt response, email requests should contain the term “FOIA” or “FOIA Request” in the subject line.

2. What kind of response can I expect to my request?

Within 5 business days after receiving a FOIA request the Health Department will issue a response. If a request is received by fax or email, the request is deemed to have been received on the following business day. The Agency will respond to your request in one of the following ways:

- Grant the request,
- Issue a written notice denying the request,
- Grant the request in part and issue a written notice denying in part the request,
- Issue a notice indicating that due to the nature of the request the Agency needs an additional 10 business days to respond, or
- Issue a written notice indicating that the public record requested is available at no charge on the Agency’s website.
• If the request is granted, or granted in part, the Agency will ask that payment be made for the allowable fees associated with responding to the request before the public record is made available.

• If the cost of processing the request is expected to exceed $50, or if you have not paid for a previously granted request, the Agency will require a deposit before processing the request.

3. What are the Agency’s deposit requirements?

• If the Agency has made a good faith calculation that the total fee for processing the request will exceed $50.00, the Agency will require that you provide a deposit in the amount of 50% of the total estimated fee. When the Agency requests the deposit, it will provide you a non-binding best efforts estimate of how long it will take to process the request after you have paid your deposit.

• If a deposit is not received within 48 days of the notice requiring a deposit, and an appeal of the fee amount has not been filed, the request shall be considered abandoned, and the Agency is no longer required to fulfill the request.

• If the Agency receives a request from a person who has not paid the Agency for copies of public records made in fulfillment of a previously granted written request, the Agency will require a deposit of 100% of the estimated processing fee before it begins to search for the public record for any subsequent written request when all of the following conditions exist:
  
  o The final fee for the prior written request is not more than 105% of the estimated fee;
  o The public records made available contained the information sought in the prior written request and remain in the Agency's possession;
  o The public records were made available to the individual, subject to payment, within the best effort time frame estimated by the Agency to provide the records;
  o Ninety (90) days have passed since the Agency notified the individual in writing that the public records were available for pickup or mailing;
  o The individual is unable to show proof of prior payment to the Agency; and
  o The Agency has calculated an estimated detailed itemization that is the basis for the current written request’s increased fee deposit.

• The Agency will not require the 100% estimated fee deposit if any of the following apply:
  
  o The person making the request is able to show proof of prior payment in full to the Agency;
  o The Agency is subsequently paid in full for all applicable prior written requests; or
  o Three hundred sixty five (365) days have passed since the person made the request for which full payment was not remitted to the Agency.

4. How does the Agency calculate FOIA processing fees?

The Michigan FOIA statute permits the Agency to charge for the following costs associated with processing a request:

• Labor costs associated with copying or duplication, which includes making paper copies, making digital copies, or transferring digital public records to non-paper physical media or through the Internet.
- Labor costs associated with searching for, locating and examining a requested public record, when failure to charge a fee will result in unreasonably high costs to the Agency.

- Labor costs associated with a review of a record to separate and delete information exempt from disclosure, when failure to charge a fee will result in unreasonably high costs to the Agency.

- The cost of copying or duplication, not including labor, of paper copies of public records. This may include the cost for copies of records already on the Agency's website if you ask for the Agency to make copies.

- The cost of computer discs, computer tapes or other digital or similar media when the requester asks for records in non-paper physical media. This may include the cost for copies of records already on the Agency's website if you ask for the Agency to make copies.

- The cost to mail or send a public record to a requestor.

**Labor Costs**

- All labor costs will be estimated and charged in 15-minute increments, with all partial time increments rounded down. If the time involved is less than 15 minutes, there will be no charge.

- Labor costs will be charged at the hourly wage of the lowest-paid Agency employee capable of doing the work in the specific fee category, regardless of who actually performs work.

- Labor costs will also include a charge to cover or partially cover the cost of fringe benefits. Agency may add up to 50% to the applicable labor charge amount to cover or partially cover the cost of fringe benefits, but in no case may it exceed the actual cost of fringe benefits.

- Overtime wages will not be included in labor costs unless agreed to by the requestor; overtime costs will not be used to calculate the fringe benefit cost.

- Contracted labor costs will be charged at the hourly rate of $48.90 (6 times the state minimum hourly wage)

A labor cost will not be charged for the search, examination, review and the deletion and separation of exempt from nonexempt information unless failure to charge a fee would result in unreasonably high costs to the Agency. Costs are unreasonably high when they are excessive and beyond the normal or usual amount for those services compared to the Agency's usual FOIA requests, because of the nature of the request in the particular instance. The Agency must specifically identify the nature of the unreasonably high costs in writing.

**Copying and Duplication**

The Agency must use the most economical method for making copies of public records, including using double-sided printing, if cost-saving and available.
Non-paper Copies on Physical Media

- The cost for records provided on non-paper physical media, such as computer discs, computer tapes or other digital or similar media will be at the actual and most reasonably economical cost for the non-paper media.

- This cost will be charged only if the Agency has the technological capability necessary to provide the public record in the requested non-paper physical media format.

Paper Copies

- Paper copies of public records made on standard letter (8 ½ x 11) or legal (8 ½ x 14) sized paper will not exceed $.10 per sheet of paper.

- Copies for non-standard sized sheets will paper will reflect the actual cost of reproduction.

Mailing Costs

- The cost to mail public records will use a reasonably economical and justified means.

- The Agency may charge for the least expensive form of postal delivery confirmation.

- No cost will be made for expedited shipping or insurance unless you request it.

Waiver of Fees

The cost of the search for and copying of a public record may be waived or reduced if in the sole judgment of the FOIA Coordinator a waiver or reduced fee is in the public interest because it can be considered as primarily benefiting the general public. The Agency Board of Health may identify specific records or types of records it deems should be made available for no charge or at a reduced cost.

5. How do I qualify for an indigence discount on the fee?

The Agency will discount the first $20.00 of fees for a request if you submit an affidavit stating that you are:

- Indigent and receiving specific public assistance; or

- If not receiving public assistance, stating facts demonstrating an inability to pay because of indigence.

You are **not** eligible to receive the $20.00 discount if you:

- Have previously received discounted copies of public records from the Agency twice during the calendar year; or

- Are requesting information on behalf of other persons who are offering or providing payment to you to make the request.
An affidavit is a sworn statement. For your convenience, the Agency has provided an Affidavit of Indigence for the waiver of FOIA fees on the back of the Agency FOIA Request Form, which is available on the Agency's website: www.nwhealth.org/foia.

6. May a nonprofit organization receive a discount on the fee?

A nonprofit organization advocating for developmentally disabled or mentally ill individuals that is formally designated by the state to carry out activities under subtitle C of the federal developmental disabilities assistance and bill of rights act of 2000, Public Law 106-402, and the protection and advocacy for individuals with mental illness act, Public Law 99-319, may receive a $20.00 discount if the request meets all of the following requirements in the Act:

- Is made directly on behalf of the organization or its clients.
- Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the mental health code, 1974 PA 258, MCL 330.1931.
- Is accompanied by documentation of its designation by the state, if requested by the public body.

6. How may I challenge the denial of a public record or an excessive fee?

Appeal of a Denial of a Public Record

If you believe that all or a portion of a public record has not been disclosed or has been improperly exempted from disclosure, you may appeal to the Agency Board of Health by filing a written appeal of the denial with the office of the Agency Administrator.

The appeal must be in writing, specifically state the word “appeal,” and identify the reason or reasons you are seeking a reversal of the denial. You may use the Agency FOIA Appeal Form (To Appeal a Denial of Records), which is available on the Agency's website: www.nwhealth.org/foia.

The Agency's Board of Health is not considered to have received a written appeal until the first regularly scheduled Agency Commission meeting following submission of the written appeal. Within 10 business days of receiving the appeal the Agency's Board of Health will respond in writing by:

- Reversing the disclosure denial;
- Upholding the disclosure denial; or
- Reverse the disclosure denial in part and uphold the disclosure denial in part.

Whether or not you submitted an appeal of a denial to the Agency Board of Health, you may file a civil action in the local Circuit Court within 180 days after the Agency's final determination to deny your request. If you prevail in the civil action the court will award you reasonable attorneys’ fees, costs and disbursements. If the court determines that the Agency acted arbitrarily and capriciously in refusing to disclose or provide a public record, the court shall award you damages in the amount of $1,000.

Appeal of an Excess FOIA Processing Fee

If you believe that the fee charged by the Agency to process your FOIA request exceeds the amount permitted by state law, you must first appeal to the Agency's Board of Health by filing a written appeal for a fee reduction to the office of the Agency Administrator.
The appeal must specifically state the word “appeal” and identify how the required fee exceeds the amount permitted. You may use the Agency FOIA Appeal Form (To Appeal an Excess Fee), which is available at the Agency Building and on the Agency's website: www.nwhealth.org/foia.

The Agency Board of Health is not considered to have received a written appeal until the first regularly scheduled Agency Commission meeting following submission of the written appeal. Within 10 business days after receiving the appeal, the Agency Board of Health will respond in writing by:

- Waiving the fee;
- Reducing the fee and issue a written determination indicating the specific basis that supports the remaining fee;
- Upholding the fee and issue a written determination indicating the specific basis that supports the required fee; or
- Issuing a notice detailing the reason or reasons for extending for not more than 10 business days the period during which the Agency Board of Health will respond to the written appeal.

Within 45 days after receiving notice of the Agency Board of Commissioner’s determination of the processing fee appeal, you may commence a civil action in the local Circuit Court for a fee reduction. If you prevail in the civil action by receiving a reduction of 50% or more of the total fee, the court may award all or an appropriate amount of reasonable attorneys’ fees, costs and disbursements. If the court determines that the Agency acted arbitrarily and capriciously by charging an excessive fee, the court may also award you punitive damages in the amount of $500.
Health Department of Northwest Michigan FOIA
Procedures and Guidelines

Preamble: Statement of Principles

It is the policy of the Health Department of Northwest Michigan that all persons, except those incarcerated, consistent with the Michigan Freedom of Information Act (FOIA), are entitled to full and complete information regarding the affairs of government and the official acts of those who represent them as public officials and employees. The people shall be informed so that they fully participate in the democratic process.

The Health Department’s policy with respect to FOIA requests is to comply with State law in all respects and to respond to FOIA requests in a consistent, fair, and even-handed manner regardless of who makes such a request.

The Health Department acknowledges that it has a legal obligation to disclose all nonexempt public records in its possession pursuant to a FOIA request. The Health Department also acknowledges that sometimes it is necessary to invoke the exemptions identified under FOIA in order to ensure the effective operation of government and to protect the privacy of individuals.

The Health Department of Northwest Michigan will protect the public’s interest in disclosure, while balancing the requirement to withhold or redact portions of certain records. The Health Department’s policy is to disclose public records consistent with and in compliance with State law.

The Health Department has established the following written procedures and guidelines to implement the FOIA and will create a written public summary of the specific procedures and guidelines relevant to the general public regarding how to submit written requests to the public body and explaining how to understand a public body’s written responses, deposit requirements, fee calculations, and avenues for challenge and appeal. The written public summary will be written in a manner so as to be easily understood by the general public.

Section 1: General Policies

As directed by MCL 15.236, the Health Officer and Administrator of the Health Department of Northwest Michigan is designated as the FOIA Coordinator. The Health Officer designated the Environmental Health Director to act on his or her behalf to accept and process written requests for the Health Department’s public records and approve denials.

If a request for a public record is received by fax or email, the request is deemed to have been received on the following business day. If a request is sent by email and delivered to a Health Department spam or junk-mail folder, the request is not deemed received until one day after the FOIA Coordinator first becomes aware of the request. The FOIA Coordinator shall note in the FOIA log both the date the request was delivered to the spam or junk-mail folder and the date the FOIA Coordinator became aware of the request.

The Health Department shall direct emailed FOIA requests to a designated email address (foiarequest@nwhealth.org). The FOIA Coordinator shall review Health Department spam and junk-mail folders on a regular basis, no less than twice a month. The FOIA Coordinator shall work with Health Department Information Technology staff to develop administrative rules for handling spam and junk-mail to protect Health Department systems from cyber-attacks which may be imbedded in an electronic FOIA request.

The FOIA Coordinator may, in his or her discretion, implement administrative rules, consistent with State law and these Procedures and Guidelines to administer the acceptance and processing of FOIA requests.
The Health Department is not obligated to create a new public record or make a compilation or summary of information which does not already exist. Neither the FOIA Coordinator nor other Health Department staff are obligated to provide answers to questions contained in requests for public records or regarding the content of the records themselves. The FOIA Coordinator shall keep a copy of all written requests for public records received by the Health Department on file for a period of at least one year.

The Health Department will make this Procedures and Guidelines document and the Written Public Summary publicly available without charge. If it does not, the Health Department cannot require deposits or charge fees otherwise permitted under the FOIA until it is in compliance.

A copy of this Procedures and Guidelines document and the Health Department’s Written PublicSummary must be publicly available by providing free copies both in the Health Department’s response to a written request and upon request by visitors at Health Department offices.

This Procedures and Guidelines document and the Health Department’s Written Public Summary will be maintained on the Health Department’s website at: www.nwhealth.org, so a link to those documents will be provided in lieu of providing paper copies of those documents.

Section 2: Requesting a Public Record

No specific form to submit a request for a public record is required. However, the FOIA Coordinator may make available a FOIA Request Form for use by the public.

Requests to inspect or obtain copies of public records prepared, owned, used, possessed or retained by the Health Department may be submitted on the Health Department’s FOIA Request Form, in any other form of writing (letter, fax, email, etc.), or by verbal request.

Verbal requests for records may be documented by the Health Department on the Health Department’s FOIA Request Form.

If a person makes a verbal, non-written request for information believed to be available on the Health Department’s website, where practicable and to the best ability of the employee receiving the request, the requestor shall be informed of the pertinent website address.

A request must sufficiently describe a public record to enable Health Department personnel to identify and find the requested public record.

Written requests for public records may be submitted in person or by mail to any Health Department office. Requests may also be submitted electronically by fax and email. Upon their receipt, requests for public records shall be promptly forwarded to the FOIA Coordinator for processing.

A person may request that public records be provided on non-paper physical media, emailed or other otherwise provided to him or her in digital form in lieu of paper copies. The Health Department will comply with the request only if it possesses the necessary technological capability to provide records in the requested non-paper physical media format.

A person may subscribe to future issues of public records that are created, issued or disseminated by the Health Department of Northwest Michigan on a regular basis. A subscription is valid for up to 6 months and may be renewed by the subscriber.
A person serving a sentence of imprisonment in a local, state or federal correctional facility is not entitled to submit a request for a public record. The FOIA Coordinator will deny all such requests.

Section 3: Processing a Request

Unless otherwise agreed to in writing by the person making the request, the Health Department will issue a response within 5 business days of receipt of a FOIA request. If a request is received by fax, email or other electronic transmission, the request is deemed to have been received on the following business day.

The Health Department will respond to a request in one of the following ways:

- Grant the request.
- Issue a written notice denying the request.
- Grant the request in part and issue a written notice denying in part the request.
- Issue a notice indicating that due to the nature of the request the Health Department needs an additional 10 business days to respond for a total of no more than 15 business days. Only one such extension is permitted.
- Issue a written notice indicating that the public record requested is available at no charge on the Health Department’s website.

When a request is granted:

If the request is granted, or granted in part, the FOIA Coordinator will require that payment be made in full for the allowable fees associated with responding to the request before the public record is made available.

The FOIA Coordinator shall provide a detailed itemization of the allowable costs incurred to process the request to the person making the request.

A copy of these Procedures and Guidelines and the Written Public Summary will be provided to the requestor free of charge with the response to a written request for public records, provided however, that because these Procedures and Guidelines, and the Written Public Summary are maintained on the Health Department’s website at: www.nwhealth.org, a link to the Procedures and Guidelines and the Written Public Summary will be provided in lieu of providing paper copies of those documents.

If the cost of processing a FOIA request is $50 or less, the requester will be notified of the amount due and where the documents can be obtained.

If the cost of processing a FOIA request is expected to exceed $50 based on a good-faith calculation, or if the requestor has not paid in full for a previously granted request, the Health Department will require a good-faith deposit pursuant to Section 4 of this policy before processing the request.

In making the request for a good-faith deposit, the FOIA Coordinator shall provide the requestor with a detailed itemization of the allowable costs estimated to be incurred by the Health Department to process the request and provide a best-efforts estimate of a time frame it will take the Health Department to provide the records to the requestor. The best-efforts estimate shall be nonbinding on the Health Department, but will be made in good faith and will strive to be reasonably accurate, given the nature of the request in the particular instance, so as to provide the requested records in a manner based on the public policy expressed by Section 1 of the FOIA.

When a request is denied or denied in part:

If the request is denied or denied in part, the FOIA Coordinator will issue a Notice of Denial which shall provide in the applicable circumstance:
An explanation as to why a requested public record is exempt from disclosure; or

- A certificate that the requested record does not exist under the name or description provided by the requestor, or another name reasonably known by the Health Department; or
- An explanation or description of the public record or information within a public record that is separated or deleted from the public record; and
- An explanation of the person’s right to submit an appeal of the denial and seek judicial review in the Antrim, Charlevoix, Emmet, or Otsego Michigan Circuit Court; and
- An explanation of the right to receive attorneys’ fees, costs, and disbursements as well actual or compensatory damages, and punitive damages of $1,000, should they prevail in Circuit Court.
- The Notice of Denial shall be signed by the FOIA Coordinator.

If a request does not sufficiently describe a public record, the FOIA Coordinator may, in lieu of issuing a Notice of Denial indicating that the request is deficient, seek clarification or amendment of the request by the person making the request. Any clarification or amendment will be considered a new request subject to the timelines described in this Section.

Requests to inspect public records:
The Health Department shall provide reasonable facilities and opportunities for persons to examine and inspect public records during normal business hours. The FOIA Coordinator is authorized to promulgate rules regulating the way records may be viewed to protect Health Department records from loss, alteration, mutilation or destruction and to prevent excessive interference with normal Health Department operations.

Requests for certified copies:
The FOIA Coordinator shall, upon written request, furnish a certified copy of a public record at no additional cost to the person requesting the public record.

Section 4: Fee Deposits

If the fee estimate is expected to exceed $50.00 based on a good-faith calculation, the requestor will be asked to provide a deposit not exceeding one-half of the total estimated fee.

If a request for public records is from a person who has not paid the Health Department in full for copies of public records made in fulfillment of a previously granted written request, the FOIA Coordinator will require a deposit of 100% of the estimated processing fee before beginning to search for a public record for any subsequent written request by that person when all of the following conditions exist:

- The final fee for the prior written request is not more than 105% of the estimated fee;
- The public records made available contained the information sought in the prior written request and remain in the Health Department’s possession;
- The public records were made available to the individual, subject to payment, within the time frame estimated by the Health Department to provide the records;
- Ninety (90) days have passed since the FOIA Coordinator notified the individual in writing that the public records were available for pickup or mailing;
- The individual is unable to show proof of prior payment to the Health Department; and
- The FOIA Coordinator has calculated a detailed itemization that is the basis for the current written request’s increased estimated fee deposit.

The FOIA Coordinator will not require an increased estimated fee deposit if any of the following apply:

- The person making the request is able to show proof of prior payment in full to the Health Department;
• The Health Department is subsequently paid in full for the applicable prior written request; or Three hundred sixty-five (365) days have passed since the person made the request for which full payment was not remitted to the Health Department.

Section 5: Calculation of Fees

A fee may be charged for the labor cost of copying/duplication.

A fee will not be charged for the labor cost of search, examination, review and the deletion and separation of exempt from nonexempt information unless failure to charge a fee would result in unreasonably high costs to the Health Department because of the nature of the request in the particular instance, and the Health Department specifically identifies the nature of the unreasonably high costs.

Costs for the search, examination review, and deletion and separation of exempt from non-exempt information are “unreasonably high” when they are excessive and beyond the normal or usual amount for those services (Attorney General Opinion 7083 of 2001) compared to the costs of the Health Department’s usual FOIA requests, not compared to the Health Department’s operating budget. (*Bloch v. Davison Community Schools*, Michigan Court of Appeals, Unpublished, April 26, 2011)

The following factors shall be used to determine an unreasonably high cost to the Health Department:

- Volume of the public record requested;
- Amount of time spent to search for, examine, review and separate exempt from non-exempt information in the record requested;
- Whether the public records are from more than one Health Department office or whether various Health Department offices are necessary to respond to the request;
- The availability of staffing to respond to the request; and
- Any other similar factors identified by the FOIA Coordinator in responding to the request.

The Michigan FOIA statute permits the Health Department to charge for the following costs associated with processing a request:

- Labor costs associated with copying or duplication, which includes making paper copies, making digital copies, or transferring digital public records to non-paper physical media or through the Internet;
- Labor costs associated with searching for, locating and examining a requested public record, when failure to charge a fee will result in unreasonably high costs to the Health Department;
- Labor costs associated with a review of a record to separate and delete information exempt from disclosure, when failure to charge a fee will result in unreasonably high costs to the Health Department;
- The cost of copying or duplication, not including labor, of paper copies of public records. This may include the cost for copies of records already on the Health Department’s website if you ask for the Health Department to make copies;
- The cost of computer flash drives, external hard drives or other digital or similar media when the requester asks for records in non-paper physical media. This may include the cost for copies of records already on the Health Department’s website if you ask for the Health Department to make copies; and
- The cost to mail or send a public record to a requestor.

Labor costs will be calculated based on the following requirements:

- All labor costs will be estimated and charged in 15-minute increments, with all partial time increments rounded down. If the time involved is less than 15 minutes, there will be no charge;
Labor costs will be charged at the hourly wage of the lowest-paid Health Department employee capable of doing the work in the specific fee category, regardless of who performs work;

- Labor costs will also include a charge to cover or partially cover the cost of fringe benefits;
- The Health Department may add up to 50% to the applicable labor charge amount to cover or partially cover the cost of fringe benefits, but in no case may it exceed the actual cost of fringe benefits;
- Overtime wages will not be included in labor costs unless agreed to by the requestor; overtime costs will not be used to calculate the fringe benefit cost; and
- Contracted labor costs will be charged at the hourly rate 6 times the state minimum hourly wage.

The cost to provide records on non-paper physical media when so requested will be based on the following requirements:

- Computer flash drives, external hard or other digital or similar media will be at the actual and most reasonably economical cost for the non-paper media;
- This cost will only be assessed if the Health Department has the technological capability necessary to provide the public record in the requested non-paper physical media format; and
- The Health Department will procure any non-paper media and will not accept media from the requestor to ensure integrity of the Health Department’s technology infrastructure.

The cost to provide paper copies of records will be based on the following requirements:

- Paper copies of public records made on standard letter (8 ½ x 11) or legal (8 ½ x 14) sized paper will not exceed $.10 per sheet of paper. Copies for non-standard sized sheets of paper will reflect the actual cost of reproduction; and
- The Health Department will provide records using double-sided printing, if it is cost-saving and available.

The cost to mail records to a requestor will be based on the following requirements:

- The actual cost to mail public records using a reasonably economical and justified means;
- The Health Department may charge for the least expensive form of postal delivery confirmation; and
- No cost will be made for expedited shipping or insurance unless specified by the requestor.

If the FOIA Coordinator does not respond to a written request in a timely manner, the Health Department must:

- Reduce the labor costs by 5% for each day the Health Department exceeds the time permitted under FOIA up to a 50% maximum reduction, if any of the following applies:
  - The Health Department’s late response was willful and intentional,
  - The written request conveyed a request for information within the first 250 words of the body of a letter facsimile, email or email attachment, or
  - The written request included the words, characters, or abbreviations for “freedom of information,” “information,” “FOIA,” “copy” or a recognizable misspelling of such, or legal code reference to MCL 15. 231, et seq. or 1976 Public Act 442 on the front of an envelope or in the subject line of an email, letter or facsimile cover page.
- Fully note the charge reduction in the Detailed Itemization of Costs Form.

Section 6: Waiver of Fees

The cost of the search for and copying of a public record may be waived or reduced if in the sole judgment of the FOIA Coordinator a waiver or reduced fee is in the public interest because it can be considered as primarily
benefiting the general public. The Health Department Board of Health may identify specific records or types of records it deems should be made available for no charge or at a reduced cost.

Section 7: Discounted Fees

Indigence
The FOIA Coordinator will discount the first $20.00 of the processing fee for a request if the person requesting a public record submits an affidavit stating that they are:

- Indigent and receiving specific public assistance, or
- If not receiving public assistance, stating facts demonstrating an inability to pay because of indigence.

An individual is not eligible to receive the waiver if:

- The requestor has previously received discounted copies of public records from the Health Department twice during the calendar year; or
- The requestor requests information in connection with other persons who are offering or providing payment to make the request.

An affidavit is sworn statement. The FOIA Coordinator may make a Fee Waiver Affidavit Form available for use by the public.

Nonprofit organization advocating for developmentally disabled or mentally ill individuals
The FOIA Coordinator will discount the first $20.00 of the processing fee for a request from:

- A nonprofit organization formally designated by the state to carry out activities under subtitle C of the federal developmental disabilities assistance and bill of rights act of 2000, Public Law 106-402, and the protection and advocacy for individuals with mental illness act, Public Law 99-319, or their successors, if the request meets all of the following requirements:
  - Is made directly on behalf of the organization or its clients;
  - Is made for a reason wholly consistent with the mission and provisions of those laws under section 931 of the mental health code, 1974 PA 258, MCL 330.1931; and
  - Is accompanied by documentation of its designation by the state, if requested by the public body.

Section 8: Appeal of a Denial of a Public Record

When a requestor believes that all or a portion of a public record has not been disclosed or has been improperly exempted from disclosure, he or she may appeal to the Health Department Board of Health by filing an appeal of the denial with the office of the Administrative Health Officer.

The appeal must be in writing, specifically state the word “appeal” and identify the reason or reasons the requestor is seeking a reversal of the denial. The Health Department FOIA Appeal Form (To Appeal a Denial of Records), may be used.

The Health Department Board of Health is not considered to have received a written appeal until the first regularly scheduled Board of Health meeting following submission of the written appeal.

Within 10 business days of receiving the appeal the Board of Health will respond in writing by:
• Reversing the disclosure denial;
• Upholding the disclosure denial; or
• Reverse the disclosure denial in part and uphold the disclosure denial in part; or
• Under unusual circumstances, issue a notice extending for not more than 10 business days the period during which the Board of Health shall respond to the written appeal. The Board of Health shall not issue more than 1 notice of extension for a particular written appeal.

If the Board of Health fails to respond to a written appeal, or if the Board of Health upholds all or a portion of the disclosure denial that is the subject of the written appeal, the requesting person may seek judicial review of the nondisclosure by commencing a civil action in Circuit Court.

Whether or not a requestor submitted an appeal of a denial to the Board, he or she may file a civil action in Circuit Court within 180 days after the Health Department’s final determination to deny the request.

If a court that determines a public record is not exempt from disclosure, it shall order the Health Department to cease withholding or to produce all or a portion of a public record wrongfully withheld, regardless of the location of the public record. Failure to comply with an order of the court may be punished as contempt of court.

If a person asserting the right to inspect, copy, or receive a copy of all or a portion of a public record prevails in such an action, the court shall award reasonable attorneys’ fees, costs, and disbursements. If the person or Health Department prevails in part, the court may, in its discretion, award all or an appropriate portion of reasonable attorneys' fees, costs, and disbursements.

If the court determines that the Health Department has arbitrarily and capriciously violated this act by refusal or delay in disclosing or providing copies of a public record, the court shall order the Health Department to pay a civil fine of $1,000.00, which shall be deposited into the general fund of the state treasury. The court shall award, in addition to any actual or compensatory damages, punitive damages in the amount of $1,000.00 to the person seeking the right to inspect or receive a copy of a public record. The damages shall not be assessed against an individual but shall be assessed against the next succeeding public body that is not an individual and that kept or maintained the public record as part of its public function.

Section 9: Appeal of an Excessive FOIA Processing Fee

“Fee” means the total fee or any component of the total fee calculated under Section 4 of the FOIA, including any deposit.

If a requestor believes that the fee charged by the Health Department to process a FOIA request exceeds the amount permitted by state law or under this policy, he or she must first appeal to the Board of Health by submitting a written appeal for a fee reduction to the office of the Administrative Health Officer.

The appeal must be in writing, specifically state the word “appeal” and identify how the required fee exceeds the amount permitted. The Health Department FOIA Appeal Form (To Appeal an Excess Fee) may be used.

The Board of Health is not considered to have received a written appeal until the first regularly scheduled Board of Health meeting following submission of the written appeal.

Within 10 business days after receiving the appeal, the Board of Health will respond in writing by:

• Waiving the fee;
• Reducing the fee and issuing a written determination indicating the specific basis that supports the remaining fee;  
• Upholding the fee and issuing a written determination indicating the specific basis that supports the required fee; or  
• Issuing a notice detailing the reason or reasons for extending for not more than 10 business days the period during which the Board of Health will respond to the written appeal. The Board of Health shall not issue more than 1 notice of extension for a particular written appeal.

Where the Board of Health reduces or upholds the fee, the determination must include a certification from the Board of Health that the statements in the determination are accurate and that the reduced fee amount complies with its publicly available procedures and guidelines and Section 4 of the FOIA.

Within 45 days after receiving notice of the Board’s determination of an appeal, the requestor may commence a civil action in Circuit Court for a fee reduction.

If a civil action is commenced against the Health Department for an excess fee, the Health Department is not obligated to complete the processing of the written request for the public record at issue until the court resolves the fee dispute.

An action shall not be filed in circuit court unless one of the following applies:

• The Health Department does not provide for appeals of fees, or  
• The Board of Health failed to respond to a written appeal as required, or the Board of Health issued a determination to a written appeal.

If a court determines that the Health Department required a fee that exceeds the amount permitted under its publicly available procedures and guidelines or Section 4 of the FOIA, the court shall reduce the fee to a permissible amount. Failure to comply with an order of the court may be punished as contempt of court.

If the requesting person prevails in court by receiving a reduction of 50% or more of the total fee, the court may, in its discretion, award all or an appropriate portion of reasonable attorneys' fees, costs, and disbursements. The award shall be assessed against the public body liable for damages.

If the court determines that the Health Department has arbitrarily and capriciously violated the FOIA by charging an excessive fee, the court shall order the Health Department to pay a civil fine of $500.00, which shall be deposited in the general fund of the state treasury. The court may also award, in addition to any actual or compensatory damages, punitive damages in the amount of $500.00 to the person seeking the fee reduction. The fine and any damages shall not be assessed against an individual but shall be assessed against the next succeeding public body that is not an individual and that kept or maintained the public record as part of its public function.

Section 10: Conflict with Prior FOIA Policies and Procedures; Effective Date

To the extent that these Procedures and Guidelines conflict with previous FOIA policies promulgated by the Board of Health or the Health Department Administration these Procedures and Guidelines are controlling. To the extent that any administrative rule promulgated by the FOIA Coordinator subsequent to the adoption of this resolution is found to be in conflict with any previous policy promulgated by the Board of Health or the Health Department Administration, the administrative rule promulgated by the FOIA Coordinator is controlling.

To the extent that any provision of these Procedures and Guidelines or any administrative rule promulgated by the FOIA Coordinator pertaining to the release of public records is found to be in conflict with any State statute, the
applicable statute shall control. The FOIA Coordinator is authorized to modify this policy and all previous policies adopted by the Board of Health or the Health Department Administration, and to adopt such administrative rules as he or she may deem necessary, to facilitate the legal review and processing of requests for public records made pursuant to Michigan's FOIA statute, provided that such modifications and rules are consistent with State law. The FOIA Coordinator shall inform the Board of Health of any change to these Policies and Guidelines.

These FOIA Policies and Guidelines become effective June 12, 2024.

Section 11: Appendix of Health Department of Northwest Michigan FOIA Forms

- Request for Public Records Form
- Notice to Extend Response Time Form
- Notice of Denial Form
- Detailed Cost Itemization Form
- Appeal of Denial of Records Form
- Appeal of Excess Fee Form
Proposed Motion:

I move to approve the Health Department of Northwest Michigan Freedom of Information Act Procedures and Guidelines and the Summary of the Procedures and Guidelines.