

COUNTY ADMINISTRATOR
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TO: Jeff Irwin, Chair
Ways & Means Committee

THROUGH: Robert E. Guenzel
County Administrator

FROM: Ellen J. Clement
Health Officer

DATE: October 5, 2005

SUBJECT: 2005-2006 Comprehensive Planning, Budgeting and Contracting
(CPBC) Agreement, Interagency Agreement 2005.05 Budget and
Position Modifications.

BOARD ACTION REQUESTED:

The Department of Public Health requests that the Board of Commissioners ratify the signature of the County Administrator on the FY 2005-2006 Comprehensive Planning, Budgeting and Contracting (CPBC) agreement; ratify the signature of the County Administrator on the 2005.06 Interagency Agreement between Public Health and Planning & Environment, approve the 2005-2006 Public Health Budget, authorize the County Administrator to sign delegate contracts; and approve position modifications.

BACKGROUND:

Each year Public Health needs to revise its operating budget after receiving guidelines from the state for submitting the Comprehensive Planning, Budgeting and Contracting (CPBC) agreement. Since 1987, the Michigan Department of Public/Community Health (MDCH) has funded local public health programs through the CPBC which includes Cost Sharing (through the 1997-98 fiscal year and renamed Local Public Health Operations (LPHO) funding starting with the 1998-99 fiscal year) for General Communicable Disease Control, Hearing Screening, Immunizations, Sexually Transmitted Diseases, Vision Screening, and Food Service Sanitation. Various other state and federal categorical grants are also allocated to local health departments through MDCH as part of the CPBC, these include AIDS/HIV Prevention, Children's Special Health Care Services (CSHCS), Emergency Preparedness Planning and Coordination, Immunizations, Sexually Transmitted Disease (STD), Local Tobacco Reduction Coalition, Tuberculosis Control (TB) and Women Infants and Children (WIC).

DISCUSSION:

Changes in funding and program requirements at the State level and for local activities require Public Health to annually adjust the plan and budget for the delivery of local public health services. The timeframe for finalizing State and local budget information has been later than usual which resulted in the need to submit a signed CPBC Agreement before allocations were known. This late timeline has impacted the department's ability to adjust for program and funding changes at the beginning of the fiscal year. For some programs there is still no program guidance regarding funding cuts and how they will affect program requirements.

The total operating budget for Public Health for the time period October 1, 2005 through September 30, 2006 is \$7,216,122. This budget represents an increase over fiscal year 2004/05 due to increased costs for salary and fringes, reduced attrition due to very little staff turnover and the special project of the HIP Survey that takes place once every five years. This budget also includes service delivery based on state funding levels, state requirements, availability of grant funding for special projects, revenue contracts with local agencies and position modifications.

Programs discontinued in prior years have not been reinstated and additional CPBC and local funding changes reflected in this budget including the local community impact are as follows:

- Hearing and Vision Program funding has been reduced to 50% of previous year for a projected loss of \$115,822;

Community Impact: The impact of this funding loss is very significant in our community. This program has been in existence since 1941. All school children in the county could count on having hearing and vision screenings in Kindergarten and every other year until the 9th grade. Including the optional preschool screenings we delivered this meant that over 30,000 children were screened in our county every year. The annual state investment in Washtenaw County of \$7.67 per child screened to find and ensure treatment of hearing and vision problems provided an amazing return on investment. No other community provider is likely to be able to provide so much service at this cost. Unrecognized/untreated visual and hearing deficits seriously impact a child's ability to be successful in school and may require special education and other high cost services. Approximately 9% of children screened required further diagnosis and treatment.

Preliminary state guidance on program requirement changes indicates that health departments are to focus on preschool and Kindergarten screenings. Given that the younger child takes longer to screen, not all preschoolers are in school and there are many more preschool sites with fewer children per site, we expect that the impact on numbers of children served will be greater than 50% resulting in only 11,250 children served vs. 30,000.

Intense legislative advocacy over the last several months appeared to be working and public health was hopeful that the state budget cut might be avoided in this program. This delayed work on planning to implement the cuts. Public Health will immediately begin work on identifying alternative revenue sources including Medicaid; contracts from schools, medical practices or managed care; and private pay fees. If and when new revenue can be generated we will recall staff as funding

allows.

- Steps Up grant funding is increasing to reflect the implementation phase of this program and will cover a Health Educator position.

Community Impact: After the initial planning year of this grant the communities will now be implementing their activities in the area of policy and environmental changes that promote physical activity and improved nutrition.

- Infant Mortality Coalition funding is increasing for the implementation phase of this project.

Community Impact: This collaborative community project will complete the identification of strategic activities by December when the focus will shift to implementation of the community strategic plan.

- WIC increased participation and new Medicaid outreach activities in WIC have generated an increase in that program allocation.

Community Impact: The additional funding will support program staff to serve more women, infants and children. In addition we will be integrating family health services including Medicaid/MiChild enrollments, immunizations and maternal and infant support services into a more seamless service for participants who will receive multiple services at one visit.

- The Medical Director will no longer be assigned to cover Livingston County.

Community Impact: The Medical Director recently assumed the additional duties of a retired staff person who was not replaced and had managed the Disease Control Division. This will enable the Medical Director to handle the expanded duties and focus his efforts on our community.

- HIP 5 year community survey is being conducted in 2006.

Community Impact: This survey fulfills our public health mandate to assess the health of the community. Survey results have enabled Public Health and many community partners to effectively compete for grant funding based on the local survey data.

- Bioterrorism/emergency preparedness funding is decreasing.

Community Impact: The reduction is largely due to carry forward funding and a small across the board reduction in federal funding to Michigan. We hope to minimize community impact because much of the initial plan development was completed in the first five years of this program however state and federal performance expectations continue to escalate and large amounts of in-kind personnel costs from Public Health and Environmental Health are required to meet program requirements.

- WCHO funding for Substance Abuse Outreach is discontinued due to changing program needs.

Community Impact: WCHO will be responsible for assuring that women of child bearing age receive substance abuse treatment services.

- Public Health funding for WCHO Access is reduced by 50% of previous year to reflect space changes including shared reception to be implemented during 2006.

Community Impact: The Towner space changes including redesigned public reception points will enable resources to be coordinated across departments resulting in greater efficiencies. We anticipate that customers will experience improved phone and in person access to all the services provided at this location.

- Allocations in CSHCS, Immunizations and Maternal Child Health have not increased to cover incremental costs for delivering these services.

Community Impact: These areas have major goals in the upcoming year. We will be initiating program integration with WIC to ensure that we are able to serve more residents through continuous improvement redesign.

- Continued reduced levels of local shares of state cigarette tax collections.

Community Impact: Loss of this revenue stream has been steady over several years now. Incremental changes in County general funds have helped to reduce the impact of this revenue reduction.

- WHP Lease agreement budget included to reflect the changing level of funding being received due to the end of the HRSA CAP grant and staff moving into the WHP budget.

Community Impact: Loss of the indirect revenue for managing this grant has put more pressure on the department to seek other grant funding (see "Steps Up" for one example) to help with overall support of the basic infrastructure of the department.

The State CPBC timeframes required submission of a signed agreement no later than September 9, 2005, and submission of other required CPBC materials' including all budget materials and program plans no later than November 1, 2005. Those deadlines were met by working with County Administration. As such, we are requesting that the Board of Commissioners ratify the signature of the County Administrator on the CPBC agreement, and approve the Public Health budget for the 2005-2006 fiscal year beginning October 1, 2005.

IMPACT ON HUMAN RESOURCES:

Elimination of 2.0fte Hearing/Vision Techs I/II due to reduced funding. Creation of 1.0fte WIC Program Associate due to increase in funds in this category. Remove from hold vacant status a 1.0fte Health Educator.

IMPACT ON BUDGET:

The Public Health's budget for fiscal year 2005-06 beginning October 1, 2005 is \$7,216,122. This budget reflects the various factors that Public Health has had to address as this budget was developed. This includes rising labor costs, level funding from the State of Michigan, reduced revenues from various sources and less attrition due to the general economic conditions.

Total expenditures and revenues in 2005-06 will increase by \$179,723 versus the

2004-05 fiscal year. This includes an increase in General Fund support of \$181,841. Of this, \$140,088 is due to the county commitment to support the 3% annual pay adjustments and \$120,074 for fringe rate increases, less \$78,321 due to a one-time appropriation enhancement in 04-05.

IMPACT ON INDIRECT COSTS:

No impact on indirect costs.

IMPACT ON OTHER COUNTY DEPARTMENTS OR OUTSIDE AGENCIES:

This budget reflects renewal of the interagency agreements between Washtenaw Community Health Organization and Public Health for the continuation of substance abuse and mental health prevention services. Also included is the renewal of the Interagency Agreement between Environmental Health and Public Health for submission to the State Department of Community Health for their required approval of the local plan of organization for delivery of public health services including the continuation of the organizational separation between the two departments.

CONFORMITY TO COUNTY POLICIES:

This request is in conformance with County policies.

ATTACHMENTS/APPENDICIES:

2005-2006 CPBC Contract Agreement
Public Health/Environmental Health Interagency Agreement

WASHTENAW COUNTY

INTERAGENCY AGREEMENT BETWEEN THE DEPARTMENT OF PUBLIC HEALTH AND THE DEPARTMENT OF PLANNING & ENVIRONMENT A Reallocation Agreement for Public Health Services between Agencies of County Government

For Fiscal Year October 1, 2005 through September 30, 2006
(Original Interagency Agreement dated February 2, 1993)

Background and Purpose

The County wishes to continue the organizational separation of Environmental Health from the Public Health Department. Environmental Health Programs, directed by an Environmental Health Director, are within two Divisions that report directly to the Director of the Department of Planning and Environment. The Public Health Department, headed by the Public Health Officer, is a separate Department reporting directly to the County Administrator.

In order to implement the directives of the Board of Commissioners and in order to comply with the Michigan Public Health Code, this Interagency Agreement/Reallocation Agreement is hereby adopted. This Agreement provides the framework within which the Environmental Health activities of Washtenaw County will be conducted as required by the Public Health Code under the direction of the Health Officer. It shall be renewed annually as required by the Department of Community Health and made part of the annual plan and budget submissions to the Department of Community Health as required by the Public Health Code under the direction of the Health Officer.

I. POLICY DEVELOPMENT AND APPROVAL

- a. The Board of Commissioners of Washtenaw County has authority over all public health policies that are implemented within the County and, under the Public Health Code, retains unto itself the role of Board of Health.
- b. The Board of Commissioners of Washtenaw County has appointed the Public Health Officer to implement county and state public health rules and regulations and to propose new rules and regulations to protect and promote the health of county residents.
- c. The Board of Commissioners has created two Divisions within the Department of Planning and Environment which carry out Environmental Health programs.
- d. All Environmental Health policies, rules, regulations and enforcement actions that are proposed by the Department of Planning and the Environment require the review and approval of the Public Health Officer, when and as provided by the Public Health Code, before action by the Board of Commissioners or direct implementation by the Department of Planning and the Environment. The written approval or order of the Public Health Officer shall be required on all documents if and as specified in the Public Health Code.
- e. The Public Health Officer shall seek the review and comments of the Public Health Advisory Committee/Environmental Appeals Board for all changes in programs and activities that impact the health of the public, including Environmental Health programs and issues such as, but not limited to, investigation of food borne illnesses, epidemics, disasters, lead poisoning, vector-borne illness, and underground water contamination.

II. ORGANIZATION STRUCTURE AND STAFFING

a. ORGANIZATION STRUCTURE

- i. The organization structure for Public Health in Washtenaw County shall reflect the wishes of the Board of Commissioners.
- ii. The Public Health Officer shall review and approve the initial organizational structure of Environmental Health and any changes thereto prior to any actions by

the Board of Commissioners.

- iii. The Public Health Officer must approve organizational changes in Environmental Health that impact program delivery.

b. STAFFING

- i. To assure compliance and accountability an Environmental Health Director shall be designated and retain accountability for all Environmental Health Programs.
- ii. The Health Officer must participate in the selection of the senior staff member who manages Environmental Health programs, and must approve the final selection, following criteria specified by the Michigan Department of Public Health, prior to action by the Director of Planning and the Environment and the Board of Commissioners.
- iii. The Health Officer shall review and approve any changes to approved positions that affect Environmental Health programs.

III. ENFORCEMENT – REGULATIONS – APPEALS BOARDS

- a. The Health Officer and the Environmental Health Director will be consulted prior to and must approve any enforcement actions by Environmental Health programs under the State Public Health Code (e.g., need for immediate closure of licensed food service establishment, or where imminent danger to health or lives of individuals exists [s.2451], where appearance tickets are necessary [s.2463], or injunctive actions are to be initiated [s.2465]).
- b. The Public Health Officer and the Environmental Health Director will review and approve any proposed public health regulations prior to submission to the Board of Commissioners for adoption.
- c. Appeals and variances will be heard by the Public Health Advisory Committee / Environmental Appeals Board for issues relating to sewage disposal systems, water wells, and facilities regulated by the Washtenaw County Pollution Prevention Regulation. The Food Service Hearing Board will hear appeals on actions regarding food service licenses, and variances shall be issued by the Health Officer.

IV. PROGRAMS

- a. The Director of Environmental Health will have the overall responsibility for assuring that all Environmental Health programs are carried out in conformity with Public Health Code and rules as promulgated by the Department of Community Health, Department of Agriculture, Department of Environmental Quality, and other relevant State Departments, and shall be under constant review by the Public Health Officer.
- b. Changes in Environmental Health programs that are conducted under the authority of the Public Health Code must be approved by the Public Health Officer.
- c. The Health Officer will actively involve the Director of Environmental Health in Public Health decisions, particularly those that may impact on Environmental Health programs.
- d. Environmental Health programs, as directed by the Health Officer, shall work with the Public Health Medical Director and other designated staff to respond to foodborne illness outbreaks, communicable disease occurrences and other public health situations as required.
- e. Environmental Health programs will actively participate in Public Health Department community health assessment and improvement activities
- f. Environmental Health programs will work in accordance with the County Emergency

Operations Plan and the Public Health Emergency Plan under the direction of the Public Health Officer as needed in response to an emergency situation that impacts this County.

V. FINANCE AND BUDGET

- a. All fiscal policies within Environmental Health programs will be carried out in conformity with the agreement between the Michigan Department of Community Health and Washtenaw County Public Health for the Delivery of Specially Designated Health Services known as the Comprehensive Plan and Budget Contract (CPBC).
- b. Environmental Health expenditures and revenues are to be accounted for in the State Health Fund (221) under the Department of Treasury's Uniform Chart of Accounts for local government. This budget and this attendant reallocation agreement shall be submitted by the Health Officer with the CPBC Agreement as an attachment to it.
- c. The preparation of the CPBC Agreement will be done under the direction of the Health Officer in cooperation with the Director of Environmental Health and will include the budget and program outputs including, but not limited to Local Public Health Operations (formerly known as Cost Sharing).
- d. The preparation of the annual County budget is to be done in accordance with the allocations projected from the agreement in V (a) by the Health Officer in consultation with the Director of Environmental Health.
- e. Any changes during the state Agreement year at either the state or local level that require budget revisions to the state Agreement will be carried out under the direction of the Health Officer. Notification of significant changes in revenues or expenditures at either the local or state level shall be a mutual responsibility and occur at the earliest possible time to facilitate the joint development of strategies. Any fiscal changes that may impact services require the concurrence of County Administration and the County Board of Commissioners.
- f. Related financial records including staff time allocations, year end accruals, and audit work papers will be prepared by the Director of Environmental Health or his/her designated fiscal staff in consultation with and subject to, the approval of the Health Officer and County Internal Auditor.
- g. Environmental Health will handle its own local financial requirements, except as contained in the points above.

APPROVED AS TO CONTENT:

Ellen J. Clement, M.S.W, MPH (Date)
(Date)
Health Officer
Public Health Department

APPROVED AS TO FORM:

Curtis N. Hedger (Date)
Office of Corporation Counsel

WASHTENAW COUNTY

By: By:

Robert E. Guenzel, Administrator (Date)

APPROVED AS TO CONTENT:

Richard M. Fleece, R.S.
Director
Environmental Health

APPROVED AS TO CONTENT:

Anthony VanDerworp (Date)
Director
Department of Planning & Environment

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH

Janet Olszewski, Director (Date)

A RESOLUTION RATIFYING THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE PUBLIC HEALTH DEPARTMENT COMPREHENSIVE PLANNING, BUDGETING AND CONTRACTING (CPBC) AGREEMENT FOR THE PERIOD OCTOBER 1, 2005 THROUGH SEPTEMBER 30, 2006, APPROVING THE PUBLIC HEALTH DEPARTMENT'S 2005-2005 BUDGET, MODIFYING POSITIONS AND AUTHORIZING THE COUNTY ADMINISTRATOR TO SIGN DELEGATE CONTRACTS

WASHTENAW COUNTY BOARD OF COMMISSIONERS

October 5, 2005

WHEREAS, since 1987 MDCH has funded local public health programs including Environmental Health through a Comprehensive Planning, Budgeting and Contracting (CPBC) Agreement which includes Local Public Health Operations funds for General Communicable Disease Control; Hearing Screening; Immunizations; Sexually Transmitted Diseases; and Vision Screening; Food Service Sanitation, and various other categorical funds allocated to local health departments; and

WHEREAS, the CPBC requires the local health department to have a signed CPBC agreement prior to the start of the 2005-2006 fiscal year on October 1, 2005; and

WHEREAS, annual changes in funding and program requirements at the state level and for local activities requires that a budget be approved prior to the start of the new fiscal year; and

WHEREAS, this matter has been reviewed by the County Administrator, Corporation Counsel, the Human Resources Department, the Finance Department and the Ways and Means Committee

NOW THEREFORE BE IT RESOLVED that the Washtenaw County Board of Commissioners hereby ratifies the signature of the Administrator on the Comprehensive Planning, Budgeting and Contracting Agreement with the Michigan Department of Community Health for the period October 1, 2005 through September 30, 2006.

BE IT FURTHER RESOLVED that the Board of Commissioners takes the following actions contingent upon receipt of funding in conformity with the CPBC agreement:

1. Authorizing the budget, as attached hereto and made a part hereof
2. Authorizing the Administrator to sign delegate contracts upon review by Corporation Counsel, to be filed with the County Clerk
3. Authorizing the elimination and creation of positions listed hereof

BE IT FURTHER RESOLVED that the Washtenaw County Board of Commissioners hereby ratified the signature of the Administrator on the Interagency Agreement between Public Health and Planning & Environment, as on file with the County Clerk

BE IT FURTHER RESOLVED that the Washtenaw County Board of Commissioners authorizes the eliminations and Creations of positions effective October 5, 2005 as follows:

<u>Position #</u>	<u>Status</u>	<u>Title</u>	<u>Grade</u>	<u>Group</u>	<u>Eliminate</u>	<u>Create</u>	<u>Remove From Hold Vacant</u>
1258-0006	A	WIC Program Associate	12	12		1.0	
1456-000?	A	Hearing/Vision Tech I/II	14/16	12	1.0		
1456-000?	A	Hearing/Vision Tech I/II	14/16	12	1.0		
2063-0003	A	Health Educator I/II	20/22	11			1.0

**Washtenaw County
Public Health Department
Fund Summary - 2960
October 1, 2005 – September 30, 2006**

<u>Object</u>	<u>Description</u>	<u>Original Budget 2005/06</u>
Revenue:		
50000	Federal Revenue	\$0
54000	State Revenue	\$1,913,659
58000	Local Revenue	\$1,782,334
60000	Fees & Services	\$1,148,235
67000	Other Revenue & Reimbursement	\$174,510
69000	In-Kind Contributions	\$6,395
69500	Transfers In	\$2,190,989
	Total Revenue	\$7,216,122
Expenditures		
70050	Personal Services	\$4,974,998
72600	Supplies	\$195,495
80000	Other Services & Charges	\$1,176,021
93500	In Kind Charges	\$6,395
94000	Internal Service Charge	\$855,471
95000	Capital Outlay	\$7,742
98000	Reserves	\$0
	Total Expenditures	\$7,216,122