

CHAIRPERSON
DALE COPEEDGE

VICE-CHAIRPERSON
VICTOR CELENTINO

VICE-CHAIRPERSON PRO-TEM
VINCE DRAGONETTI

HUMAN SERVICES COMMITTEE
DEB NOLAN, CHAIR
TODD TENNIS
ANDY SCHOR
BRIAN McGRAIN
DON VICKERS
STEVE DOUGAN

INGHAM COUNTY BOARD OF COMMISSIONERS
P.O. Box 319, Mason, Michigan 48854 Telephone (517) 676-7200 Fax (517) 676-7264

THE HUMAN SERVICES COMMITTEE WILL MEET ON MONDAY, MARCH 19, 2012
AT 6:30 P.M., IN THE PERSONNEL CONFERENCE ROOM (D & E), HUMAN SERVICES
BUILDING, 5303 S. CEDAR, LANSING.

Agenda

Call to Order

Approval of the [February 21, 2012](#) and [February 27, 2012](#) Minutes

Additions to the Agenda

Limited Public Comment

1. Health Department - Resolution to Authorize a [Realignment](#) of Health Department Programs and Administrative Structure
2. Controller's Office/Department of Human Services - Resolution Designating the Ingham County Department of Human Services as Administrator of a Targeted Assistance Program Grant for [Refugee Services](#)
3. Human Services Committee - Discussion Item: Health Center Tours

Announcements

Public Comment

Adjournment

**PLEASE TURN OFF CELL PHONES OR OTHER ELECTRONIC DEVICES
OR SET TO MUTE OR VIBRATE TO AVOID
DISRUPTION DURING THE MEETING**

The County of Ingham will provide necessary reasonable auxiliary aids and services, such as interpreters for the hearing impaired and audio tapes of printed materials being considered at the meeting for the visually impaired, for individuals with disabilities at the meeting upon five (5) working days notice to the County of Ingham. Individuals with disabilities requiring auxiliary aids or services should contact the County of Ingham in writing or by calling the following: Ingham County Board of Commissioners, P.O. Box 319, Mason, MI 48854 Phone: (517) 676-7200. A quorum of the Board of Commissioners may be in attendance at this meeting. Meeting information is also available on line at www.ingham.org.

HUMAN SERVICES COMMITTEE
February 21, 2012
Minutes

Members Present: Deb Nolan, Todd Tennis, Andy Schor, Brian McGrain, Don Vickers, Steve Dougan, and Board Chairperson Copedge

Members Absent: None

Others Present: Jared Cypher, Cindy Prorok, Renee Branch Canady, Deb Brinson, Willie Davis, Bobby Joyce, Tom Curtis, Robin Turner, and others.

The meeting was called to order by Chairperson Nolan at 4:12 p.m. in the Personnel Conference Room "D & E" of the Human Services Building, 5303 S. Cedar Street, Lansing.

Additions to the Agenda

None.

Limited Public Comment

None.

1. Health Department - Discussion on Community Health Centers with Financial Consultant from the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA)

Ms. Prorok, Management Solutions Consulting Group Inc. (MSCG) introduced herself and summarized her background including that she has 15 years of experience in this type of work. She provided an informational packet that included: "Health Center Requirements", "Summary of Key Health Center Program Requirements", "Agenda", "HRSA Notice of Grant Award", a copy of the PowerPoint Presentation and a summary of her experience. Additionally, more detailed information on the Community Health Center Program can be found online under Section 330 of the Public Health Services Act.

Ms. Brinson stated that Ms. Prorok comes highly recommended and is providing Ingham County with her professional public entity expertise including eliminating the use of Ingham County General Funds.

Ms. Prorok discussed the Federal Budget cuts, stimulus money, funding allocation, and the number of new sites that were funded. She noted there are still incentive opportunities for counties and payment sources for patients.

Ms. Prorok stated the FQHC starts by receiving the 330 Grant. That Grant comes with the benefit of cost based reimbursement. She explained the benefits of the reimbursements, in addition to, the Federal Tort Claims Act (FTCA), Notice of Deeming Action (NDA) that serves as verification of coverage, the FQHC Scope of Work coverage, and the concern of additional coverage for work performed outside of the Scope of Work.

Ms. Brinson overviewed Ingham County's liability coverage including areas that are outside the Scope of Work. She noted it is her goal to qualify for FTCA certified coverage in order to receive additional savings. Ms. Prorok stated that Ingham County is unique in providing comprehensive care when compared to other counties in the nation.

Ms. Prorok explained that a FQHC should be able to support itself without the input of County money and giving the example of an enterprise fund. Accrual accounting is the best way to see what is happening in order to properly identify income and expenses plus measure outcomes thus sequentially reducing County General Funds. She stated the enterprise fund will help Ingham County with the Memorandum of Understanding and key areas of operation.

Ms. Prorok explained that in order to receive the Grant money a Community must be in need and have a Community Board established of 51% or more users. She stated the Community Board is the steward of the money.

(Comm. McGrain arrived at 4:34 pm)

Ms. Prorok reviewed the "HRSA NOTICE OF GRAND AWARD" Item #15, USE OF PROGRAM INCOME www.omb.gov along with Page 2, Program Specific Term(s), and Item #3 Program Income. She noted the word "grant funds" refers to the 330 Grant. She explained program income, off-set income, excess program fund, and her concern of leaving Federal money on the table.

Ms. Prorok explained the program is about access to care and the uninsured patient having access to care; however, financial stability is a Grant requirement (#12). Quality of care is where the business is moving, QA/QI committees are required, there must be quarterly meetings, minutes of those meetings, and the health plan has required health measures.

Ms. Prorok stated all of the funding being put into the program is to help get Electronic Medical Records up and running and to assist the Community Health Centers to achieve the Patient Care Medical Home status. The Patient Care Medical Home status comes from the National Commission on Quality Assurance (NCQA) and in some states that status is revenue. Electronic Health Records are required to help measure progress of a patient, as well as, the Health Center.

Ms. Prorok and the Committee discussed the national shortage of practitioners, vacancies and the difficulties filling the positions. Ms. Prorok explained the necessity for financial stability in order to maintain growth, provider recruitment and retention and if that is not working the County can not provide access and service. She noted the importance of understanding the marketplace and the needs of the community.

(Comm. Schor left at 4:50 p.m.)

Ms. Prorok stated there is a need to understand operating within a budget, contributions, payer mix, expenses, and allocation of overhead to ultimately eliminate the need for County General Funds. Ms. Brinson provided the example of Carefree Clinic funding. Ms. Prorok suggested using AmeriCorps help with enrollment. Ms. Prorok reviewed operating within a budget, cash

flow liquidity, calculating working capital, working capital to monthly expense ratio, change in net assets, and liabilities. She noted that the ratio of working capital to monthly expense is generally acceptable at two months. This is important information because it is a program requirement #12, maintain financial stability and it is required to trend these measures. Ms. Prorok compared the financial National Trend Graphs to Ingham County's financial trends stressing the importance of reserves.

Ms. Prorok explained the Uniform Data Set report (UDS) and the benefit of capturing data monthly in order to better manage the program. She reviewed the patient utilization rate and payer mix of the County and comparing it nationally. There was a discussion of payment/reimbursement from Medicaid, Medicare and Michigan Primary Care Association, as well as, the obligation to see all patients. Ms. Prorok discussed productivity and her concerns of the practitioners, mid-level practitioners and support staffing. She explained performance, rates and how the data on the forms matter. Ms. Brinson explained although challenging the Department is working toward better productivity by realigning resources, outreach, enrollment, as well as, making sure every uninsured child becomes insured.

(Comm. Dougan left at 5:30 p.m.)

Ms. Prorok stressed the importance of compliance of the Community Health Center with the expectations of the program.

Chairperson Nolan thanked Ms. Prorok for spending time at Ingham County this past week, as well as, the presentation.

Ms. Prorok complimented the staff and Community Health Center Board for doing a great job.

Dr. Branch Canady stated that although this presentation is business orientated ultimately the mission is focused around the residents in Ingham County. She complimented Ms. Brinson for the foresight to bring Ms. Prorok in now because they have learned things that will assist them in the years to come.

Announcements

None.

Public Comment

None.

The meeting adjourned at approximately 5:45 p.m.

Respectfully submitted,

Julie Buckmaster

HUMAN SERVICES COMMITTEE
February 27, 2012
Minutes

Members Present: Deb Nolan, Todd Tennis, Andy Schor, Don Vickers, Steve Dougan, and Board Chairperson Copedge

Members Absent: Brian McGrain

Others Present: Jared Cypher, Chuck Gray, Renee Canady, Joe Wald, Mary Meirndorf, Karen Jennings, and Stephanie Reuter

The meeting was called to order by Chairperson Nolan at 6:31 p.m. in the Personnel Conference Room "D & E" of the Human Services Building, 5303 S. Cedar Street, Lansing.

Approval of the February 6, 2012 Minutes

The February 6, 2012 Minutes were approved as submitted.

Additions to the Agenda

2d. Late – Resolution to Accept Healthy! Capital Counties Funds and To Authorize a Temporary Part-Time Position.

Limited Public Comment

None.

MOVED BY COMM. DOUGAN, SUPPORTED BY COMM. VICKERS, TO APPROVE A CONSENT AGENDA FOR THE FOLLOWING ITEMS:

1. MSU Extension - Resolution Authorizing a MSU Extension 4-H Program Jump into Foods and Fitness Grant to Target Nutrition Education to Underserved Youth in Ingham County and Lansing.

Ms. Reuter explained class size, funding, successes, plus the coordination and rotation of the program. The Committee discussed service location, poverty and after school programs. The Committee suggested a rotation of the 4-H program to different after school programs each year. Ms. Reuter agreed to do so.

(Comm. Tennis arrived at 6:33 pm)

2. Health Department
 - a. Resolution to Authorize a Contract with GAV Associates to Write Up Preliminary Construction Documents for Alterations and Renovations at Willow Health Center

- d. Resolution to Accept Healthy! Capital Counties Funds and To Authorize a Temporary Part-Time Position.

MOTION CARRIED UNANIMOUSLY. Absent: Comm. McGrain

MOVED BY COMM. DOUGAN, SUPPORTED BY COMM. VICKERS, TO APPROVE THE ITEMS ON THE CONSENT AGENDA.

MOTION CARRIED UNANIMOUSLY. Absent: Comm. McGrain

2. Health Department

- c. Presentation: Regarding the Greater Lansing Food Bank (*No Materials*)

Dr. Branch Canady introduced Joe Ward; Interim Executive Director, Mary Meirndorf; Ingham County Employee serving as the Coordinator of the Ingham County Food Bank, and Karen Jennings; Ingham County Interim Public Health Service Director.

Mr. Ward provided a brief history of the Food Bank and their commitment to making sure people do not go hungry. He expressed his gratitude for the partnership with Ingham County, in addition, to others who make the Food Bank a success.

Mr. Ward explained there are three primary Food Banks in the area: 1) The Greater Lansing Food Bank, which is a fundraising organization that has raised approximately \$1.5 million a year and serves the Tri-County area, with a majority of service in Ingham County. He noted the money is used to pay for food. 2) The Mid-Michigan Food Bank, owned by the Red Cross, is the primarily a warehouse of the food. He noted the Mid-Michigan Food Bank sends out the food and the Greater Lansing Food Bank pays for it. 3) The Ingham County Food Bank where Ms. Meirndorf is in charge and is generally a call center but does much more.

Ms. Meirndorf overviewed the history of the Ingham County Food Bank. She thanked the Commissioners for allowing the Health Department to be innovative and provide great resources to over 18,000 families. She explained the Food Bank is much more than a call center that provides food assistance they also provide technical support and monitoring of the food pantry network. She estimated 1.3 million pounds of food is distributed throughout the network. Mr. Ward stated 1.3 million pounds of food was funded by the Greater Lansing Food Bank at an estimated cost of \$500,000.

Ms. Meirndorf stated it is important to understand the Ingham County Food Bank also connects families to Health Department Services such as WIC and Health Care Coverage, as well as, other services that may be needed during their crisis.

Mr. Ward stated the people served are families, working adults, children, and seniors living on fixed incomes. He reviewed the increases of people being served from 2010 to 2011. Ms. Meirndorf noted that many of these people are families who have never before asked for help. Mr. Ward noted some of these people donated to the Food Banks in the past and now are using the service.

Mr. Ward reviewed how the Food Movers program rescues food from organizations that would have been thrown away and is now being distributed throughout the network. He estimated the ¾ million pounds of food has been distributed. Comm. Schor asked how the Food Bank is contacted by the organizations. Mr. Ward stated there was an article in the Lansing State Journal that made people aware, as well as, word of mouth.

Mr. Ward summarized the Garden Project as community gardens helping people grow their own food and as a result creating ownership and self worth in the community.

Mr. Ward explained the annual envelope campaign and empty plate fundraisers have been very successful; further, the money stays in mid-Michigan. He invited the Commissioners, as friends and guests, to attend the Empty Plate Fundraiser on May 10, 2012 at 5:30 pm at The Spartan Club, Spartan Stadium 4th Floor, Michigan State University, East Lansing, Michigan,

Mr. Ward explained how data is collected and used to create a food security report which develops a model in order to create better programs and assists with consolidation where needed to better support the community. In October 2011 a decision was made to combine the Mid-Michigan Food Bank-Red Cross with the Greater Lansing Food Bank. The Red Cross is giving all the assets including the building, trucks and inventory to the Greater Lansing Food Bank. The effective date of the consolidation will be July 1, 2012. Mr. Ward further explained the next step is to see how to incorporate the Ingham County Food Bank into the organization to increase efficiency. The Greater Lansing Food Bank is looking to continue its partnership with Ingham County and hopes it will grow.

Dr. Branch Canady stated they will continue to think of what role the Ingham County Food Bank will play in this model giving the example of the Ingham Health Plan.

Comm. Vickers expressed his concern that people are informed about the program suggesting distributing pamphlets at the schools. Mr. Ward suggested making use of MSU interns in public relations, fund raising and advertising. Comm. Schor suggested using the 211 platform. Comm. Dougan suggested making use of partners/business outgoing first class mail.

b. Discussion: Possible Tour of the Willow Health Center

The Committee suggested holding the Human Services meeting Monday, March 19, 2012 at the Willow Health Center beginning at 5:00 pm. Mr. Cypher will email the Committee to confirm the meeting date, time and location.

The Committee made note of the March 23, 2012 meeting at the Wellness Center on Pennsylvania and Mt. Hope at 10:00 am and proceeding to Sparrow.

Announcements

Chairperson Nolan expressed her gratitude for Dr. Branch Canady's insight and collaborative efforts gathering and reporting of data every three years.

Public Comment

None.

The meeting adjourned at approximately 7:29 p.m.

Respectfully submitted,

Julie Buckmaster

MARCH 19, 2012 HUMAN SERVICES AGENDA STAFF REVIEW SUMMARY

ACTION ITEMS:

The Assistant Deputy Controller is recommending approval of the following resolutions:

1. *Resolution to Authorize a Realignment of Health Department Programs and Administrative Structure*

This resolution will realign the administrative structure of the Health Department. The realignment is the direct result of the separation of the Health Officer and Medical Director responsibilities into distinct positions as required by the appointment of an administrative Health Officer. This structure distributes administrative responsibilities across fewer managers, and utilizes the existing administrative and managerial capacity of the department. The total savings is approximately \$24,836. Please see the attached memorandum for more details.

2. *Resolution Designating the Ingham County Department of Human Services as Administrator of a Targeted Assistance Program Grant for Refugee Services*

The U.S. Department of Health and Human Services Office of Refugee Resettlement has notified the Ingham County Department of Human Services that Ingham County has been selected for a Targeted Assistance grant for services to refugees. The purpose of Targeted Assistance formula grants is to provide, through a process of local planning and implementation, direct services intended to result in economic self-sufficiency and reduced welfare dependency of refugees through job placements.

This resolution designates the Ingham County Department of Human Services as the agency to administer the grant program activities, provided they report annually to the Board of Commissioners. Please see the attached memorandum for further details.

DISCUSSION ITEM:

3. *Health Center Tours*

MEMORANDUM

TO: Human Services Committee
County Services Committee
Finance Committee

FROM: Renée Branch Canady, Ph.D., M.P.A., Health Officer

DATE: March 6, 2012

RE: Resolution to Authorize a Realignment of Health Department Administrative Structure

This memorandum requests approval for a resolution that will realign the administrative structure of the Health Department. The realignment is the direct result of the separation of the Health Officer and Medical Director responsibilities into distinct positions as required by my appointment as administrative Health Officer. Having observed and evaluated the administrative operations of the department over the last four months since my appointment, I now propose a structure which distributes administrative responsibilities across fewer managers, and more effectively utilizes the existing administrative and managerial capacity of the department. As Health Officer, I will also retain additional direct report managerial supervisor in order to take advantage of fiscal opportunities afforded by the retirement of two managers in the department, allowing for greater administrative efficiency as well as important budgetary savings.

This resolution recommends maintaining the current two-Deputy Health Officer administrative structure and realigns managerial positions and roles within the Department. The resolution reassigns duties formerly held by the PHS Director (which will be eliminated) and takes advantage of lessons learned during the interim administrative structure which was established upon my appointment in November, 2011. In addition, the realignment will result in the elimination of a total of five managerial positions, the establishment of one new managerial position, and the reallocation of managerial duties across existing staff.

I believe that this proposal “right-sizes” the administrative work at all levels of the department while maintaining a robust and effective leadership team. We have vetted this plan by all affected unions and the County’s Human Resources Department; both have offered preliminary support. The affected employees are also supportive including those who will accept new and additional responsibilities. Positions proposed for elimination involve vacancies; thus avoiding negative effects to any incumbent employees.

In addition to the \$24,836 in cost savings, the reorganization creates additional provider capacity to serve clients in the Community Health Center Network, which in turn, will generate addition revenue for the department.

I recommend the Board adopt the attached resolution and authorize the recommended staffing and structural adjustments.

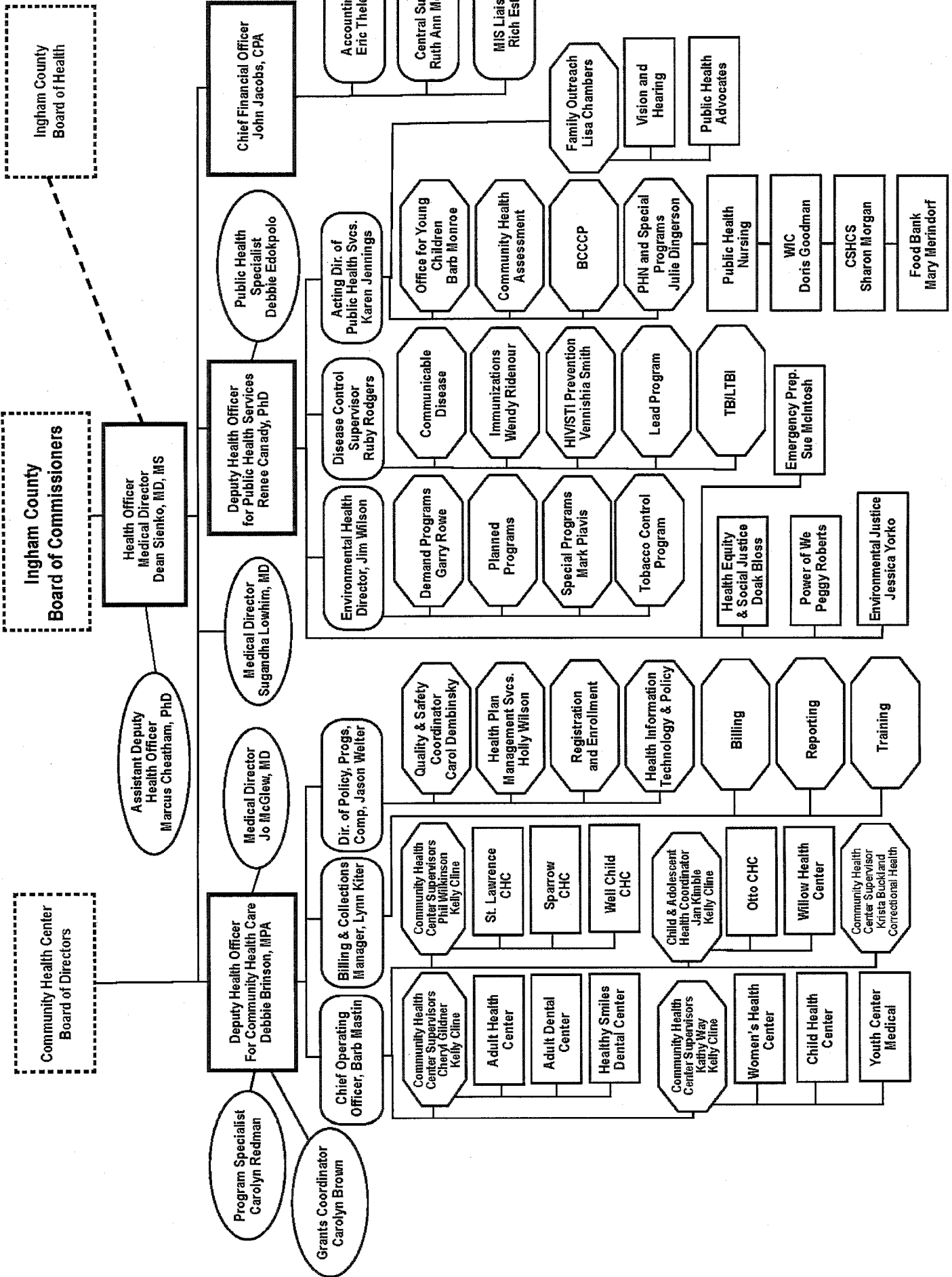
c: Deb Brinson, Deputy Health Officer, Community Health Care Services
Travis Parsons, Human Resources Director
Sarah Bryant, President, ICEA Public Health Nurses Unit
Rich Estill, President, ICEA Professional Employees Unit
Kathy Fitton, President, Michigan Nurses Association
Chuck Gray, President, UA

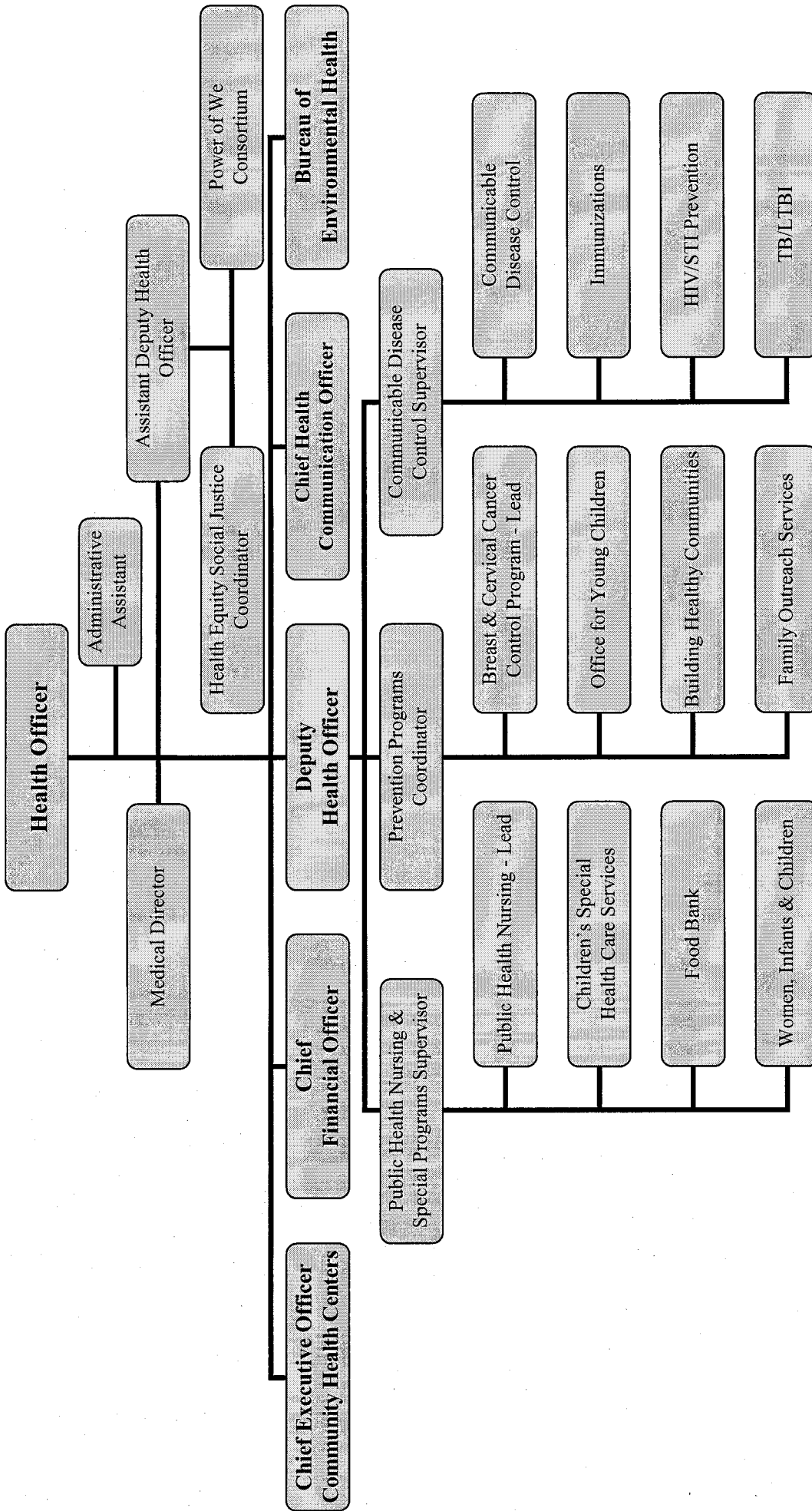
<u>Position #</u>	<u>Current Job Title</u>	<u>Current Pay</u>	<u>Current Annual Cost</u>	<u>New Job Title</u>	<u>New Pay</u>	<u>Proposed Annual Cost</u>	<u>Cost/ (Savings)</u>	<u>Position filled or vacant</u>	
601001	HO/Medical Examiner/Medical Director	MCF C+	242,359	Health Officer	MCF 18	177,643	(64,716)	filled	(3)
601381	DHO, Public Health Services	MCF 17	167,936	DHO, Public Health Services	MCF 15	148,223	(19,713)	vacant	
601042	Prevention Program Coord	ICEA 9	102,925	Prevention Program Coord	ICEA 10	109,725	6,800	filled	
601041	BCCCP Nurse	MNA 2	87,090	BCCCP Charge Nurse	MNA 3	93,564	6,474	filled	
601383	Assistant Deputy Health Officer	MCF 10	108,164	Chief Health Communication Officer	MCF 10	108,164	0	filled	
601135	Public Health Specialist	ICEA 5	78,037	Assistant Deputy Health Officer	MCF 8	93,611	15,575	filled	
new	na	na	0	Deputy Director of Environmental Health	MCF 11	115,366	115,366	vacant	
601333	Sanitarian II	ICEA 8	95,649	San III, Planned Program Supv	ICEA 9	102,925	7,277	vacant	
601324	Demand Program Supervisor	MCF 11	115,366	San III, Demand Program Lead	ICEA 9	102,925	(12,440)	filled	(1)
601335	Community Health Rep IV	UAW F	67,709	Administrative Assistant, EH	UAW G	70,594	2,885	filled	
601044	Community Health Rep II	UAW 8	62,776	Administrative Assistant, BCCP	UAW F	67,709	4,933	filled	
601366	Human Services Grant Coord	MCF 10	108,164	Human Services Grant Coord	ICEA 7	88,709	(19,455)	filled	(1)
new	na	na	0	Medical Director	MCF C	223,918	223,918	filled	
601377	Project Specialist	ICEA 5	78,035	Project Specialist	ICEA 6	83,037	5,002	filled	
601307	Business Analyst	MCF 7	87,106	Health Analyst/Systems Analyst	ICEA 8	95,132	8,026	filled	
601025	PCP/Dep Medical Director	MCF C	223,918	Primary Care Physician	MCF C	223,918	0	vacant	
601004	Director of PHS	MCF 13	129,814	eliminated	na	0	(129,814)	na	
601320	Planned Program Supervisor	MCF 11	115,366	eliminated	na	0	(115,366)	na	
601363	Community Health Rep II	UAW D	62,104	eliminated	0	0	(62,104)	filled	
601052	Sanitarian II (2)	ICEA 8	32,482	eliminated	0	0	(32,482)	filled	
Contract	Sparrow Contract for ME Svcs	na	320,000	increase per R11-335	na	355,000	35,000	na	
Total Cost			2,285,001			2,260,166	(24,836)		

(1) effective upon incumbent retirement on or about 7/1/12

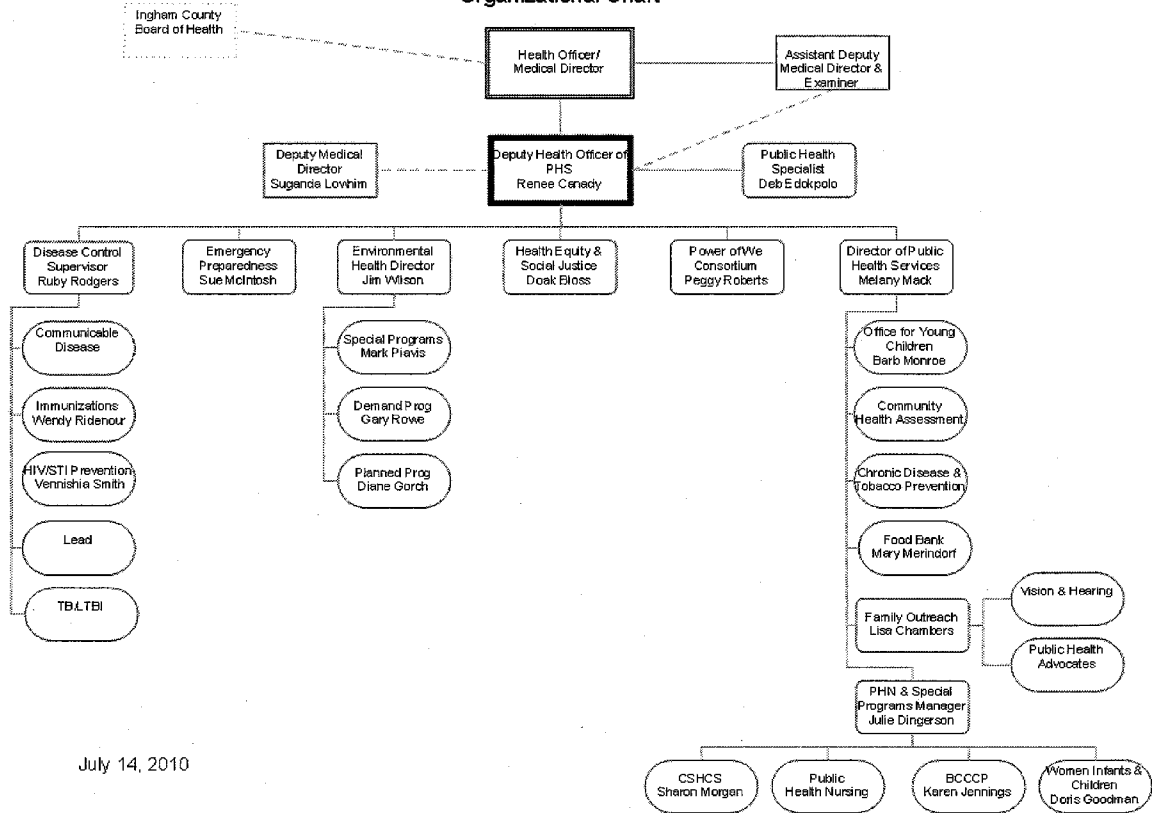
(2) This position is currently partially funded by a State Lead Grant in the amount of \$78,952. Since the grant is being discontinued, the position is proposed for elimination. The net general fund savings from eliminating the position will be \$32,482..

(3) This reflects Dr. Sienko's rate of pay, which was equivalent to a physician plus 5%.

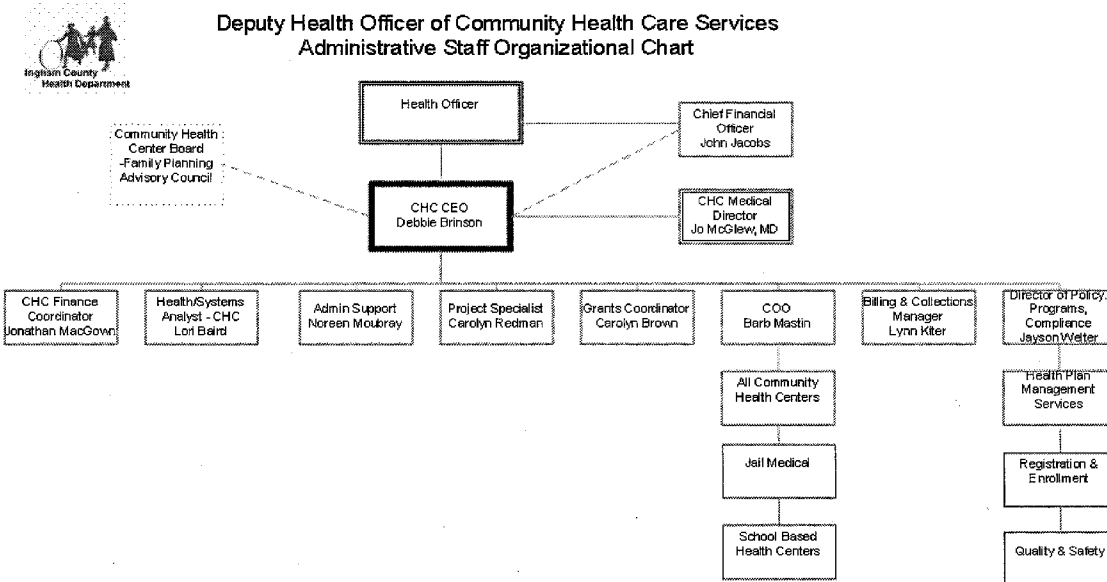




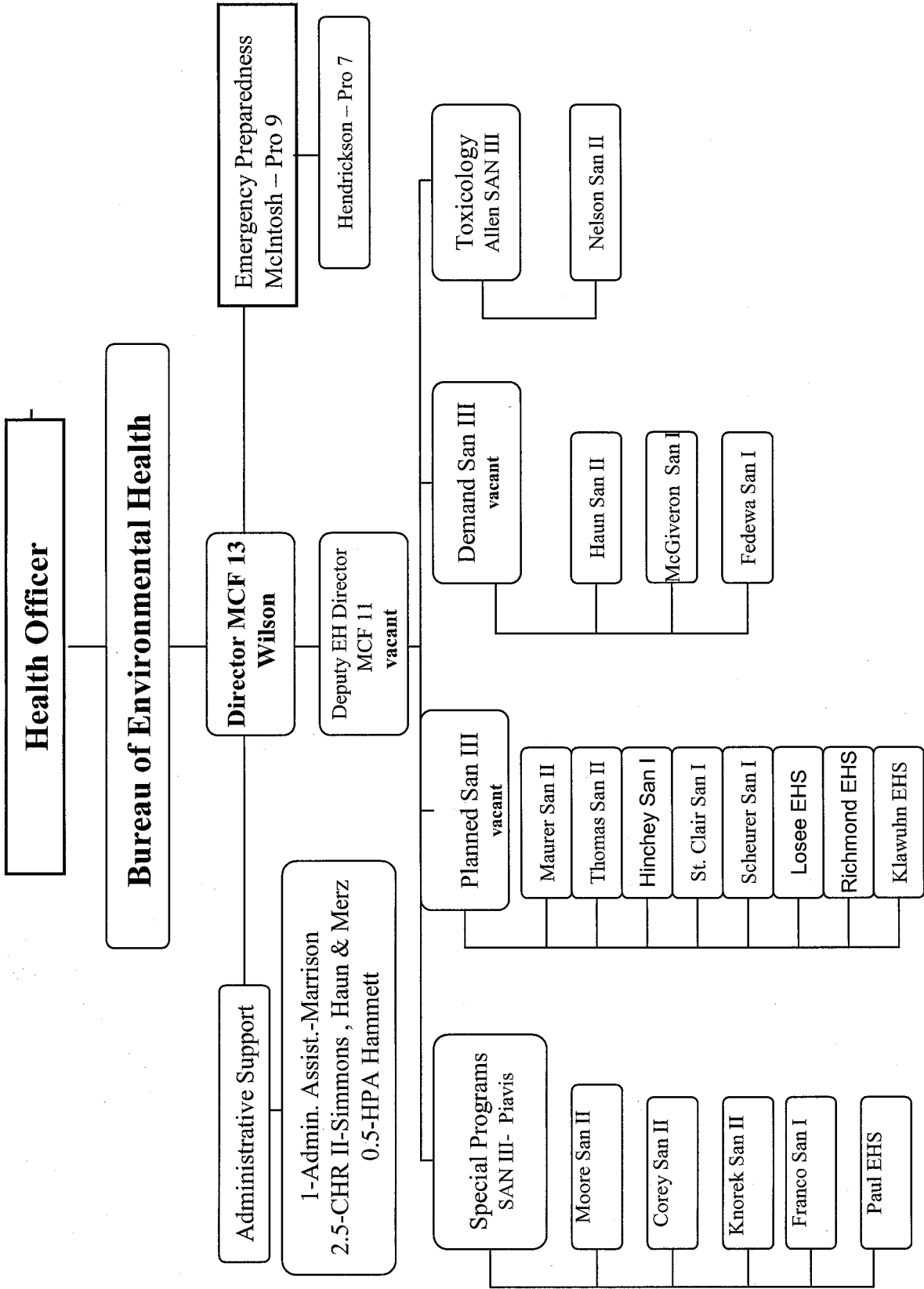
Deputy Health Officer of Public Health Services Organizational Chart



July 14, 2010



March 12, 2012



Introduced by the Human Services, County Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

**RESOLUTION TO AUTHORIZE A REALIGNMENT OF HEALTH DEPARTMENT PROGRAMS
AND ADMINISTRATIVE STRUCTURE**

WHEREAS, the Board of Commissioners establishes the Plan of Organization for the Health Department, with the concurrence of the Michigan Department of Community Health; and

WHEREAS, Dean G. Sienko, M.D., recently retired as Health Officer and Medical Director; and

WHEREAS, in Resolution #11-336 the Board of Commissioners appointed Renée Branch Canady, Ph.D., as Health Officer; and

WHEREAS, the re-establishment of the Medical Director position was set forth in Resolution #11-337; and

WHEREAS, the Health Officer has reviewed the structure of the Department and has proposed a number of changes in the administrative structure resulting in shifts of administrative services and job functions; and

WHEREAS, the proposed changes will reduce administrative structure through the elimination of managerial positions and realignment of reporting relationships resulting in increased administrative, programmatic and fiscal efficiency; and

WHEREAS, the majority of the proposed adjustments can be implemented by taking advantage of currently vacant positions and retirements at a significant budgetary savings; and

WHEREAS, the proposed recommendations have been evaluated by the Human Resources Department which has concurred with the recommendations that are contained in this resolution; and

WHEREAS, the affected bargaining groups have been consulted and provided documentation regarding the recommendations contained in this resolution; and

WHEREAS, the Health Officer recommends that the Board of Commissioners accept the proposed realignment and restructuring of services and authorize the resulting changes in job titles, classifications and establishment of positions; and

WHEREAS, the Health Officer has advised that no additional funds are required and that implementation of the proposed changes result in cost savings.

THEREFORE BE IT RESOLVED, that the Ingham County Board of Commissioners hereby amends the Ingham County Health Department Plan of Organization.

BE IT FURTHER RESOLVED, the Board of Commissioners authorizes the following changes in job titles and reclassification/salary grades:

<u>Position number</u>	<u>Current Grade</u>	<u>Current Grade</u>	<u>Proposed Job Title</u>	<u>Proposed Grade</u>
601001	Health Officer/Medical Examiner/Medical Director	MCF C+	Health Officer	MCF 18
601381	Deputy Health Officer, Public Health Services	MCF 17	Deputy Health Officer, Public Health Services	MCF 15
601044	CHR II	UAW 8	Administrative Assistant BCCCP	UAW F
601042	Prevention Program Coord	ICEA 9	Prevention Program Coord	ICEA 10
601041	BCCCP Nurse	MNA 2	BCCCP Nurse Case Manager	MNA 3
601383	Assistant Deputy Health Officer	MCF 10	Chief Health Communication Officer	MCF 10
601135	Public Health Specialist	PRO 5	Assistant Deputy Health Officer	MCF 8
601333	Sanitarian II	ICEA 8	San III, Planned Program Lead	ICEA 9
601324	Demand Program Supervisor	MCF 11	San III, Demand Program Lead	ICEA 9
601335	CHR IV	UAW F	Administrative Assistant, EH	UAW G
601366	Human Services Grant Coord	MCF 10	Human Services Grant Coord	ICEA 7
601377	Project Specialist	ICEA 5	Project Specialist	ICEA 6
601307	Business Analyst	MCF 7	Health/Systems Analyst/CHC	ICEA 8

BE IT FURTHER RESOLVED, the Board of Commissioners authorizes the following changes in job titles:

<u>Position / Title</u>	<u>Proposed Title</u>
601402 / Deputy Health Officer, Community Health Services	Chief Executive Officer/Director, Community Health Services
601025 / PCP/Deputy Medical Director	Primary Care Physician

BE IT FURTHER RESOLVED, the Board of Commissioners authorizes the following positions are established or re-established:

<u>Position / Title</u>	<u>Proposed Grade</u>
Deputy Director, Environmental Health	MCF 11
Medical Director	MCF C

BE IT FURTHER RESOLVED, that the following positions are eliminated:

<u>Position/Title</u>	<u>Grade</u>
601004 / Director Public Health Services	MCF 13
601320 / Manager, Planned Programs	MCF 11

BE IT FURTHER RESOLVED, that due to the loss of the MDCH Lead Grant, positions 601363/Community Health Representative II/UAW D, and 601052/Sanitarian II will be eliminated and the incumbents will be reassigned to vacant positions within the Health Department, with these actions effective no later than December 31 2012. The general fund allocation to this position will be subsumed by savings from the reorganization.

BE IT FURTHER RESOLVED, that all position adjustments be effective upon resolution approval, with the exception of the positions mentioned above and 601324 and 601366, which will take effect July 1, 2012 upon the retirement of the incumbents.

BE IT FURTHER RESOLVED, that the hiring freeze is waived and the positions established can be posted.

Agenda Item 2

TO: Human Services and Finance Committees
FROM: Jared Cypher, Assistant Deputy Controller
DATE: March 9, 2012
RE: Targeted Assistance Grant Program for Refugee Services

The U.S. Department of Health and Human Services Office of Refugee Resettlement has notified the Ingham County Department of Human Services that Ingham County has been selected for a Targeted Assistance grant for services to refugees. The purpose of Targeted Assistance formula grants is to provide, through a process of local planning and implementation, direct services intended to result in economic self-sufficiency and reduced welfare dependency of refugees through job placements.

The FY 2011 allocation is for \$340,379 for a three-year project cycle. Either the County or the Department of Human Services may administer this grant, however at this time the Ingham County Department of Human Services is in the best position to ensure that the services are delivered, because they already have the appropriate mechanisms in place and administer similar refugee resettlement services.

This resolution designates the Ingham County Department of Human Services as the agency to administer the grant program activities, provided they report annually to the Board of Commissioners. I recommend approval.

Introduced by the Human Services and Finance Committees of the:

INGHAM COUNTY BOARD OF COMMISSIONERS

**RESOLUTION DESIGNATING THE INGHAM COUNTY DEPARTMENT OF HUMAN SERVICES
AS ADMINISTRATOR OF A TARGETED ASSISTANCE PROGRAM GRANT FOR
REFUGEE SERVICES**

WHEREAS, the Department of Health and Human Services Office of Refugee Resettlement has notified the Ingham County Department of Human Services that Ingham County has been selected for a Targeted Assistance grant for services to refugees; and

WHEREAS, the purpose of Targeted Assistance formula grants is to provide, through a process of local planning and implementation, direct services intended to result in economic self-sufficiency and reduced welfare dependency of refugees through job placements; and

WHEREAS, the FY 2011 allocation is \$340,379 for a three-year project cycle; and

WHEREAS, the Ingham County Department of Human Services is best positioned to accept and administer this grant.

THEREFORE BE IT RESOLVED, the Ingham County Board of Commissioners designates the Ingham County Department of Human Services as the administrator of the FY 2011 Targeted Assistance program formula grant for services to refugees.

BE IT FURTHER RESOLVED, the Ingham County Department of Human Services shall provide an annual report of activities conducted under the grant for each of the years in the three-year project cycle.