

DRAFT - Agenda
Tuscola County Board of Commissioners
Committee of the Whole
Thursday, December 10, 2009 – 8:00 A.M.
Annex Board Room (207 E. Grant Caro, Mi.)

Non-Committee

Finance

Committee Leaders-Commissioner Bardwell and Peterson

Primary Finance Items

1. **EDC Financial Report Presentation**
2. **Workers Compensation Renewal Alternatives – Presentation by Rummel Agency (See A)**
3. **County Health Insurance Update - Public Employee Benefits Solutions**
4. **2010 County Budget Development Update**
5. **Legal Services RFP and Retainer Alternative**
6. **2009 Budget Amendments (See B)**

Secondary/On-Going Finance Items

1. Treasurer Bank Statement Reconciliation (Balanced through November)
2. Clerk/FOC Optical Imaging Update
3. Update Regarding Broadband Grant Application
4. SBCI – Great Lakes Restoration Initiative Grant Funds
5. BCBSM Lawsuit Claim
6. Discussion of Tether Program Potentials
7. ATM, PayPal, Touch Pay Options for Courthouse
8. Mandated/Non-Mandated Service Breakdown Update
9. Red Flag Rule Policy
10. Update Related to County Health Insurance Quotes and Preparation for Labor Negotiations

Personnel

Committee Leader-Commissioners Bardwell and Roggenbuck

Primary Personnel Items

1. **Road Commission Elected Versus Appointed (See C) – Next Steps**
2. **County Planning Commission Staffing Alternative (See D)**
3. **Equalization Appraiser I Position**
4. **Harris Software Upgrade Purchase Agreement**

Secondary/On-Going Personnel Items

1. Open Meetings Act Discussion for Boards and Commissions – Corporate Council and County Prosecutor
2. Mosquito Abatement Committee – Policy Review
3. Road Commission Elected Verses Appointed
4. Farmland Preservation Committee
5. Job Descriptions
6. Incorporate County Personnel Policies and Other key Personnel Information on the County Web Site
7. Backup Computer Support for Sheriff Department
8. Electronic Time Recording System
9. Circuit/Family Court Personnel Policies
10. County Organizational Chart

Building and Grounds

Committee Leader-Commissioners Petzold and Kern

1. Niland Building Lease Close-Out

Primary Building and Grounds Items

Secondary/On-Going Building and Grounds Items

1. Human Services Building Remodeling Update
2. Follow-Up Work for NACO Energy Star Program
3. Draft Airport Zoning Update
4. Energy Efficiency Grants Timeline and Application Procedures – Next Steps
5. Review of FOC Potential Relocation to the Courthouse
6. Adult Probation

Correspondence/Other Business as Necessary

1. Resolutions from Other Counties
2. Health Department Community Profile (**See E**)
3. National Flood Insurance Program – December 16, 2009 Meeting
4. Economic Development
 - County EDC Strategic Planning and CAT Integration
 - Economic Gardening
 - East Central Michigan Council of Governments Coastal Zone Management Grant
 - Regional Tourism

Public Comment Period

Closed Session – If Necessary

Other Business as Necessary

Notes:

Except for the Statutory Finance Committee, committee meetings of the whole are advisory only. Any decision made at an advisory committee is only a recommendation and must be approved by a formal meeting of the Board of Commissioners.

If you need accommodations to attend this meeting please notify the Tuscola County Controller/Administrator's Office (989-672-3700) two days in advance of the meeting.

This is a draft agenda and subject to change. Items may be added the day of the meeting or covered under other business at the meeting.

Statutory Finance Committee

1. Claims Review and Approval



"ORGANIZED TO SERVE YOU"

December 3, 2009

County of Tuscola
Attention: Carrie Krampits
207 E. Grant Street
Caro, MI 48723

Re: Self Insured Workers Compensation renewal proposals

Dear Carrie,

We are pleased to offer the enclosed proposals for the Self Insured renewal. The proposal is a one year format. It was put together this way to make as easy a comparison as possible between the companies; however, the County has a 2 year program which I would recommend we continue. In doing so the numbers on the proposal would be doubled.

522 S. Main
P.O. Box 147
Frankenmuth, MI 48734
989-652-6104
800-572-0939
Fax 989-652-8919

4120 Davenport
Saginaw, MI 48603
989-793-2100
Fax 989-793-7722

141 S. Main
P.O. Box 1715
Vassar, MI 48768
989-823-2471
Fax 989-823-3998

1018 E. Caro Rd.
P.O. Box 152
Caro, MI 48723
989-673-4169
Fax 989-673-6818

I want to address the areas of Specific and Aggregate Retention, and the Excess Premium and Service Fees which are all highlighted on the proposal. On Page 1 (Excess Insurance) expiring program has a \$300,000 Specific Retention with a \$600,000 Aggregate Retention and premium of \$14,118. The Renewal Proposal (Option #1) has the same Specific Retention, but the Aggregate Retention has been lowered to \$300,000 (this reduces the potential claims costs to the County by \$300,000); the premium would be \$13,800. Option #2 increases the Specific Retention to \$350,000 which increases the County's risk potential, but it does reduce cost to \$12,500. Citizens quotation is similar to Option #1 with a little higher Aggregate and the same premium cost.

On page 2 the Service Fee on the expiring program is \$6,040. The Accident Funds renewal fee is \$8,000 which has increased because of the mandatory loss prevention day and the newly required reporting to Medicare.

Citizens Service Fee includes the Medicare reporting as well. It is higher because it includes 4 loss prevention days. If it were reduced to 1 day the fee would be \$7,193.

At the \$300,000 Specific retention the Accident Fund Excess and Service fee would cost the County \$21,800; Citizens would cost \$21,035 when reducing loss prevention to 1 day. In our opinion the \$765 cost savings Citizens is offering does not warrant a change to them because of their higher Aggregate Retention and the change to a new set of adjusters for your program. Our recommendation is that the County renew with the Accident Fund for a 2 year period.

Please contact me or Cheryl if you have any questions. We look forward to your decision and continuing our working relationship with the County.

Sincerely,

Thomas D. Zuellig
Encl.



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www.rummelinsurance.com

County of Tuscola
01/01/2010
Workers Compensation Renewal Proposal
12/03/09

Excess Insurance
One Year

	Expiring	Accident Fund		Citizens
		Option #1	Option #2	
Estimated Manual Premium	\$211,647	\$198,092	\$198,092	\$141,374
Specific Retention	\$300,000	\$300,000	\$350,000	\$300,000
Specific Limit	Statutory	Statutory	Statutory	Statutory
Employers Liability Limit	\$1,000,000	\$1,000,000	\$1,000,000	\$1,000,000
Aggregate Limit	\$5,000,000	\$5,000,000	\$5,000,000	\$5,000,000
Aggregate Retention	\$600,000	\$300,000	\$350,000	\$335,056
Minimum Aggregate Retention	\$540,000	\$270,000	\$270,000	\$318,303
Rate as a % of Manual Premium	6.6705%	6.9665%	6.3102%	9.791%
Excess Premium	\$14,118	\$13,800	\$12,500	\$13,842
Minimum Excess Premium	\$12,706	\$12,420	\$11,250	\$13,150

Service Fees as a % of Manual Premium

	Expiring	Accident Fund		Citizens
		Option #1	Option #2	
Rate	2.854%	4.039%	4.039%	7.21%
Fee	\$6,040	\$8,000	\$8,000	\$10,193
Minimum	\$5,436	\$7,200	\$7,200	\$9,683

Additional Hourly Fees

Loss Prevention Per Day	\$1,000	\$1,000	\$1,000	\$1,000
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Notes

Accident Fund Quotes

One mandatory loss prevention day is included
 Quote provides for CMS reporting
 PPOM and pharmacy charges will be 22% of medical savings below Michigan Fee Schedule
 Includes quarterly Medicare secondary reporting service
 Annual service fee provides claim handling through 12 months following the last policy expiration date
 Each policy renewal extends claims handling services for all policies in force

Citizens Quote

Four loss prevention days included
 No additional fee for 12 months beyond cancellation or non renewal
 State Medical Fee Schedule Review, Re-pricing and EOB's – no additional charge
 PPOM Fee is 23% of savings beyond state fee schedule reduction
 Access to on-staff nurse consultant on claim issues



Budget Adjustment Request Preliminary Year-End Compliance 2009

GENERAL FUND		DB		
REVENUES				
<i>Increase</i>				
	Court Costs		44,000	
	Searches Circuit Court		2,200	
	Tax Data Online Fees		22,000	
	Civil Fees District Court			
	Budget use of Fund Balance		25,422	
			\$ 93,622	
<i>Decrease</i>				
	Recording Fees	13,000		
	Use of Fund Balance	30,197		
	Transfer in Tax Foreclosure	25,003		
		\$ 68,200		
OVERALL INCREASE REVENUE BUDGET				\$ 25,422
EXPENDITURES				
		Increase	Decrease	
Brd of Comm	Travel	1,000		
	Advertising	300		
	Training	7,200		
	Health Ins.		3,000	
	Supplies		1,500	
	Total	8,500	4,500	4,000
Special Programs				
	Special Programs	1,000		1,000
Accounting Services				
	Base All Fund Audit	1,600		
	Other Financial		1,600	
Legal	General Legal	6,000		6,000
Courthouse Security				
	Salaries Perm		3,500	
	Salaries P/Temp	1,500		
	Salaries Overtime	4,300		
	Retirement		1,500	
	Total	5,800	5,000	800

Budget Adjustment Request Preliminary Year-End Compliance 2009

12/9/2009

			Increase	Decrease	
Jail					
	Salaries Perm			37,000	
	Health Ins Incentive		1,000		
	Salaries Pt/Temp			16,300	
	Salaries overtime		29,400		
	Health & Dental			30,000	
	Unemployment Insurance		4,700		
	Inmate Housing			30,000	
	Fingerprint Services		2,200		
	Health Services		76,000		
	Total		113,300	113,300	
Veterans Burial					
	Burial Expenses		3,500		3,500
Insurance & Bonds					
	Other Insurance & Bonds		10,056		10,056
Contingency					
			66		66
			OVERALL INCREASE OF EXPENDITURE BUDGET		
			TOTAL USE OF FUND BALANCE		25,422

**Mike Hoagland**

From: Eric Davis [Davis@micounties.org]
Sent: Wednesday, November 18, 2009 9:35 AM
To: MHoagland@TuscolaCounty.org
Subject: Road Commission Information
Attachments: Expansion of Road Commission - Legal Letter.pdf

Mike,

I have attached the guidance document I have regarding how a county alters the number of road commissioners it has. I think it is pretty straight forward, but please let me know if you have any questions on it. Also, I have the statutes that address how a county can move from an appointed to an elected road commission (and vice-versa), but I am waiting to hear back from our legal counsel as I have asked them to put together a similar guidance document on that procedure.

In the meantime, this is what the law states:

MCL 224.6 (2) If road commissioners are appointed, they shall hold office only until January 1 of the first odd numbered year following the date of the appointment. If the road commissioners are to be elected at a general or special election, notice of the election, embodying a copy of the resolutions of the county board of commissioners, giving the number and terms of the office of the road commissioners to be elected, shall be published by the clerk as required by section 3 of this chapter.

The aforementioned section 3 reads as follows:

MCL 224.3 Said clerk shall cause such notice, printed in the form of a handbill, to be posted in 3 or more public places in each township and ward of such county, at least 2 weeks before the time of such election, and also to be published in such newspaper or newspapers published and circulated in said county as the board of supervisors may direct, once in each week for at least 2 weeks before said election. Proof of the posting and publication of such notice may be made by affidavit of any person or persons knowing the facts and be filed in the office of said clerk and shall be recorded in the records of the proceedings of the board of supervisors. Such affidavit or the record thereof, or a certified copy of such affidavit or the record thereof, shall be prima facie evidence of the facts stated therein. Ballots shall be prepared and distributed by the same officers prescribed by law for general elections. The questions shall be stated on such ballots as follows, viz.: Shall the county road system be adopted by the county of? and immediately below and on different lines shall be printed the word "yes" and the word "no." At the time mentioned in such resolution such election shall be held and the vote taken accordingly.

Hopefully this helps... And as soon as I get the document from our attorney I will forward it on to you.

Eric Davis, Legislative Coordinator
Michigan Association of Counties
935 N. Washington Avenue
Lansing, MI 48906
P- (517) 372-5374
F- (517) 482-4599

11/18/2009

COHL, STOKER, TOSKEY & McGLINCHEY, P.C.

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January 26, 2007

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Timothy McGuire, Executive Director
Michigan Association of Counties
935 N. Washington Avenue
Lansing, Michigan 48906

Brad Comment, Legislative Coordinator
Michigan Association of Counties
935 N. Washington Avenue
Lansing, Michigan 48906

Re: New Law on Composition of County Board of Road Commissioners

Dear Mr. McGuire & Mr. Comment:

This letter is to advise you of a recent amendment to the County Road Law, MCL 224.1 *et seq.*, which authorizes a County Board of Commissioners to increase the number of board members on the County Road Commission.

Expansion of Board of County Road Commissioners

For decades, the number of board members on a County Road Commission was statutorily limited to three members. Under Public Act 598 of 2006, effective January 3, 2007, a board of county road commissioners shall consist of not less than three members, nor more than five members. MCL 224.6(1). This provision applies regardless of whether the board members are appointed or elected.

This means that a County Board of Commissioners is now authorized to expand the number of board members on the Road Commission to four or five members. Conversely, if the board is expanded, the County Board may subsequently reduce the number of board members on the Road Commission to three or four members.

It has been argued that an expanded board could provide better representation for residents living in different areas of a county. A larger Road Commission board could provide a greater opportunity for residents to have their interests represented on the board.

On the other hand, an expanded board would increase the overall costs of the Road Commission, including the compensation and benefits payable to the additional board members.

Staggered Terms

The statutory amendment further provides that a County Board of Commissioners may by resolution provide for staggered terms of office for the Road Commission board members, so that no more than two board members' terms of office expire in the same year. MCL 224.6(1).

The regular term of office for a Road Commission board member is six years. MCL 224.7. Therefore, an expansion of the number of appointed Road Commission board members could include provision that the fourth member would be initially appointed for four years, and the fifth member for two years. Thereafter, all board members would be appointed for a full six year term. This would result in no more than two board members' terms of office expiring in the same year.

Similarly, for an expansion of an elected Road Commission, the new board members would initially be appointed by the County Board of Commissioners, but their terms would expire in January of the first odd-numbered year following their appointment. MCL 224.6(2). This means that they must stand for election in the November election, unless the County Board calls for a special election. In order to retain staggered terms, the initial elective terms could be limited to two years and four years, respectively, and then continued as six-year terms.

Procedure

If a County Board of Commissioners proposes to alter the number of Road Commission board members, the County Board must hold at least one public hearing on the proposed change. MCL 224.(6).

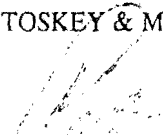
Notice of the time and place of the public hearing must be given as required under the Open Meetings Act not less than 28 days before the hearing. Written notice of the hearing must also be given to the County Road Commission, and posted on the County's website. *Id.*

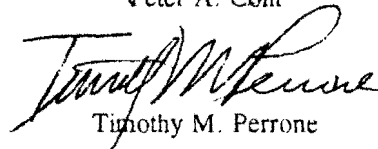
The County Board of Commissioners may vote on whether to alter the number of board members on the County Road Commission at the same meeting in which the public hearing is held. *Id.*

If you have any questions regarding this recent statutory amendment, or if you need legal assistance in preparing a Resolution and notices, please contact us.

Very truly yours,

COHL, STOKER, TOSKEY & McGLINCHEY, P.C.


Peter A. Cohl


Timothy M. Perrone

PAC/TMP/nas

CHANGING COUNTY ROAD COMMISSION FROM APPOINTED BODY TO ELECTED BODY, AND VICE VERSA

A County Board of Commissioners may change its Road Commission from an appointed body to an elected body, and vice versa. These changes may each be accomplished by a resolution passed by a majority vote of the County Board of Commissioners. MCL 224.6(1), (4); *Ebright v Buck*, 326 Mich 208; 40 NW2d 122 (1949); OAG 1952-54, No. 1976, p 405 (September 14, 1954) .

Change from Appointed Body to Elected Body

The resolution changing the method of selection from appointment to election has no effect on those persons currently holding appointive office as road commissioners. That is, if a County Board of Commissioners changes the method of selection of county road commissioners from appointment to election as authorized by MCL 224.6(1), the appointed road commissioners continue to serve for the balance of their unexpired terms. OAG 1985-1986, No. 6322, p 170 (November 15, 1985). The term of office continues until a successor is elected. MCL 168.264.

Pursuant to MCL 224.7, the successor to each commissioner shall be elected at the general election preceding the expiration of his or her term. The three road commissioners may hold office for staggered terms of six (6) years, from the first day of January, so that only one (1) commissioner is elected biennially in every even numbered year for the full term of six (6) years. MCL 168.261. There may be more than one commissioner elected biennially if the road commission was expanded to four or five members as permitted by MCL 224.6(6).

A resolution of the County Board of Commissioners providing for the election of county road commissioners must be adopted sufficiently in advance of the date of holding of the primary election held for the nomination of candidates for the general election. This is needed to permit prospective candidates to comply with time limitations for the filing of nomination petitions. OAG 1952-54, No. 1580, p 38 (Sept. 12, 1952).

The actual election requirements for county road commissioners are set forth in MCL 168.251 *et seq.*, with regard to eligibility, nominating petitions, filing fees, nominations at the August primary election, and disqualification of a candidate.

Change from Elected Body to Appointed Body

The resolution changing the method of selection from election to appointment lawfully abolishes elections as a method of filling the office of road commissioner. *Ebright, supra*. However, it has no effect on those persons currently holding elected office as road commissioners, who continue to serve for the balance of their unexpired terms, until their successors are appointed and qualified.



Planning Commission Summary

Each Month:

- Receive correspondence, date it, figure out which commission members should receive it, most correspondence is scanned and sent to the whole commission or emailed to the appropriate committee. (1 hr./mo)
 - Take phone calls for the Planning Commission and forward as necessary, receive phone calls from Planning Commission members (1hr./mo)
 - Prepare monthly agenda, put the agenda in order and gather attachments, email to the Commission members for suggestions, changes (1hr./mo)
 - Attend monthly Planning Commission meetings, take minutes (2-3.5hrs./mo)
 - Prepare meeting minutes(1hr./mo)
 - Prepare monthly outgoing correspondence as a result of the meeting.
- Examples: P.A.116 response letters, letters of receipt for zoning ordinances and master plans, support letters for local RCAP, etc. (1hr./mo)
- Filing (minimal)

Other:

- Put together meeting schedule and post meetings
- Larger mailings to townships, villages, cities and contiguous jurisdictions for workshops, master planning seminar, airport zoning ordinance information, communications regarding master plans and zoning ordinances.
- General Development Plan Update
- ECMP&DR

(times vary greatly depending on the scope of the project)

⑤



Tuscola County Health Department Community Health Profile Questionnaire



1. Are you aware that Tuscola County has a Community Health Profile based on the 2010 Healthy People Objectives?

- Yes
- No

2. Please mark all that apply.

- I now know what the Community Health Profile is
- I now know how to access the Community Health Profile
- I still do not know how to access the Community Health Profile

3. Did you review the Community Health Profile that was attached to this survey?

- Yes
- No

4. If yes, please mark all that apply.

- I may find it beneficial for grant writing
- I may use it for writing annual plans
- I may use it for organizational planning
- I may use it for committee work
- I may use it for self interest

I may use it for the other reasons listed below:

5. Was the document easy to read?

- Yes
- No

6. Was the document easy to follow?

- Yes
- No

7. Was the document well organized?

- Yes
- No

Other ways to make the document more user friendly.





Tuscola County Health Department Community Health Profile Questionnaire



8. How would you like to access the Community Health Profile in the future?

- Website (www.tchd.us) CD Rom Hard Copy

Other ways you would like to access the Community Health Profile in the future:

9. What additional information would you like to see added to the Community Health Profile?

10. Would you be interested in working on the next community health needs assessment due in 2011?

- Yes No

Contact Information:



Community Health Profile

**Healthy People 2010 Objectives:
Health Priorities for the Year 2010
for
TUSCOLA COUNTY**

Originally Presented by the
COMMUNITY HEALTH ASSESSMENT & IMPROVEMENT (CHAI) WORKGROUP
September 1999
Updated 2009 and Maintained by
TUSCOLA COUNTY HEALTH DEPARTMENT

Community Health Profile

Introduction

The Community Health Profile focuses on five priority areas that were set back in 1999 using a multi-purpose collaborative body. Each of these priorities is driven by Healthy People 2010 objectives.

1. Healthy Children and Youth
2. Access to Care
3. Healthy Adults
4. Safe Communities
5. Healthy Environment

Healthy People 2010 is a comprehensive set of disease prevention and health promotion objectives for the Nation to achieve. They have been created by scientists both inside and outside of government and they identify a wide range of public health priorities that are specific and measurable.

This document has recently been updated with new data and resources that reflect our community's progress towards reaching those objectives. The * indicate a few of the Great Starts' health objectives for the children ages 0-5. These are important indicators in regards to the health of our children.

These objectives are an opportunity for individuals to make healthy lifestyle choices for themselves and their families. It also challenges communities to put prevention practices into play, by building healthier communities. It also places demands on all of us to work together to ensure that our communities are safe and healthy environments where people enjoy living.

This plan serves as a focal point for unified action within our community for addressing these issues. The goals and objectives can be used to strengthen our community plans, in grant writing, and for bringing increased resources into the area. We encourage health organizations, projects and efforts, to integrate the community-wide goals and objectives into annual work plans and budgetary decisions.

Once the Healthy People 2020 objectives are released we will work with our community partners to reevaluate the current plan and address any new issues or priorities that may influence the health of our residents.

If you are interested in being part of this planning process, please feel free to contact the Tuscola County Health Department at 989-673-8114, Ext. 117 for more information.

HEALTHY CHILDREN AND YOUTH

Goal 1: Improve Perinatal Health

* Objective A: Reduce Infant Mortality

Baseline: Rate of infant deaths per 1,000 live births

Year	Tuscola	Michigan
1995-97	11.0	8.1
2000-02	9.2	8.1
2004-06	8.3	7.6
Data Source: Michigan Department of Community Health (MDCH) 2009, Kids Count Data Book '99		

* Objective B: Reduce Low Birth Weight

Baseline: Percent of infants born with low birth weight (less than 2,500 grams)

Year	Tuscola	Michigan
1995-97	6.8%	7.7%
2000-02	5.9%	8%
2004-06	6.8%	8.4%
Data Source: Data Book 3/09, MDCH 2009, Kids Count Data Book '99		

Objective C: Reduce Smoking During Pregnancy

Baseline: Percent of women who smoked during pregnancy

Year	Tuscola	Michigan
1995-97	25.5%	21.3%
2001	24.2%	15.5%
2006	23.3%	13.8%
Data Source: Data Book 3/09, MDCH 2009		

* Indicates a Great Start benchmark defined by Early Childhood Investment Corporation

Goal 2: Increase Immunization Levels

Objective A: Increase number of children receiving immunizations

Baseline: Percent of children 19 – 35 months of age who are fully immunized

Year	Tuscola	Michigan
1998	90%	79%
2001	66%	32%
2007	73%	72%

Data Source: Data Book 3/09, MDCH 2009, Kids Count 2009, Strong Families/Safe Children quarterly report 10/96-9/98, Kids Count Data Book '99
NOTE: 1998 numbers exclude exempted children

Goal 3: Reduce Child Abuse and Neglect

Objective A: Reduce number of victims of substantiated child abuse and neglect

Baseline: Confirmed cases of child abuse or neglect ages 0 - 17 per 1,000 children

Year	Tuscola	Michigan
1997	5.6	8.2
2003	7.4	10.5
2007	7.1	11.9

Data Source: Kids Count 2009, Kids Count Data Book '99

Goal 4: Reduce Child and Adolescent Deaths

Objective A: Reduce child and adolescent deaths

Baseline: Total teen deaths ages 1 - 19

Year	Tuscola	Michigan
1999	8	970
2003	8	858
2006	5	815

Data Source: Kids Count 2009

Goal 5: Reduce the Use of Alcohol and Tobacco by Adolescents

Objective A: Reduce the use of alcohol

Baseline: Percent of student lifetime use of alcohol

Year	Tuscola	Thumb
1998	*	48%
2002	47%	54%
2008	54%	54%

Data Source: Data Book 3/09, Michigan Profile for Healthy Youth (MiPHY) 2009, Adolescent Health Survey 7th – 12th graders, 1997 Michigan Youth Risk Behavior Survey

*Data not available

Baseline: Percent of students who have consumed alcohol in the 30 days prior to survey

Year	Tuscola	Thumb
1998	*	48%
2002	34%	37%
2008	27%	29%

Data Source: Data Book 3/09, MiPHY 2009, Adolescent Health Survey 7th – 12th graders, 1997 Michigan Youth Risk Behavior Survey

*Data not available

Objective B: Reduce the use of tobacco

Baseline: Percent of students who have smoked a whole cigarette in their lifetime

Year	Tuscola	Thumb
2008	26%	27%

Data Source: Data Book 3/09, MiPHY 2009

*MiPHY data only available in 2008. Michigan data not available

Baseline: Percent of students who smoked a whole cigarette in the past 30 days

Year	Tuscola	Thumb
2008	14%	15%

Data Source: Data Book 3/09, MiPHY 2009

*MiPHY data only available in 2008. Michigan data not available

ACCESS TO CARE

Goal 6: Increase Access to Information about Resources Available in the Community

Objective A: Increase agency awareness

Baseline: Summary of agencies/programs on www.thumbresources.org

	1999	Tuscola
Agencies		4
Programs		29
	2009	Tuscola
Agencies		108
Programs		127
Data Source: www.thumbresources.org 2009		

Goal 7: Decrease Economic Barriers to Health Care

Objective A: Reduce the number of people living below the poverty line

Baseline: Percent of people living in poverty

Year	Tuscola	Michigan
1999	8.8%	9.9%
2002	10.2%	10.9%
2005	11.4%	13.1%
Data Source: Kids Count 2009		

Objective B: Reduce the number of children living in poverty

Baseline: Percent of children (0 – 17 years of age) living in poverty

Year	Tuscola	Michigan
1999	13.2%	14.2%
2002	14.1%	14.2%
2005	17.5%	18.3%
Data Source: Kids Count 2009		

- * **Objective C: Increase number of people with health insurance**
Baseline: Total percent of population uninsured

Year	Tuscola	Michigan
1992	13.8%	9.7%
2002	11.5%	11.3%
Data Source: Michigan Primary Care Association (MPCA) 2009		

Goal 8: Increase Access to Primary Care Services

- Objective A: Decrease preventable hospitalizations**
Baseline: Percent of ambulatory care sensitive conditions

Year	Tuscola	Michigan
2005	20.9%	20.1%
2006	20.7%	19.8%
Data Source: MDCH 2009		

- * **Objective B: Increase number of primary care physicians**
Baseline: Number of primary care physicians per 100,000

Year	Tuscola	Michigan
1994-96	31.6	73.2
2004	46.3	135.58
Data Source: Data Book 3/09, MPCA 2009, Health Resources Database-MDCH, Graduate Medical Education and National Advisory Committee (GMENAC)		

- * **Objective C: Increase adequate prenatal care**
Baseline: Percent of births with less than adequate care

Year	Tuscola	Michigan
1997	17.8%	24%
2001	19.2%	24%
2006	16.7%	21.9%
Data Source: Kids Count 2009		

- * Indicates a Great Start benchmark defined by Early Childhood Investment Corporation

Objective D: Increase access to dental care

Baseline: Number of dentists per 100,000

Year	Tuscola	Michigan
1994-96	31.6	66.2
2006	34.3	55.9

Data Source: Data Book 3/09, MPCA 2009, Health Resources Database-MDCH

HEALTHY ADULTS

Goal 9: Improve Mental Health of Adults

Objective A: Reduce deaths from suicides

Baseline: Number of suicide deaths per 100,000

Year	Tuscola	Michigan
1995-99	13.6	10.3
1999-2003	13.6	10.2
2003-07	16.2	10.7
Data Source: MDCH 2009		

Goal 10: Reduce Preventable Chronic Disease Deaths

Objective A: Decrease deaths from heart disease

Baseline: Number of heart disease deaths per 100,000

Year	Tuscola	Michigan
1995-97	307.1	306.7
2000-02	272.2	273.8
2005-07	253.9	226.7
Data Source: Data Book 3/09, MDCH 2009		

Objective B: Decrease deaths from cancer

Baseline: Number of cancer deaths per 100,000

Year	Tuscola	Michigan
1995-97	224.5	209.9
2000-02	210.6	199.5
2005-07	195.3	189.4
Data Source: Data Book 3/09, MDCH 2009		

Objective C: Decrease deaths from diabetes

Baseline: Number of diabetes-related deaths per 100,000

Year	Tuscola	Michigan
1995-97	78.2	80.1
2000-02	97.8	81.3
2005-07	90.4	81.5

Data Source: Data Book 3/09, MDCH 2009

Objective D: Decrease deaths from stroke

Baseline: Number of stroke deaths per 100,000

Year	Tuscola	Michigan
1995-97	54.1	64.4
2000-02	59.6	58.5
2005-07	34.8	44.6

Data Source: Data Book 3/09, MDCH 2009

Goal 11: Reduce the Transmission of HIV

Objective A: Reduce the number of new HIV cases

Baseline: Number of HIV (not AIDS) cases

Year	Tuscola	Michigan
1999	6	4,553
2008	5	2,246

Data Source: Data Book 3/09, MDCH 2009

Objective B: Reduce the number of new AIDS cases

Baseline: Number of AIDS cases

Year	Tuscola	Michigan
1999	5	4,219
2008	7	2,545

Data Source: Data Book 3/09, MDCH 2009

Goal 12: Reduce Abuse Patterns of Alcohol and Cigarette Use Among Adults

Objective A: Reduce alcohol abuse

Baseline: Number of driving under the influence incidents

Year	Tuscola	Michigan
1998	335	54,370
2002	329	53,029
2006	253	49,546
Data Source: Data Book 3/09, Uniform Crime Report 2009		

Objective B: Increase treatment admissions for substance abuse

Baseline: Number of admissions to a substance abuse facility

Year	Tuscola	Michigan
1996-98	739	*
2007	578	69,944
Data Source: MDCH-Office of Drug Control Policy 2009, Thumb Region Coordinating Agency's Admission Record, St. Clair County Health Department *Data not available		

Objective C: Reduce cigarette use

Baseline: Estimate percent of current smokers

Year	Tuscola	Michigan
1998-2000	30.3%	25.3%
2000-04	25.9%	24.6%
2005-07	18.1%	21.7%
Data Source: MDCH-Behavioral Risk Factor Survey (BRFS) 2009		

SAFE COMMUNITIES

Goal 13: Decrease Motor Vehicle Crash Deaths

Objective A: Reduce deaths from motor vehicles

Baseline: Number of fatal crashes per 100,000 crashes

Year	Tuscola	Michigan
1999	628	*
2002	900	323
2007	255	304

Data Source: www.michigantrafficcrashfacts.org 2009
*Data not available

Goal 14: Reduce the Occurrence of Domestic Violence

Objective A: Reduce the number of assaults attributed to domestic violence

Baseline: Percent of domestic violence assaults in relation to total number of assaults

Year	Tuscola	Michigan
2000	48%	28%
2003	35.4%	30.9%
2006	72.3%	61.4%

Data Source: Uniform Crime Reports 2009

HEALTHY ENVIRONMENT

Goal 15: Reduce Asthma Morbidity

Objective A: Reduce hospital visits due to asthma

Baseline: Preventable asthma hospitalization rates per 10,000

Year	Tuscola	Michigan
1999-2003	13.1	15.4
2002-06	13	16
Data Source: Data Book 3/09, MDCH 2009		

Goal 16: Reduce Childhood Lead Poisoning

Objective A: Increase number of child screenings for lead

Baseline: Percent of children tested for lead under six years old

Year	Tuscola	Michigan
2002	6%	11%
2008	23.3%	20.1%
Data Source: MDCH 2009, Census 2000		

Objective B: Decrease children with elevated lead levels

Baseline: Percent of children under six years old with elevated lead levels

Year	Tuscola	Michigan
2002	0%	4.3%
2008	0%	< 1%
Data Source: MDCH 2009, Census 2000 NOTE: Elevated levels are those with EBLL levels greater than or equal to 10ug/dL		

Objective C: Reduce number of houses built before 1950

Baseline: Percent of houses built before 1950

Year	Tuscola	Michigan
1998	36%	33%
2002	33%	27%
2008	23.3%	27%
Data Source: MDCH 2009, Census 2000		

Data Resources

Annie E. Casey Foundation (Kids Count):

<http://datacenter.kidscount.org/data/bystate/Default.aspx?state=MI>

Michigan Department of Community Health (MDCH):

<http://www.mdch.state.mi.us/pha/osr/chi/index.asp>

MDCH-Michigan Behavioral Risk Factor Survey:

http://www.michigan.gov/mdch/0,1607,7-132-2945_5104_5279_39424---,00.html

MDCH-Office of Drug Control Policy:

http://www.michigan.gov/documents/mdch/fy07_primary_substance_by_county_238087_7.pdf

Michigan Primary Care Association (MPCA):

<http://www.mPCA.net>

Michigan Profile for Healthy Youth (MiPHY):

http://www.michigan.gov/mde/0,1607,7-140-28753_38684_29233_44681---,00.html

Michigan Traffic Crash Facts:

<http://www.michigantrafficcrashfacts.org/>

Thumb Resources:

<http://www.thumbresources.org>

Uniform Crime Reports:

http://www.michigan.gov/msp/0,1607,7-123-1645_3501_4621---,00.html

Acronyms

MDCH	Michigan Department of Community Health
MiPHY	Michigan Profile for Healthy Youth
MPCA	Michigan Primary Care Association
GMENAC	Graduate Medical Education and National Advisory Committee
BRFS	Behavioral Risk Factor Survey
Thumb	Huron, Sanilac, and Tuscola Counties