



Barry-Eaton District Health Department

Barry-Eaton District Board of Health
January 16, 2026
330 W. Woodlawn Avenue, Hastings, MI 49058
1:00 p.m.

AGENDA

1. Roll Call
2. **Motion to Approve the Agenda (ACTION)**
3. **Annual By-Law Review and Rules of Conduct (ACTION)**
4. **Approve the Annual Meeting Schedule (ACTION)**
5. **Approve December 19, 2025 Board Meeting Minutes (ACTION)**
6. Limited Public Comment (3 minutes per person)
7. Finance Report
 - a. Review of the Monthly Financial Statement
 - b. **Approve Payables in the Amount of \$432,656.03 (ACTION)**
 - c. **First Quarter Amendment Review (ACTION)**
8. Standing Reports (as needed)
 - a. Environmental Health Division
 - i. Staffing Update
 - b. Personal and Community Health Division
 - i. Changes in Childhood Vaccine Schedule
 - ii. Vaccines for Children Program Update
9. Health Officer Report
 - a. WIC Audit Results
10. Other Business (as needed)
11. Adjournment

NEXT MEETING: March 20, 2026 in CHARLOTTE, MI

Should any person attending this meeting require accommodation, please notify the office three business days prior to the meeting at 517-604-1921



Barry-Eaton District Health Department

Barry County: 330 W. Woodlawn Ave., Hastings MI 49058
Phone: 269-945-9516 Fax: 517-543-7737

Eaton County: 1033 Health Care Dr., Charlotte, MI 48813
Phone: 517-543-2430 Fax: 517-543-7737

Barry-Eaton District Health Department

BOARD OF HEALTH

BY - LAWS

ARTICLE 1. NAME

The Boards of commissioners of the Counties of Barry and Eaton, under Act 306, P.A., 1927. Section 327.07, superseded by Act 368 P.A., 1978, Section 2415 have established a District Health Department, which is hereinafter called the Barry Eaton District Health Department.

ARTICLE 11. OBJECTIVES

The primary purpose of this organization is to act as the governing body for the Barry Eaton District Health Department and all programs under its control. Responsibilities include the appointment of the Health Officer and the development of necessary contracts, policies, rules, and staffing to serve the counties of Barry and Eaton in order to strengthen local control and endorsement of health regulations, and to improve the quality of health for the people residing in this health jurisdiction.

ARTICLE 111. MEMBERS

The governing body of the Health District shall be the Board of Health composed of representatives from the respective counties' Boards of Commissioners in accordance with Act 368, P.A., 1978, Part 24, Section 2415.

ARTICLE IV. OFFICERS

Elections for Chair and Vice-Chair shall be held every 4 years, at the first meeting in January, with the new Chair being elected from the alternate county from that of the current Chair.

ARTICLE V. MEETINGS

SECTION 1. Appointments of Committees for the year will be held at the first meeting in January of an odd year.

SECTION 2. The Board of Health will meet on the third Friday of each month at 1:00 p.m. unless otherwise determined by the Board. In the event that certain claims must be negotiated prior to a meeting, claims will be allowed by the Health Officer and one member of the Board who shall report the action to the Board at its next regular meeting. Act 368, P.A. 1978, Part 24, Section 2417.

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SECTION 3. Individuals wishing to be placed on the Board of Health Agenda should submit in writing at least ten (10) days before the meeting, a statement that includes subject matter, estimated time needed, individual(s) appearing and how they can be reached.

SECTION 4. Special meetings of the full board or committees may be held at any time upon the call of the Chair in accordance with the open meetings act.

SECTION 5. Meetings will be conducted under Robert's Rules of Order.

SECTION 7. The Board will abide by the open Meetings Act.

ARTICLE VI. QUORUM

A majority of the members of the Board shall constitute a quorum for the transaction of business.

ARTICLE VII. COMMITTEES

Members shall be appointed bi-annually to each of the following committees by the Board Chair. Appointments outside of the bi-annual schedule may be made if necessary to fill a vacancy.

- Finance & Personnel
- Program and Policy

ARTICLE VIII. ANNUAL REVIEW

These by-laws shall be reviewed annually.

ARTICLE IX. AMENDMENTS

These by-laws may be amended at any regular meeting by a majority vote. Any amendment thereto shall become effective immediately upon its adoption.

Annual review &/or amendments of these by-laws was completed by the current Board of Health on:

Board Chair

1/16/2026
Date

Adopted: 1/16/2026

**BARRY EATON DISTRICT HEALTH DEPARTMENT BOARD
RULES OF GENERAL CONDUCT AND PROCEDURE FOR MEETINGS**

- A. **Public Meetings:** Board meetings shall be open to the public, as required by the Open Meetings Act, 1976 PA 267.
- B. **General Conduct:** A Board Member shall not use profane, intemperate, or discourteous language or conduct.
- C. **Speaking Priorities:** The sponsor of any properly moved and seconded motion, resolution, or report shall have the right to speak for up to five minutes after the formal introduction, but prior to any discussion of the matter on the floor. In any case, where there may be more than one sponsor to a particular motion, resolution, or report, it shall be in the discretion of the chairperson which person shall exercise the right given by this Rule to first speak on the pending matter. Each Board Member shall be limited to speak for a 5-minute time limit per recognition by the chairperson. Before speaking, each member shall address himself/herself to the chairperson. If two or more members desire to speak at the same time, the chairperson shall designate the order in which they shall speak. No member, while addressing the Board shall be interrupted, except to be called to order, and thereupon, he/she shall immediately cease talking.
- D. **Leaving Seat, Interruptions:** While the chairperson is putting any question or while the roll is being called, no Board Member shall leave his/her seat or entertain private discourse. When a Board Member is speaking, he/she shall not be unduly interrupted.
1. While a Board Meeting is in session, all cell phones must be silenced.
 2. Board Members shall refrain from being involved in personal discussions or “sidebars” while a Board Meeting is in session.
- E. **Leaving the Meeting:** No Board Member shall leave a meeting prior to adjournment unless first excused by the chairperson. It should be noted in the meeting the time and point in the proceedings at which a member enters and leaves the meeting while the Board is in session.
- F. **Order and Decorum:** The chairperson shall at all times preserve order and decorum pursuant to these Rules. The chairperson will call to order any person who is being disorderly by disrupting the meeting, by speaking longer than the allotted time, by using vulgar language, or by making a personal attack on a Board Member or staff member regarding conduct unrelated to the performance of their duties. If a person engaged in presentation is called out of order, they will not be permitted to speak further at the same meeting except by special leave of the Board. If the individual continues to be disorderly and disruptive to the meeting, the chairperson may request their removal by the appropriate law enforcement agency. In no event will an individual be removed from a public meeting except for an actual breach of the peace committed at the meeting.

- G. **Board Member Attendance:** Board Members are expected to attend meetings as scheduled and be punctual. If a member is unable to attend a meeting, he/she shall notify the Chairperson of the Board in advance of the meeting. Every Board Member shall vote on all questions unless excused by the Board.
- H. **General Conduct:** No Board Member nor other person shall speak until duly recognized by the Chairperson; if a Board Member or other person speaks without being recognized by the Chairperson, he/she shall immediately cease speaking if ruled out of order.
- I. **Parliamentary Authority and Procedure:** "Robert's Rules of Order", 10th Edition, shall govern all questions of procedure which are not otherwise provided by law.

No motion shall be debated or voted upon unless seconded. Any motion, resolution or committee report, with the permission of the person who moved and seconded it, may be withdrawn at any time before it has been adopted. At the request of any member of the Board, a motion shall be presented in writing.

- J. **Comments from the Floor:** Only Board Members shall be given the floor to speak during any Board meeting, except:
1. Any member of the public may speak during the public comment period designated on the meeting agenda. Speakers other than Board Members, after being recognized by the Chair, shall identify themselves by name and municipality of residence.
 2. BEDHD officials and/or personnel may speak with the consent of the chairperson.
 3. Any person, with the consent of the chairperson and/or a majority of the Board.
 4. To accommodate greater public participation, public comment shall be limited to no more than three minutes per individual and at the times designated as stated above. Extended time may be granted by the chairperson in exceptional circumstances.
 5. Public comment shall be limited to the foregoing circumstances where a speaker is recognized by the Chair; outbursts, clapping, and/or other disruptions are not permitted and will be considered out of order by the Chair.
- K. **Amendment to and Effective Date of These Rules:** These Rules shall take immediate effect upon adoption by a majority vote of the Board. These Rules may be amended, suspended or rescinded only by a majority vote of the Board. They shall remain in effect until rescinded, amended or suspended. Any amendment to these Rules properly presented to the Board and adopted, shall take immediate effect unless otherwise stated by the Board at the time of adoption.
- L. **Conclusion.** To the extent that any of the rules herein are contrary to statutory requirements, they shall be of no force and effect.



PROPOSED

BARRY-EATON DISTRICT BOARD OF HEALTH

2026 - SCHEDULE OF MEETINGS

The Barry-Eaton District Board of Health regular meetings
will be held according to the following schedule:

January 12, 2026 – 1:00 p.m.
330 W. Woodlawn Ave., Hastings

July 17, 2026 - 1:00 p.m.
1033 Health Care Dr, Charlotte

March 20, 2026 - 1:00 p.m.
1033 Health Care Dr, Charlotte

September 18, 2026 - 1:00 p.m.
330 W. Woodlawn Ave., Hastings

May 15, 2026 - 1:00 p.m.
330 W Woodlawn Ave, Hastings, MI

November 20, 2026 - 1:00 p.m.
1033 Health Care Dr, Charlotte

**FINANCE & PERSONNEL COMMITTEE
2026 - SCHEDULE OF MEETINGS**

The Finance Committee of the Barry-Eaton District Board of Health will be held at the request of the Board of Health Chair following proper posting notifications.

**PROGRAM & POLICY COMMITTEE
2026 - SCHEDULE OF MEETINGS**

The Program Committee of the Barry-Eaton District Board of Health meetings will be held at the request of the Board of Health Chair following proper posting notifications.



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Minutes of the Barry-Eaton District Board of Health
December 12, 2025
1033 Health Care Dr., Charlotte, MI 48813
1:00 p.m.

1. Call to Order	The meeting was called to order by Chair Getty at 1:00 PM
2. Attendance Roll Call	<p>Board Members Present: Commissioner Catherine Getty, Commissioner Keith Barber (Arrived at 1:18 PM), Commissioner Bruce Campbell, Commissioner Jim Mott, and Commissioner Bob Teunessen.</p> <p>Staff Present: Rebekah Condon (Health Officer), Milea Burgstahler (PPE/EH Director), and Kali Nichols (PCH Director).</p>
3. Motion to Approve the Agenda	Motion by Commissioner Teunessen, Supported by Commissioner Mott to approve the agenda as provided. All ayes, motion carried.
4. Approve the November 21, 2025, Board Meeting Minutes (ACTION)	Motion by Commissioner Mott, Supported by Commissioner Teunessen to approve November 21, 2025, meeting minutes as provided. All ayes, motion carried.
5. Limited Public Comment	None
6. Finance Report	<p>a. Review of the Monthly Financial Statement Sarah Jennings, Maner Costerisan, gave a financial update.</p> <p>b. Approve Payables in the Amount of \$294,094.77 (ACTION) Motion by Commissioner Campbell, Supported by Commissioner Teunessen to approve the payables. Roll Call Vote: Commissioner Catherine Getty: Aye Commissioner Bruce Campbell: Aye Commissioner Jim Mott: Aye Commissioner Bob Teunessen: Aye</p>
7. Standing Reports	<p>a. Environmental Health</p> <p>i. Jodi Pessell, Environmental Health Supervisor, presented on Radon Action Month, which will take place in January. Jodi explained that raising awareness about radon is important because it is a silent, odorless radioactive gas and the second leading cause of lung cancer. She noted that radon gas can seep into buildings through foundation cracks and other openings. Jodi explained that radon testing is simple and that home test kits are available at both health department locations, as well as at Delta Township Hall and the Delton Library. The only way to know if a home has elevated radon</p>



	<p>levels is to test. It is recommended that homes be tested every two years because homes settle over time and new foundation cracks can form.</p> <p>b. Planning, Promotion, and Evaluation</p> <p>i. Kaylynne Luzbetak, Community Health Promotion Specialist, provided an update on the Tobacco Program. She shared statistics on teen nicotine use in Barry and Eaton counties based on results from the 2023–2024 Michigan Profile for Healthy Youth survey of 9th and 11th grade students. The data showed that the average age of first tobacco use was approximately 12.5 years old. Barry and Eaton County data indicated that 86.6% and 84.5% of high school students reported never trying cigarette smoking; 98.1% and 99.1% reported no use of chewing tobacco, snuff, dip, snus, or dissolvable tobacco in the past 30 days; and 89.6% and 88.1% reported not vaping in the past 30 days. Kaylynne explained that most students are obtaining these products from friends, family, or online, as the majority of surveyed students reported not purchasing products from stores or gas stations. She also described alternatives to suspension, including a tiered approach focused on education and evidence-based programs that help keep students in school.</p> <p>ii. Aurelia Pena, Epidemiologist, presented to the BOH on the current state of communicable diseases in the counties. She shared resident data on respiratory illnesses such as COVID-19, pneumonia, and RSV, all of which were currently at or below expected seasonal levels. Aurelia noted that higher illness rates are anticipated following the holiday season as people return to school and work settings. She also presented data on seasonal patterns of hand, foot, and mouth disease during outbreak years, as well as Lyme disease trends, which peaked in July and have shown longer seasonality compared to 2024. Additionally, Aurelia provided data on deaths by suicide in Barry and Eaton counties, showing a decrease in Eaton County and a doubling in Barry County at this time. She further discussed statistics related to cold- and heat-related illnesses, vaccine-preventable diseases such as pertussis, elevated rates of campylobacter during the past summer, and the first reported human infection of H5N5 avian influenza in Washington State.</p>
8. Health Officer Report	<p>a. Rebekah informed BOH members of the signed Barry County contract agreement to subsidize a 30% fee increase in Environmental Health, with implementation scheduled to begin January 1, 2026.</p>



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9. Other Business	None
10. Adjournment	Chairperson Getty adjourned the meeting at 1:43 PM.

Catherine Getty, Chair _____ Rebekah Condon, Health Officer _____

NEXT MEETING: January 16, 2026 in HASTINGS, MI

Should any person attending this meeting require accommodations, please notify the office three business days prior to the meeting at 517-541-2694.

Barry Eaton District Health Department
Detail Revenue and Expenditure Statement
Fiscal YTD as of December 31, 2025

	Actual YTD	YTD Budget	Fiscal Yr. Budget	% Used	Balance	Prior Year To Date 12/31/2024
	FY2026 50% Reduction	FY2026 50% Reduction				Actual
Revenue						
Comprehensive Supplemental	0	6,828	35,341	0 %	35,341	0
Comprehensive Agreement Contracts	313,333	369,673	1,488,973	21 %	1,175,640	657,354
ELPHS Contracts	182,632	255,494	1,021,975	18 %	839,343	219,059
ELPHS-Local Community Stabilization Authority (LCSA)	190,784	190,784	190,784	100 %	0	190,784
MDEQ ELPHS Sewage/Water Contract	77,388	101,082	404,328	19 %	326,940	116,082
Contracts Non-Comprehensive Agreement	176,315	291,150	1,232,351	14 %	1,056,036	26,327
Federal Funded Vaccine Revenue	0	0	380,823	0 %	380,823	0
MCDC Dental Clinic Outreach/Rent	17,579	17,580	70,320	25 %	52,741	17,580
Barry County Solid Waste Oversite	0	0	2,400	0 %	2,400	130
Barry Appropriations	129,157	80,726	322,891	40 %	193,735	124,789
Eaton Appropriations	111,130	110,708	444,523	25 %	333,392	222,261
Medicaid Cost Reimbursement	0	54,290	217,160	0 %	217,160	40,000
Fees for Service - EH	44,069	53,203	806,689	5 %	762,620	41,241
Permit Fees	39,618	58,121	241,579	16 %	201,961	42,248
Certification/Registration Training	797	4,824	19,296	4 %	18,499	544
Fees for Service - Personal Health	2,411	520	2,078	116 %	(334)	3,759
Services Fees - Commercial Insurance PH	36,664	27,105	108,422	34 %	71,759	32,355
Service Fees-Medicaid PH	22,185	29,552	118,207	19 %	96,021	7,477
Service Fees-Medicare	1,684	1,818	7,273	23 %	5,590	181
Prior Year Revenue	0	0	0	0 %	0	39,235
Miscellaneous Revenue	942	0	0	0 %	(942)	1,515
Cty Central Services Local Support	130,133	150,187	600,986	22 %	470,853	130,133
Total Revenue	1,476,821	1,803,645	7,716,399	19 %	6,239,578	1,913,054
Expenses						
Salary and Fringe Expenses						
Salary Expenses	680,508	825,839	3,262,845	21 %	2,582,337	899,570
Fringe Expenses	288,735	358,236	1,539,456	19 %	1,250,721	450,967
Total Salary and Fringe Expenses	969,243	1,184,075	4,802,301	20 %	3,833,058	1,350,537
Operating Expenses						
Travel-Mileage	22	150	600	4 %	578	388
Travel-Other	426	5,322	16,438	3 %	16,012	8,372
Travel-Clients	0	30	120	0 %	120	0
Travel-Meals	103	1,919	6,643	2 %	6,540	1,041
Contractual	196,580	279,335	992,716	20 %	796,135	133,011
Equipment	0	1,200	4,800	0 %	4,800	0
Computers/Computer Supplies	0	750	5,000	0 %	5,000	0
Computer Software/Subscriptions	53,923	22,026	199,617	27 %	145,695	82,685
Supplies	3,693	29,277	120,505	3 %	116,811	26,398
Supplies-Medical	1,475	9,674	38,694	4 %	37,219	1,178
Supplies-Pharmaceutical	31,758	23,739	94,955	33 %	63,198	32,830
Medical Services	848	718	2,874	30 %	2,026	1,397
Lab Fees	1,052	1,016	7,004	15 %	5,952	200
Pamphlets & Brochures	0	1,043	5,020	0 %	5,020	660
Outreach Materials	3	12,506	68,625	0 %	68,622	374
Recruitment Advertising	0	885	3,540	0 %	3,540	415
Membership Fees	7,708	3,875	11,227	69 %	3,519	8,238
Books/Subscriptions/Film	240	135	540	44 %	300	240
Insurance ADM	32,179	30,961	63,183	51 %	31,004	44,266
License Fees to St of MI	773	272	18,924	4 %	18,151	10,777
Food Safety Cert. Class	780	0	1,000	78 %	220	0
Repair/Maintenance	983	852	6,108	16 %	5,125	0
Training/Conferences	200	3,026	13,709	1 %	13,509	3,511
Postage	1,499	2,925	11,700	13 %	10,201	2,688
Telephone & Internet	7,078	7,320	38,468	18 %	31,391	8,769
Cell Phone	3,146	3,240	12,960	24 %	9,813	5,739
Rentals	0	0	750	0 %	750	0
Leases	22,068	21,066	84,299	26 %	62,231	31,884
Misc Exp	500	500	8,500	6 %	8,000	3,610
Vehicle Related Expense	3,397	3,246	12,991	26 %	9,594	7,721
Credit Card Fees	2,091	2,575	10,422	20 %	8,332	1,190
Cty Central Services Allocation Costs	130,133	150,300	601,200	22 %	471,066	130,133
Federal Funded Vaccine Exp	0	0	380,823	0 %	380,823	0
MCDC Dental DAPP/Rental Expense	17,579	17,580	70,143	25 %	52,564	17,580
Total Operating Expenses	520,237	637,463	2,914,098	18 %	2,393,861	565,295
Total Expenses	1,489,480	1,821,538	7,716,399	19 %	6,226,919	1,915,832
Excess (Deficiency) of Revenue Sources Over (Under) Expenditures	(12,659)	(17,893)	0		12,659	(2,778)

No CPA provides any assurance on these financial statements, which lack substantially all disclosures required by accounting principles generally accepted in the United States of America.

Barry Eaton District Health Department
Detail Revenue and Expenditure Statement
Fiscal YTD as of December 31, 2025

	Actual YTD	YTD Budget	Fiscal Yr. Budget	% Used	Balance	Prior Year To Date 12/31/2024	Year Ending 09/30/2026	
	FY2026 50% Reduction	FY2026 50% Reduction				Actual	25-26 1st Q Amend	Budget Change
Revenue								
Comprehensive Supplemental	0	6,828	35,341	0 %	0	0	35,341	0
Comprehensive Agreement Contracts	313,333	369,673	1,488,973	21 %	(313,333)	657,354	1,631,218	(142,245)
ELPHS Contracts	182,632	255,494	1,021,975	18 %	(182,632)	219,059	1,021,975	0
ELPHS-Local Community Stabilization Authority (LCSA)	190,784	190,784	190,784	100 %	(190,784)	190,784	190,784	0
MDEQ ELPHS Sewage/Water Contract	77,388	101,082	404,328	19 %	(77,388)	116,082	404,328	0
Contracts Non-Comprehensive Agreement	176,315	291,150	1,232,351	14 %	(176,315)	26,327	1,232,351	0
Federal Funded Vaccine Revenue	0	0	380,823	0 %	0	0	380,823	0
MCDC Dental Clinic Outreach/Rent	17,579	17,580	70,320	25 %	(17,579)	17,580	70,320	0
Barry County Solid Waste Oversight	0	0	2,400	0 %	0	130	2,400	0
Barry Appropriations	129,157	80,726	322,891	40 %	(129,157)	124,789	256,024	66,867
Eaton Appropriations	111,130	110,708	444,523	25 %	(111,130)	222,261	444,523	1
Medicaid Cost Reimbursement	0	54,290	217,160	0 %	0	40,000	217,160	0
Fees for Service - EH	44,069	53,203	806,689	5 %	(44,069)	41,241	806,689	0
Permit Fees	39,618	58,121	241,579	16 %	(39,618)	42,248	241,579	0
Certification/Registration Training	797	4,824	19,296	4 %	(797)	544	19,296	0
Fees for Service - Personal Health	2,411	520	2,078	116 %	(2,411)	3,759	2,077	0
Services Fees - Commercial Insurance PH	36,664	27,105	108,422	34 %	(36,664)	32,355	108,423	0
Service Fees-Medicaid PH	22,185	29,552	118,207	19 %	(22,185)	7,477	118,206	0
Service Fees-Medicare	1,684	1,818	7,273	23 %	(1,684)	181	7,274	0
Prior Year Revenue	0	0	0	0 %	0	39,235	0	0
Miscellaneous Revenue	942	0	0	0 %	(942)	1,515	0	0
Cty Central Services Local Support	130,133	150,187	600,986	22 %	(130,133)	130,133	601,198	(213)
Total Revenue	1,476,821	1,803,645	7,716,399	19 %	(1,476,821)	1,913,054	7,791,989	(75,590)
Expenses								
Salary and Fringe Expenses								
Salary Expenses	680,508	825,839	3,262,845	21 %	(680,508)	899,570	3,137,886	124,959
Fringe Expenses	288,735	358,236	1,539,456	19 %	(288,735)	450,967	1,435,052	104,404
Total Salary and Fringe Expenses	969,243	1,184,075	4,802,301	20 %	(969,243)	1,350,537	4,572,938	229,363
Operating Expenses								
Travel-Mileage	22	150	600	4 %	(22)	388	600	0
Travel-Other	426	5,322	16,438	3 %	(426)	8,372	17,448	(1,010)
Travel-Clients	0	30	120	0 %	0	0	120	0
Travel-Meals	103	1,919	6,643	2 %	(103)	1,041	6,643	0
Contractual	196,580	279,335	992,539	20 %	(196,580)	133,011	1,105,968	(113,428)
Equipment	0	1,200	4,800	0 %	0	0	73,260	(68,460)
Computers/Computer Supplies	0	750	5,000	0 %	0	0	58,960	(53,960)
Computer Software/Subscriptions	53,923	22,026	199,617	27 %	(53,923)	82,685	192,346	7,271
Supplies	3,693	29,277	120,505	3 %	(3,693)	26,398	126,630	(6,125)
Supplies-Medical	1,475	9,674	38,694	4 %	(1,475)	1,178	39,094	(400)
Supplies-Pharmaceutical	31,758	23,739	94,955	33 %	(31,758)	32,830	94,956	0
Medical Services	848	718	2,874	30 %	(848)	1,397	2,874	0
Lab Fees	1,052	1,016	7,004	15 %	(1,052)	200	7,804	(800)
Pamphlets & Brochures	0	1,043	5,020	0 %	0	660	5,020	0
Outreach Materials	3	12,506	68,625	0 %	(3)	374	120,957	(52,333)
Recruitment Advertising	0	885	3,540	0 %	0	415	3,540	0
Membership Fees	7,708	3,875	11,227	69 %	(7,708)	8,238	11,467	(240)
Books/Subscriptions/Film	240	135	540	44 %	(240)	240	540	0
Insurance ADM	32,179	30,961	63,183	51 %	(32,179)	44,266	63,290	(107)
License Fees to St of MI	773	272	18,924	4 %	(773)	10,777	18,924	0
Food Safety Cert. Class	780	0	1,000	78 %	(780)	0	1,000	0
Repair/Maintenance	983	852	6,108	16 %	(983)	0	6,108	0
Training/Conferences	200	3,026	13,709	1 %	(200)	3,511	13,719	(10)
Postage	1,499	2,925	11,700	13 %	(1,499)	2,688	11,700	0
Telephone & Internet	7,078	7,320	38,468	18 %	(7,078)	8,769	38,892	(424)
Cell Phone	3,146	3,240	12,960	24 %	(3,146)	5,739	11,960	1,000
Rentals	0	0	750	0 %	0	0	750	0
Leases	22,068	21,066	84,299	26 %	(22,068)	31,884	99,623	(15,324)
Misc Exp	500	500	8,500	6 %	(500)	3,610	8,500	0
Vehicle Related Expense	3,397	3,246	12,991	26 %	(3,397)	7,721	13,594	(603)
Credit Card Fees	2,091	2,575	10,422	20 %	(2,091)	1,190	10,422	0
Cty Central Services Allocation Costs	130,133	150,300	601,200	22 %	(130,133)	130,133	601,199	0
Federal Funded Vaccine Exp	0	0	380,823	0 %	0	0	380,823	0
MCDC Dental DAPP/Rental Expense	17,579	17,580	70,320	25 %	(17,579)	17,580	70,320	0
Total Operating Expenses	520,237	637,463	2,914,098	18 %	(520,237)	565,295	3,219,051	(304,953)
Total Expenses	1,489,480	1,821,538	7,716,399	19 %	(1,489,480)	1,915,832	7,791,989	(75,590)
Excess (Deficiency) of Revenue Sources Over (Under) Expenditu	(12,659)	(17,893)	0		12,659	(2,778)	0	0

No CPA provides any assurance on these financial statements, which lack substantially all disclosures required by accounting principles generally accepted in the United States of America. The financial statements are not intended to be reports in accordance with ASU 2016-14, Presentation of Financial Statements of Not-for-Profit Entities.

BARRY-EATON DISTRICT HEALTH DEPARTMENT

PAYMENTS FOR DEC 2025

BOARD OF HEALTH MEETING HELD AT HASTINGS, MI - BARRY COUNTY

DATE: January 16, 2026

ACCOUNTS PAYABLE RUN 1	12/17/2025	\$	352,255.35
ACCOUNTS PAYABLE RUN 2	1/7/2026	\$	80,400.68
ACCOUNTS PAYABLE RUN 3			
ACCOUNTS PAYABLE RUN 4			
ACCOUNTS PAYABLE RUN 5			
ACCOUNTS PAYABLE RUN 6			

TOTAL MONTHLY PAYMENTS SUBMITTED FOR APPROVAL: \$ **432,656.03**

Barry Eaton District Health Department Check register

Date	Vendor	Document no.	Amount
	Bank: PNC Gen Checking - PNC BANK 070	Account no: 4260636732	
12/17/2025	V00335--ADOBE		209.80
12/19/2025	V00013--AMAZON CAPITAL SERVICES, INC	041000120000421	7.99
12/19/2025	V00014--AMBS MESSAGE CENTER, INC.	041000120000426	147.12
12/19/2025	V00327--COREWELL HEALTH	041000120000424	178.00
12/17/2025	V00060--DEARBORN NATIONAL LIFE INSURANCE COMPAY		1,342.03
12/17/2025	V00092--FEDERAL EXPRESS CORPORATION		16.05
12/19/2025	V00112--HENRY SCHEIN, INC.	041000120000422	1,105.24
12/17/2025	V00172--MALPH	46139	50.00
12/17/2025	V00333--MERS		37,556.91
12/17/2025	V00333--MERS		(41,481.24)
12/17/2025	V00440--MID-MICHIGAN RECOVERY	46140	8,378.12
12/19/2025	V00242--SANOFI PASTEUR INC.	041000120000425	108.81
12/17/2025	V00382--STATE OF MICHIGAN-MDC CASHIER	46141	883.50
12/17/2025	V00341--STATE OF MICHIGAN-MDHHS	46142	341,081.18
12/19/2025	V00146--UKG KRONOS SYSTEMS LLC	041000120000427	1,933.58
12/17/2025	V00300--VERIZON WIRELESS		605.65
12/19/2025	V00302--VOICES FOR HEALTH INC	041000120000423	132.61
	Total for PNC Gen Checking		352,255.35

Barry Eaton District Health Department Check register

Date	Vendor	Document no.	Amount
	Bank: PNC Gen Checking - PNC BANK 070	Account no: 4260636732	
01/09/2026	V00013--AMAZON CAPITAL SERVICES, INC	041000120000429	32.61
01/09/2026	V00062--DELL INC	041000120000430	180.19
01/09/2026	V00063--DELTA DENTAL PLAN OF MICHIGAN INC	041000120000431	240.50
01/09/2026	V00079--EATON COUNTY TREASURER	041000120000432	74,663.44
01/09/2026	V00172--MALPH	041000120000428	50.00
01/07/2026	V00179--MERCK & CO., INC.		1,006.96
01/07/2026	V00469--MSUFCU	46143	100.00
01/07/2026	V00468--SENSAPHONE.COM		1.00
01/07/2026	V00446--STATE OF MICHIGAN		180.00
01/07/2026	V00337--STATE OF MICHIGAN-MDA		18.00
01/07/2026	V00306--WOW		2,096.98
	Total for PNC Gen Checking		78,569.68
	Bank: PNC-EFT-CC - PNC	Account no:	
01/07/2026	V00005--ACCIDENT FUND INS CO OF AMER		1,831.00
	Total for PNC-EFT-CC		1,831.00

Barry-Eaton District Health Department

Women, Infants, and Children Program

For the Period October 1, 2023 – September 30, 2024

Audit Report – Issued December 2025



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

ELIZABETH HERTEL
DIRECTOR

December 30, 2025

Rebekah Condon, Health Officer
Barry-Eaton District Health Department
1033 Health Care Dr.
Charlotte, Michigan 48813

Dear Rebekah Condon:

This is our audit report of the Women, Infants, and Children (WIC) Program funded by the Michigan Department of Health and Human Services and administered by Barry-Eaton District Health Department for the audit period October 1, 2023, through September 30, 2024.

The Michigan Department of Health and Human Services (MDHHS) is committed to ensuring high standards of integrity and accountability for public funds. To that end, we periodically perform audits to assess compliance with fiscal reporting and other requirements contained in MDHHS agreements, Federal regulations, and policies and procedures.

The report includes the Statements of Audited Grant Revenues and Expenses, Grant Award Information, and Scope and Methodology. **We noted no exceptions during our review.**

Thank you for the cooperation extended throughout the audit process.

Sincerely,

A handwritten signature in black ink that reads "Eric McGaugh".

Eric McGaugh
Audit Manager
WIC and Family Planning Audit Section
Bureau of Audit – Audit Division

c: Shannah Havens, MDHHS, Audit
Bryce Wooton, MDHHS, Audit
Christina Herring, MDHHS, WIC
Cecilia Hutson, MDHHS, WIC
Laurel McCamman, Barry-Eaton District Health Department
Kylie Kalleward, Barry-Eaton District Health Department

TABLE OF CONTENTS

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STATEMENTS OF AUDITED GRANT REVENUES AND EXPENSES

Barry-Eaton District Health Department
WIC Breastfeeding Program
Statement of Audited Grant Revenues and Expenses
10/01/2023 - 09/30/2024

	REPORTED	AUDITED	AUDIT ADJUSTMENT	EXCEPTION REFERENCE
REVENUES				
MDHHS Grant	\$ 40,381	\$ 40,381	\$ -	
Local Funds - Other	\$ 11,489	\$ 11,489	\$ -	
Fees and Collections - 1st and 2nd Party	\$ -	\$ -	\$ -	
Fees and Collections - 3rd Party	\$ -	\$ -	\$ -	
Federal Cost Based Reimbursement	\$ -	\$ -	\$ -	
Total Revenues	\$ 51,870	\$ 51,870	\$ -	
EXPENSES				
Salaries and Wages	\$ 19,249	\$ 19,249	\$ -	
Fringe Benefits	\$ 8,620	\$ 8,620	\$ -	
Contractual Services	\$ -	\$ -	\$ -	
Supplies and Materials	\$ 161	\$ 161	\$ -	
Travel	\$ 20	\$ 20	\$ -	
Communication	\$ 165	\$ 165	\$ -	
Space Costs	\$ -	\$ -	\$ -	
All Others (ADP, Con. Employees, Misc.)	\$ 5,915	\$ 5,915	\$ -	
County-City Central Services	\$ -	\$ -	\$ -	
Indirect Costs	\$ -	\$ -	\$ -	
Cost Allocation/Other Cost Distributions	\$ 17,740	\$ 17,740	\$ -	
Total Expenses	\$ 51,870	\$ 51,870	\$ -	

Barry-Eaton District Health Department
WIC Resident Services Program
Statement of Audited Grant Revenues and Expenses
10/01/2023 - 09/30/2024

	REPORTED	AUDITED	AUDIT ADJUSTMENT	EXCEPTION REFERENCE
REVENUES				
MDHHS Grant	\$ 505,570	\$ 505,570	\$ -	
Local Funds - Other	\$ 209,220	\$ 209,220	\$ -	
Fees and Collections - 1st and 2nd Party	\$ -	\$ -	\$ -	
Fees and Collections - 3rd Party	\$ -	\$ -	\$ -	
Federal Cost Based Reimbursement	\$ -	\$ -	\$ -	
Total Revenues	\$ 714,790	\$ 714,790	\$ -	
EXPENSES				
Salaries and Wages	\$ 280,397	\$ 280,397	\$ -	
Fringe Benefits	\$ 125,629	\$ 125,629	\$ -	
Contractual Services	\$ -	\$ -	\$ -	
Supplies and Materials	\$ 7,401	\$ 7,401	\$ -	
Travel	\$ 5,470	\$ 5,470	\$ -	
Communication	\$ 574	\$ 574	\$ -	
Space Costs	\$ -	\$ -	\$ -	
All Others (ADP, Con. Employees, Misc.)	\$ 15,595	\$ 15,595	\$ -	
County-City Central Services	\$ -	\$ -	\$ -	
Indirect Costs	\$ -	\$ -	\$ -	
Cost Allocation/Other Cost Distributions	\$ 279,724	\$ 279,724	\$ -	
Total Expenses	\$ 714,790	\$ 714,790	\$ -	

GRANT AWARD INFORMATION

Program Title	WIC Breastfeeding
MDHHS Agreement No.	E20242856
MDHHS Agreement Period	10/01/2023 – 09/30/2024
MDHHS Audit Period	10/01/2023 – 09/30/2024
Federal Award Identification No.	232MI1013W5003, 242MI003W1003
Federal Award No.	50022, 50035
Exceptions Related to Agreement	Not Applicable
Amount to be Returned	\$-0-
See the Statement of Audited Grant Revenues and Expenses for line item details.	

Program Title	WIC Resident Services
MDHHS Agreement No.	E20242855
MDHHS Agreement Period	10/01/2023 – 09/30/2024
MDHHS Audit Period	10/01/2023 – 09/30/2024
Federal Award Identification No.	242MI003W1003
Federal Award No.	50035
Exceptions Related to Agreement	Not Applicable
Amount to be Returned	\$-0-
See the Statement of Audited Grant Revenues and Expenses for line item details.	

SCOPE AND METHODOLOGY

We examined the Health Department's records and activities for the period October 1, 2023, through September 30, 2024.

Our audit procedures included the following:

- Reviewed the most recent Single Audit and Financial Statement Audit Reports for any WIC Program related concerns.
- Reviewed the Grant Agreement, Budgets, and Program Specific Assurances and Requirements.
- Reviewed policies to ensure they meet applicable requirements and guidelines.
- Reviewed the most recently completed Subrecipient Questionnaire.
- Reconciled the WIC Program Financial Status Reports (FSRs) and MDHHS payment schedules to the accounting records.
- Tested a selection of payroll and non-payroll expenditures for program compliance; and adherence to policies, Federal and program guidelines, and approval procedures.
- Reviewed equipment purchases \$2,500 for the WIC Program.
- Reviewed indirect cost and other cost allocations for reasonableness, and an equitable methodology.

Our audit did not include a review of program content or quality of services provided.

GLOSSARY OF ABBREVIATIONS AND TERMS

CFR	Code of Federal Regulations
FAIN	Federal Award Identification Number
FSR	Financial Status Report
FY	Fiscal Year (State of Michigan FY October 1 – September 30)
MDHHS	Michigan Department of Health and Human Services
WIC	Women, Infants, and Children
WICBF	Women, Infants, and Children Breastfeeding



Childhood Vaccination Schedule Changes

New HHS Childhood Immunization Schedule released January 5, 2026

New HHS Childhood Immunization Schedule (released January 5, 2026)

Recommended for All Children

- Diphtheria
- Tetanus
- Acellular pertussis (whooping cough)
- Haemophilus influenzae type b (Hib)
- Pneumococcal conjugate
- Polio
- Measles
- Mumps
- Rubella
- Human papillomavirus (HPV)
- Varicella (chickenpox)

Recommended for Certain High-Risk Groups or Populations

- RSV*
- Hepatitis A
- Hepatitis B
- Meningococcal

**Note: any children whose mother did not have the vaccine should get one dose*

Recommended Based on Shared Clinical Decision-Making

- Rotavirus
- COVID-19
- Influenza
- Hepatitis A
- Hepatitis B
- Meningococcal



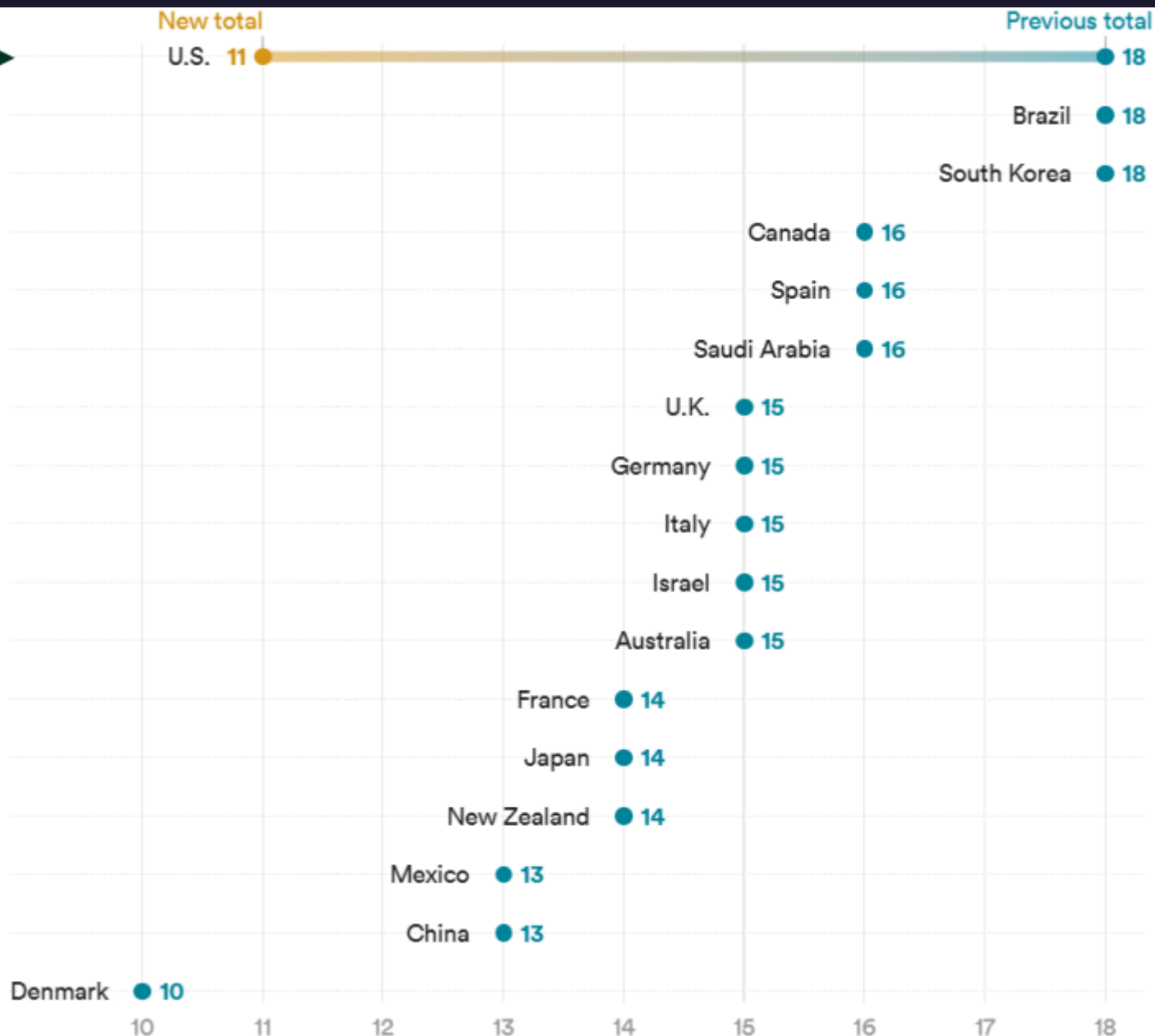
United States drastically reduces number of recommended vaccines

TOTAL NUMBER OF VACCINES RECOMMENDED TO ALL CHILDREN BY NATION

Branswell, STAT, 2026.

Note: For the purposes of this analysis, STAT has counted RSV antibody products towards a country's vaccine total, if it recommends the shot for all babies.

Chart: J. Emory Parker and Helen BranswellSource: STAT analysis of national vaccine schedules

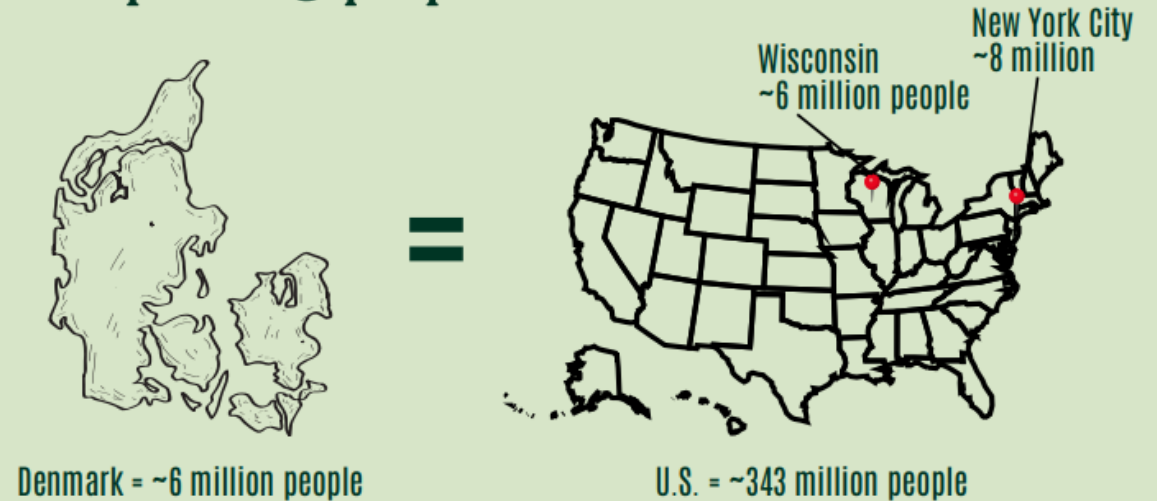


Denmark ≠ United States

"We don't follow Denmark's vaccine recommendations because we don't live in Denmark. Children in the United States are at risk of different diseases than children in other countries. We also have a completely different health system. The bottom line is vaccine recommendations in the United States are designed to help children resist serious illnesses so they can stay healthy, and our communities can stay healthy."

— Jose Romero, MD, FAAP, Member, AAP Committee on Infectious Diseases

Comparing population size:



Unbiased Science, 2025

Denmark ≠ United States

Why it works in Denmark:

- Universal healthcare
- 46 weeks of paid parental leave
- Near universal prenatal screening
- Centralized medical records
- Reliable follow-up



Unbiased Science, 2025; YLE, 2025

Why it DOESN'T work in the U.S.:

- Larger, more diverse population
- NO universal healthcare
- Lack of guaranteed paid parental leave
- Fragment care delivery
- Worse baseline health metrics



Mandavilli, NYT, 2025; Unbiased Science, 2025; YLE, 2025

From “[What Changed, What Matters: Navigating the Latest Vaccine Schedule Updates](#),” Tracie Newman, MD, MPH, FAAP. North Dakota State University Center for Immunization Research and Education webinar January 13, 2026.

MDHHS issues statement about federal changes to childhood vaccine schedule

“For decades, vaccines have played a critical role in the prevention and control of infectious diseases and significant reductions in childhood illnesses and fatalities.

On Thursday, Dec. 18, Michigan’s Chief Medical Executive Dr. Natasha Bagdasarian issued a Standing Recommendation advising health care providers and families to follow the child and adolescent immunization schedule produced by the American Academy of Pediatrics (AAP) or the American Academy of Family Physicians (AAFP). We continue to stand by that recommendation.”



FOR IMMEDIATE RELEASE:
Jan. 6, 2026

CONTACT: Lynn Sutfin
517-241-2112
Sutfin1@michigan.gov

MDHHS issues statement about federal changes to childhood vaccine schedule

LANSING, Mich. – Following updates to the U.S. childhood immunization schedule made today by Deputy Secretary of Health and Human Services Jim O’Neill, in his role as acting director of the Centers for Disease Control and Prevention, the Michigan Department of Health and Human Services issued the following statement:

“For decades, vaccines have played a critical role in the prevention and control of infectious diseases and significant reductions in childhood illnesses and fatalities.

On Thursday, Dec. 18, Michigan’s Chief Medical Executive Dr. Natasha Bagdasarian issued a Standing Recommendation advising health care providers and families to follow the child and adolescent immunization schedule produced by the American Academy of Pediatrics (AAP) or the American Academy of Family Physicians (AAFP). We continue to stand by that recommendation.”

The underlying scientific evidence remains unchanged and continues to support the full AAP and AAFP vaccination schedules for children. Families should still be able to access the full range of childhood immunizations as recommended by the AAP and AAFP to protect their children from serious diseases.

All vaccines, including those moved to shared clinical decision-making, remain covered with no out-of-pocket cost by Affordable Care Act-regulated private insurance plans and federal coverage programs such as Medicaid and the Vaccines for Children program, as HHS affirmed in its announcement.

Bagdasarian noted that the changes announced today may create confusion for families and clinicians regarding school vaccine requirements, clinical workflows and the supply and use of combination vaccines.

“MDHHS will continue to provide clear guidance, backed by science to help protect Michigan families,” Bagdasarian said.

###

Childhood Vaccination Schedule

Table 1 Recommended Child and Adolescent Immunization Schedule for Ages 18 Years or Younger, United States, 2025




DEDICATED TO THE HEALTH OF ALL CHILDREN®


Vaccine and other immunizing agents	Birth	1 mos	2 mos	4 mos	6 mos	8 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16 yrs	17–18 yrs		
Respiratory syncytial virus (RSV-mAb [nirsevimab, clesrovimab])	1 dose during RSV season depending on maternal RSV vaccination status (See Notes)				1 dose nirsevimab during RSV season (See Notes)															
Hepatitis B (HepB)	1 st dose	2 nd dose		3 rd dose																
Rotavirus (RV): RV1 (2-dose series), RVS (3-dose series)		1 st dose	2 nd dose	See Notes																
Diphtheria, tetanus, and acellular pertussis (DTaP <7 yrs)		1 st dose	2 nd dose	3 rd dose					4 th dose	5 th dose										
<i>Haemophilus influenzae</i> type b (Hib)		1 st dose	2 nd dose	See Notes					3 rd or 4 th dose (See Notes)											
Pneumococcal conjugate (PCV15, PCV20)		1 st dose	2 nd dose	3 rd dose					4 th dose											
Inactivated poliovirus (IPV)		1 st dose	2 nd dose	3 rd dose								4 th dose					See Note			
COVID-19 (1vCOV-mRNA, 1vCOV-aPS)					1 or more doses of 2025-2026 vaccine (See Notes)						1 dose of 2025-2026 vaccine (See Notes)									
Influenza					1 or 2 doses annually (See Notes)										1 dose annually (See Notes)					
Measles, mumps, and rubella (MMR)					See Notes		1 st dose						2 nd dose							
Varicella (VAR)							1 st dose						2 nd dose							
Hepatitis A (HepA)					See Notes		2-dose series (See Notes)													
Tetanus, diphtheria, and acellular pertussis (Tdap ≥7 yrs)																	1 st dose			
Human papillomavirus (HPV)																	2-dose series	See Notes		
Meningococcal (MenACWY-CRM ≥2 mos, MenACWY-TT ≥2years)					See Notes												1 st dose	2 nd dose		
Meningococcal B (MenB-4C, MenB-FHbp)																	See Notes			
Respiratory syncytial virus vaccine (RSV [Abrysvo])															Seasonal administration during pregnancy if not previously vaccinated					
Dengue (DEN4CYD: 9–16 yrs)															Seropositive in areas with endemic dengue (See Notes)					
Mpox																				

● Range of recommended ages for all children


● Range of recommended ages for catch-up vaccination

● Range of recommended ages for certain high-risk groups or populations

 Recommended vaccination for those who desire protection

 Recommended vaccination based on shared clinical decision-making

BEDHD continues to promote science based creditable sources of vaccine related information.



Vaccine Education Center

Home / Vaccine Education Center

Vaccine Education Center

Where science leads the way toward healthy families at every age

Contact us online >

National Alert: Measles is on the rise across the U.S. It's more important than ever to make sure your family is protected. [Learn more](#)

I VACC NATE

About Vaccines ▾ Answering Your Questions ▾ Resources ▾ News ▾ Contact


SEARCH FAQs 🔍

Protecting your child is your top priority.

Vaccinating your child is one of the safest and most effective things you can do to protect them.


GET ANSWERS

Vaccine Safety




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My Child's Risk




LEARN MORE

Protecting our Communities



LEARN MORE



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⬅️ Back to top



Other Considerations



❖ Insurance Coverage

Health plans have committed to cover all vaccines through September 2026

Government programs [Vaccines for Children & Medicaid] will continue

Concerns that changes to HPV vaccine recommendations will impact insurance coverage for series

❖ Access Concerns

Increased confusion for both parents and clinicians

Greater access issues for rural communities



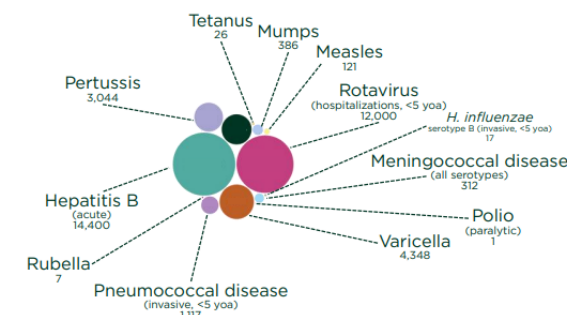
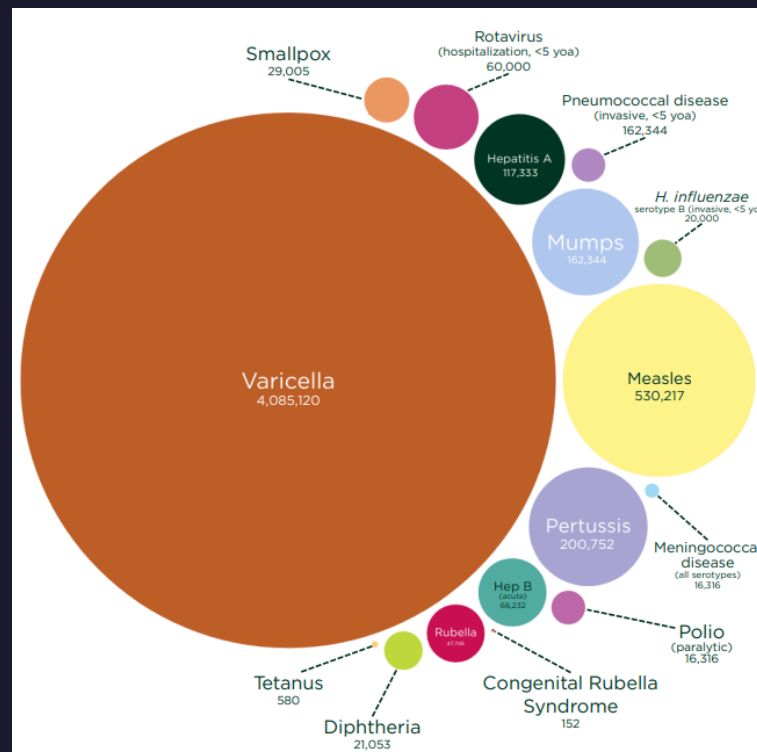
❖ Reduced incentive to produce vaccines

Vaccines Work

ANNUAL MORBIDITY FROM VACCINE-PREVENTABLE DISEASES: PAST VS. PRESENT

Disease	20th Century Annual Morbidity	Current Reported Cases	% Decrease
Diphtheria	21,053	1	>99%
<i>H. influenzae</i> serotype B	20,000	17	>99%
Hepatitis A	117,333	(est) 3,300	97%
Hepatitis B (acute)	66,232	(est) 14,400	78%
Measles	530,217	121	>99%
Meningococcal disease	2,886	312	89%
Mumps	162,344	386	>99%
Pertussis	200,752	3,044	98%
Pneumococcal disease	16,069	1,117	93%
Polio (paralytic)	16,316	1	100%
Rotavirus	60,000	(est) 12,000	80%
Rubella	47,745	7	>99%
Congenital Rubella Syndrome	152	0	>99%
Smallpox	29,005	0	100%
Tetanus	580	26	96%
Varicella	4,085,120	4,348	>99%

Immunize.org, 2025



Smallpox: 0
Congenital Rubella Syndrome: 0

From Immunize.org: Vaccines Work! CDC statistics demonstrate dramatic declines in vaccine-preventable diseases when compared with the pre-vaccine era



Fact Checked: U.S. Vaccine Recommendations are Appropriate for Children in the United States

[Home](#) / [News Room](#) / [Fact Checked](#) / Fact Checked: U.S. Vaccine Recommendations are Appropriate for Children in the United States



Immunizations protect America's children every day

CDC estimates that vaccination of children born between 1994 and 2023 will:

- **Prevent** more than 500 million illnesses
- **Avoid** more than 1 million deaths
- **Save** nearly \$3 trillion

 bit.ly/mm7331a2
AUGUST 8, 2024 



Morbidity and Mortality Weekly Report
(MMWR)

Search



Health and Economic Benefits of Routine Childhood Immunizations in the Era of the Vaccines for Children Program — United States, 1994–2023

Thank you

References:

[yourlocalepidemiologist: a-unilateral-change-to-childhood-schedule](#)

[Home | AAP](#)

[What Changed, What Matters: Navigating the Latest Vaccine Schedule Updates](#)

[Updated: Danish Vaccine Schedule](#)

[Vaccines Work! CDC statistics demonstrate dramatic declines in vaccine-preventable diseases when compared with the pre-vaccine era](#)

