



# TUSCOLA COUNTY

## Committee of the Whole

### MEETING AGENDA

Monday, May 13, 2024 – 8:00 AM

H.H. Purdy Building Board Room, 125 W. Lincoln St., Caro, MI 48723

**Public may participate in the meeting electronically:**  
**Join by phone:** (US) +1 929-276-1248 PIN:112 203 398#  
**Join by Hangouts Meeting ID:** [meet.google.com/mih-jntr-jya](https://meet.google.com/mih-jntr-jya)

8:00 AM Call to Order - Chairperson Vaughan  
Roll Call - Clerk Fetting

Page

#### New Business

1. Consideration of Homeland Security Budget Amendment and an Advance from the General Fund 4 - 7  
[Consideration of Homeland Security Budget Amendment and General Fund Advance](#)  
[Homeland Security 4-30-2024 Balance Sheet](#)  
[Homeland Security 5-31-2024 Revenue and Expenditure Report](#)
2. 2024 Tuscola County L-4029 Summer Property Tax Levy - Angie Daniels, Equalization Director 8  
[2024 County L-4029 Summer Levy](#)
3. Community Corrections Fiscal 2025 Grant - David Stevens, Community Corrections Coordinator, Thumb Area Regional Community Corrections 9 - 66  
[Proposed 2024-07 Resolution for Community Corrections Application 2025 Application Budget Section](#)  
[Community Corrections Administration 2025](#)  
[Community Corrections Application Resolution 2024](#)  
[Community Corrections FY 2025 Part One](#)  
[Community Corrections Gender Specific SA 2025](#)  
[Community Corrections IOP 2025](#)  
[Community Corrections OMSP 2025](#)  
[Community Corrections Pretrial Assessment 2025](#)  
[Community Corrections Pretrial Supervision 2025](#)  
[Community Corrections Substance Abuse Programming 2025](#)

## Community Corrections Thinking Matters 2025

### Old Business

#### Finance/Technology

Committee Leader **Commissioner Young** and Commissioner Koch

##### Primary Finance/Technology

1. Informational - Tuscola County Landbank is a Component Unit - Neil Hammerbacher, Controller-Administrator 67 - 74  
[Checklist to Determine if the Landbank is a Component Unit](#)
2. Informational - History of Audits Submitted by Road Commissions - Neil Hammerbacher, Controller-Administrator 75  
[Road Commission Audit Submissions](#)
3. Update on Tuscola County's 2023 Financial Audit - Neil Hammerbacher, Controller-Administrator 76  
[Statement of Activities for 2023](#)

##### On-Going and Other Finance

1. Informational - New Tool from MAC to Search Grant Opportunities - Tom Young, Commissioner and Neil Hammerbacher, Controller-Administrator 77 - 113  
[MAC Legislative Update 5-3-24](#)  
[USDA Compliance Review Scheduled](#)  
[USDA Grant Review Questionnaire](#)  
[Internal Control Considerations - Grants](#)  
[Audit Program for Federal Awards](#)

##### On-Going and Other Technology

1. Information System(s) Update - Eean Lee, Chief Information Officer

### Building and Grounds

Committee Leader **Commissioner Koch** and Commissioner Lutz

##### Primary Building and Grounds

1. 2024 Department of Health and Human Services (DHHS) Roof Replacement Bid Opening - Mike Miller, Director of Buildings and Grounds 114 - 129  
[2024 DHHS Roof Replacement \(1\)](#)
2. Consideration of Adding Insulation to the People's State Bank 130

(PSB) Building - Mike Miller, Director of Buildings and Grounds  
[Tuscola Offices - Cost to add insulation](#)

## On-Going and Other Building and Grounds

### Personnel

Committee Leader **Commissioner Bardwell** and Commissioner Vaughan

#### Primary Personnel

1. Request to Hire to Refill Vacant Full-Time Records-Criminal Division Position - Robert Baxter, Undersheriff 131 - 132  
[New Hire for Sheriff's Department](#)
2. Request to Hire Seasonal Employees to Refill Vacant Positions - Larry Zapfe, Mosquito Abatement Director 133 - 134  
[Mosquito Abatement Hiring Request](#)

#### On-Going and Other Personnel

### Other Business as Necessary

### Public Comment Period

### Adjournment

TUSCOLA COUNTY  
JOURNAL ENTRY  
JE: 21958

Post Date: 05/16/2024  
Entry Date: 05/09/2024  
Description: FUNDING OF 2 HOMELAND SECURITY PROJECTS

Entered By: TCACHAMMN  
Journal: BA

GL #	Description	Increase/(Decrease)
261-100-546.000	HOMELAND SECURITY GRANT	53,000.00
261-100-957.000	TRAINING	2,000.00
261-100-978.000	EQUIPMENT	51,000.00
	Revenue Change:	53,000.00
	Expenditure Change:	53,000.00
	Budgeted Change To Fund Balance:	0.00

APPROVED BY: \_\_\_\_\_



Tuscola County

Neil Hammerbacher &lt;nhammerbacher@tuscolacounty.org&gt;

## Homeland Security Grant Advance

1 message

Steve Anderson &lt;tcemanderson@tuscolacounty.org&gt;

Tue, Apr 23, 2024 at 3:02 PM

To: Neil Hammerbacher &lt;nhammerbacher@tuscolacounty.org&gt;

Mr. Hammerbacher,

Per our conversation, I am looking for an advance for the Homeland Security Grant line item budget 261-100-978-000, which was only allocated \$25,000.00. I am making this request to cover Homeland Security Projects that Tuscola County has received from the region. Here is a list of the projects that have been awarded to Tuscola County and I am expecting to make purchases for during this calendar year:

- FY 2022 HSGP Soft Target scene lighting project in the amount of \$14,699.16. *The BOC approved this purchase on 2/26/24 and it was approved by the fiduciary on 3/15/24. These lights have been purchased and I was able to submit this project for reimbursement on 4/22/24.*
- FY 2023 HSGP Soft Targets Project for scene lighting in the amount of \$21,000.00 (8 additional MX Fuel Tower Lights for local fire departments) ①
- FY 2022/2023 Mobile Data Terminals in the amount of \$32,000.00 for Akron Pd (x1), Gagetown (x1) and Vassar Pd (x3) *This project is a clean up project that will exhaust FY 2022 funds and remainder will come out of FY 2023 funding.* ②
- FY 2023 LETPA funded Portable & Mobile Radios in the amount of \$56,000.00 (Radios for Kingston Pd and Gagetown Pd)
- FY 2023 LETPA funded Portable and Mobile Radios in the amount of \$31,000.00 (Radios for Cass City Pd) / *pushed this one back to the next grant cycle which will be in the 2025 calendar year.*

There is still potential funding available that I might go for but this is the list at this point... In total, we are looking at potentially \$140,000.00.

I have attached the subrecipient agreements for FY 2022 and FY 2023.

If you need anything further, please let me know...

--

*Deputy Steven Anderson*

Emergency Manager  
420 Court St. Suite #1  
Caro, MI 48723  
Office # 989-673-5181  
Cell # 989-450-0147  
Fax # 989-673-8164  
#levistrong

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### 2 attachments

Tuscola Co - FY 2022 HSGP Subrecipient Agreement.pdf  
1414K

FY 2023 HSGP Subrecipient Agreement - Tuscola County.pdf  
438K

Fund 261 HOMELAND SECURITY

GL Number	Description	PERIOD ENDED 04/30/2023	PERIOD ENDED 04/30/2024
*** Assets ***			
261-000-001.000	CASH - CHECKING	(32,815.26)	(13,605.11)
261-000-079.000	DUE FROM FED GOVERNMENT	22,301.99	14,699.16
<b>Total Assets</b>		<b>(10,513.27)</b>	<b>1,094.05</b>
*** Liabilities ***			
<b>Total Liabilities</b>		<b>0.00</b>	<b>0.00</b>
*** Fund Balance ***			
<b>Total Fund Balance</b>		<b>0.00</b>	<b>0.00</b>
<b>Beginning Fund Balance</b>		<b>0.00</b>	<b>0.00</b>
<b>Net of Revenues VS Expenditures - 2023</b>			<b>0.00</b>
*2023 End FB/2024 Beg FB		0.00	0.00
<b>Net of Revenues VS Expenditures - Current Year</b>		<b>(10,513.27)</b>	<b>1,094.05</b>
<b>Ending Fund Balance</b>		<b>(10,513.27)</b>	<b>1,094.05</b>
<b>Total Liabilities And Fund Balance</b>		<b>(10,513.27)</b>	<b>1,094.05</b>

\* Year Not Closed

PERIOD ENDING 05/31/2024

GL NUMBER	DESCRIPTION	END BALANCE	2024		YTD BALANCE	ACTIVITY FOR
		12/31/2023 NORMAL (ABNORMAL)	ORIGINAL BUDGET	2024 AMENDED BUDGET	05/31/2024 NORMAL (ABNORMAL)	MONTH 05/31/2024 INCREASE (DECREASE)
Fund 261 - HOMELAND SECURITY						
Revenues						
Dept 100 - CONTROL						
261-100-546.000	HOMELAND SECURITY GRANT	77,702.59	25,000.00	78,000.00	15,979.28	0.00
Total Dept 100 - CONTROL		77,702.59	25,000.00	78,000.00	15,979.28	0.00
TOTAL REVENUES		77,702.59	25,000.00	78,000.00	15,979.28	0.00
Expenditures						
Dept 100 - CONTROL						
261-100-957.000	TRAINING	309.56	0.00	2,000.00	186.07	0.00
261-100-978.000	EQUIPMENT	77,393.03	25,000.00	76,000.00	14,699.16	0.00
Total Dept 100 - CONTROL		77,702.59	25,000.00	78,000.00	14,885.23	0.00
TOTAL EXPENDITURES		77,702.59	25,000.00	78,000.00	14,885.23	0.00
Fund 261 - HOMELAND SECURITY:						
TOTAL REVENUES		77,702.59	25,000.00	78,000.00	15,979.28	0.00
TOTAL EXPENDITURES		77,702.59	25,000.00	78,000.00	14,885.23	0.00
NET OF REVENUES & EXPENDITURES		0.00	0.00	0.00	1,094.05	0.00

ORIGINAL TO: County Clerk(s)  
COPY TO: Equalization Department(s)  
COPY TO: Each Township or City Clerk

**2024 TAX RATE REQUEST (This form must be completed and submitted on or before September 30, 2024)**

**MILLAGE REQUEST REPORT TO COUNTY BOARD OF COMMISSIONERS**

County(ies) Where the Local Government Unit Levies Taxes <b>Tuscola</b>	2024 Taxable value of ALL Properties in the Unit as of 05-28-2024 <b>2024 Taxable Value minus Ren Zone</b>	2024 Taxable Value (All) <b>2,288,129,872</b>	2,295,591,905
Local Government Unit Requesting Millage Levy <b>County</b>	For LOCAL School Districts: 2024 Taxable Value excluding Principal Residence, Qualified Agricultural, Qualified Forest, Industrial Personal and Commercial Personal Properties.		

This form must be completed for each unit of government for which a property tax is levied. Penalty for non-filing is provided under MCL Sec 211.119.

The following tax rates have been authorized for levy on the 2024 tax roll.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Source	Purpose of Millage	Date of Election	Original Millage Authorized by Election, Charter, etc.	2023 Millage Rate Permanently Reduced by MCL 211.34d	2024 Current Year Millage Reduction Fraction	2024 Millage Rate Permanently Reduced by MCL 211.34d	2024 Sec 211.34 Millage Rollback Fraction	2024 Maximum Allowable Millage Levy *	Millage Requested to be Levied July 1	Millage Requested to be Levied Dec. 1	Expiration Date of Millage Authorized
<b>Alloc</b>	<b>Operating</b>	<b>Nov-64</b>	<b>4.2000</b>	<b>3.9141</b>	<b>1.0000</b>	<b>3.9141</b>	<b>1.0000</b>	<b>3.9141</b>	<b>3.9141</b>		<b>frozen</b>

Prepared by <b>Angie Daniels</b>	Telephone Number <b>989-672-3833</b>	Title of Preparer <b>Equalization Director</b>	Date <b>05.08.2024</b>
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**Certification:** As the representatives for the local government unit named above, we certify that these requested tax levy rates have been reduced, if necessary to comply with the state constitution (Article 9, Section 31), and that the requested levy rates have also been reduced, if necessary, to comply with MCL Sections 211.24e, 211.34 and, for LOCAL school districts which levy a Supplemental (Hold Harmless) Millage, 380.1211(3).

<input type="checkbox"/> Clerk	Signature	Print Name	Date
<input type="checkbox"/> Secretary			
<input type="checkbox"/> Chairperson	Signature	Print Name	Date
<input type="checkbox"/> President			

\* Under Truth in Taxation, MCL Section 211.24e, the governing body may decide to levy a rate which will not exceed the maximum authorized rate allowed in column 9. The requirements of MCL 211.24e must be met prior to levying an operating levy which is larger than the base tax rate but not larger than the rate in column 9.

Local School District Use Only. Complete if requesting millage to be levied. See STC Bulletin 2 of 2024 for instructions on completing this section.	
Total School District Operating Rates to be Levied (HH/Supp and NH Oper ONLY)	Rate
For Principal Residence, Qualified Ag., Qualified Forest and Industrial Personal	
For Commercial Personal	
For all Other	



# TUSCOLA COUNTY BOARD OF COMMISSIONERS

125 W. Lincoln Street  
Suite 500  
Caro, MI 48723

Telephone: 989-672-3700  
Fax: 989-672-4011

At a regular meeting of the Board of Commissioners for the County of Tuscola, State of Michigan, on the 16<sup>th</sup> day of May 2024, with the meeting called to order at \_\_\_\_\_ a.m.

Commissioners Present:

Commissioners Absent:

The following resolution was offered by Commissioner \_\_\_\_\_,  
seconded by Commissioner \_\_\_\_\_,

## **RESOLUTION 2024-07** **Fiscal Year 2025 Community Corrections Grant Application**

**WHEREAS**, Tuscola County, as a member of the Thumb Area Regional Community Corrections with Lapeer and Sanilac Counties, recognizes the need to offer felony probationers with specific programming targeted at further advancing offender success rates and reducing repeat offender rates; and

**WHEREAS**, the Fiscal Year 2025 Community Corrections Grant Application, written on behalf of the Thumb Area Regional Community Corrections, will provide a funding source to incorporate such programming and administrative oversight in Tuscola County.

**THEREFORE, BE IT RESOLVED** that the Tuscola County Board of Commissioners hereby approves Tuscola County's participation in the Thumb Area Regional Community Corrections Fiscal Year 2025 Community Corrections Grant Application, for the period of 10/01/2024 through 9/30/2025.

**BE IT FURTHER RESOLVED**, that this resolution be spread upon the proceedings of the Tuscola County Board of Commissioners this 16<sup>th</sup> day of May 2024.

**RESOLUTION ADOPTED.**

STATE OF MICHIGAN

COUNTY OF TUSCOLA

Yes:

No:

Absent:

Date \_\_\_\_\_

\_\_\_\_\_  
*Kim Vaughan, Chairperson  
Tuscola County Board of Commissioners*

*I, Jodi Fetting, Clerk of the County of Tuscola, do hereby certify that the foregoing is a true and complete copy of an agreement approved by the Board of Commissioners at a regular meeting on May 16, 2024.*

Date \_\_\_\_\_

\_\_\_\_\_  
*Jodi Fetting  
Tuscola County Clerk, CCO*

PROPOSED

Program Cost Descriptions FY2025

THUMB AREA REGIONAL COMMUNITY CORRECTIONS

Salary & Wage Costs

<b>Position 1</b>			
Title:	Coordinator	Name of Individual:	David Lee Stevens

Number of Hours Worked Per Year. (Full Time is 2,080)	2080.00	FTE Equivalent:	1.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code/Name	CPS	Local/Other	Fee Revenue	Totals	
Administration	48,000	2,247		50,247	Coordinates Community Corrections Programs, develops new strategies based on offender's needs, processes paperwork and supervises employee. Plans & prepares for CCAB meetings, communicates with contracted service providers, prepares quarterly reports and grant applications, communicates with
F22 - Pretrial Assessment	9,000			9,000	The pretrial assessment will be given to those individuals who are deemed eligible, the individual's criminal history will also be checked via Judicial Data Warehouse, JIS and/or LEIN. Reports will then be generated and forwarded accordingly. This grant will be billed at the correct hourly rate and with this
F23 - Pretrial Supervision	23,100			23,100	Pretrial supervision will be conducted as described in the pretrial grant and billed at the correct hourly rate for time spent providing those services including: Court reminders, address verification, checks for new criminal contact, verification of bond conditions and conducting the process of new referrals and all
				-	Hourly wage = \$30.45 with an additional cost of employment of = \$9.14 for a total of (\$39.59). Cost of employment includes Medicare, Social Security, Medical/Dental/Vision Insurance, Life Insurance, Retirement, Unemployment, Workman's Comp, Vacation time, Sick time and a Post Employment Health
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<b>Totals</b>	<b>80,100</b>	<b>2,247</b>	<b>-</b>	<b>82,347</b>	

<b>Position 2</b>			
Title:	Assistant Coordinator	Name of Individual:	Wendy Sue Stevens

Number of Hours Worked Per Year. (Full Time is 2,080)	2080.00	FTE Equivalent:	1.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code	CPS	Local/Other	Fee Revenue	Totals	
Administration	48,000	5,879		53,879	Processes paperwork (creates vouchers to pay bills, maintains offices files, etc.), processes incoming mail, helps with planning for CCAB meetings, takes notes during CCAB meetings, proof reads, answers the phone, keeps the office calendar up to date, helps with payroll, gathers needed paperwork for
F22 - Pretrial Assessment	1,000			1,000	The pretrial assessment will be given to those individuals who are deemed eligible, the individual's criminal history will also be checked via Judicial Data Warehouse, JIS and/or LEIN. Reports will then be generated and forwarded accordingly. This grant will be billed at the correct hourly rate and with this
F23 - Pretrial Supervision	23,100			23,100	Pretrial supervision will be conducted as described in the pretrial grant and billed at the correct hourly rate for time spent providing those services including: Court reminders, address verification, checks for new criminal contact, verification of bond conditions and conducting the process of new referrals and all

<b>TOTAL CPS</b>	<b>TOTAL FUNDING</b>
387,730	387,730

Program Code	Program Type	Program Name	
Administrz	Administration	Administration	Administration
--		0	-- - 0
G18	Outpatient Services	Opiate / Meth Specific Program	G18 - Opiate / Meth Specific Program
G18	Outpatient Services	IOP	G18 - IOP
G18	Outpatient Services	Substance Abuse	G18 - Substance Abuse
G18	Outpatient Services	Gender Specific (Women) Substance Abuse	G18 - Gender Specific (Women) Substance Abuse
C01	Cognitive	Thinking Matters	C01 - Thinking Matters
F22	Pretrial Assessment	Pretrial Assessment	F22 - Pretrial Assessment
F23	Pretrial Supervision	Pretrial Supervision	F23 - Pretrial Supervision
--		0	-- - 0
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				-	Hourly wage = \$28.19 with an additional cost of employment of = \$9.30 for a total of (\$37.49). Cost of employment includes Medicare, Social Security, Medical/Dental/Vision Insurance, Life Insurance, Retirement, Unemployment, Workman's Comp, Vacation time, Sick time and a Post Employment Health	--	0	-- - 0
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<b>Totals</b>	72,100	5,879	-	77,979				

**Position 3**

Title:		Name of Individual:			
Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:	0.00		
Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
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<b>Totals</b>	-	-	-	-	-

**Position 4**

Title: \_\_\_\_\_ Name of Individual: \_\_\_\_\_

Number of Hours Worked Per Year.  
(Full Time is 2,080) \_\_\_\_\_ FTE Equivalent: \_\_\_\_\_ 0.00

Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
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<b>Totals</b>	-	-	-	-	

**Position 5**

Title: \_\_\_\_\_ Name of Individual: \_\_\_\_\_

Number of Hours Worked Per Year.  
(Full Time is 2,080) \_\_\_\_\_ FTE Equivalent: \_\_\_\_\_ 0.00

Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
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<b>Totals</b>	-	-	-	-	

**Position 6**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:		0.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code	CPS	Local/Other	Fee Revenue	Totals	
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<b>Totals</b>	-	-	-	-	

**Position 7**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:		0.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code	CPS	Local/Other	Fee Revenue	Totals	
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<b>Totals</b>	-	-	-	-

**Position 12**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:		0.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code	CPS	Local/Other	Fee Revenue	Totals	
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<b>Totals</b>	-	-	-	-	

**Position 13**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:		0.00
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Funding Sources & Cost Allocation					Duties and Terms of Reimbursement
Program Code	CPS	Local/Other	Fee Revenue	Totals	
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<b>Totals</b>	-	-	-	-	

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Totals	-	-	-	-

**Position 14**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:	0.00
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**Funding Sources & Cost Allocation**

Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
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Totals	-	-	-	-	

**Position 15**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:	0.00
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**Funding Sources & Cost Allocation**

Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
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Totals	-	-	-	-	

<b>Totals</b>	-	-	-	-	-

**Position 16**

Title:		Name of Individual:	
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Number of Hours Worked Per Year. (Full Time is 2,080)		FTE Equivalent:	0.00
--	--	-----------------	------

**Funding Sources & Cost Allocation**

Program Code	CPS	Local/Other	Fee Revenue	Totals	Duties and Terms of Reimbursement
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
<b>Totals</b>	-	-	-	-	

Salary & Wage Totals	152,200	8,126	-	160,326
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**Contractual Services**

**Contract 1**

Name of Provider:	Lapeer County Coummunity Mental Health
Services Provided:	For Lapeer, Huron and Sanilac County's Substance Abuse Program, Thinking Matters Program, IOP Program and Gender Specific (Women) Substance Abuse Program
Terms of Reimbursement:	Substance Abuse: Intake Assessments @ \$176 per participant, Group Sessions @ \$59 per participant per 1.5 hour groups and Exit Assessments @ \$176.00 per hour. Thinking Matters: 1 and a 1/2 hour sessions @ \$94 (sessions with less than 3 CPS funded participants will be billed \$30.00 for 1 and \$60 for 2) \$50 per participant for administrative intake. IOP: Intake Assessments @ \$176 per participant, Group Sessions @ \$118 for 3 hours, and Exit

Program Code	CPS	Local/Other	Fee Revenue	Totals
G18 - IOP	52,000			52,000
G18 - Substance Abuse	41,440			41,440
G18 - Gender Specific (Women) Substance Abuse	9,520			9,520
C01 - Thinking Matters	10,413			10,413
				-
				-
				-
				-
Sub - Total	113,373	-	-	113,373

**Contract 2**

Name of Provider:	List Psychological Services PLC
Services Provided:	For Tuscola and Huron County Substance Abuse Program and Thinking Matters Program, Gender Specific (Women) Substance Abuse Program
Terms of Reimbursement:	Substance Abuse: Intake Assessments @ \$176 per participant, Group Sessions @ \$59 per participant per 1.5 hour groups and Exit Assessments @ \$176.00 per hour. Thinking Matters: 1 and a 1/2 hour sessions @ \$94 (sessions with less than 3 CPS funded participants will be billed \$30.00 for 1 and \$60 for 2) \$50 per participant for administrative intake. Gender Specific (Women) Substance Abuse Program: Intake Assessments @ \$176 per

Program Code	CPS	Local/Other	Fee Revenue	Totals
G18 - Substance Abuse	41,440			41,440
C01 - Thinking Matters	10,413			10,413

G18 - Gender Specific (Women) Substance Abuse	1,904			1,904
				-
				-
				-
				-
Sub - Total	53,757	-	-	53,757

**Contract 3**

Name of Provider:	TRI-CAP
Services Provided:	Opiate / Meth Specific Program
Terms of Reimbursement:	Assessment @\$125, Individual Counseling @\$35, Group Session @\$35, Administration @ \$100 per Offender.

Funding Sources & Cost Allocation				
Program Code	CPS	Local/Other	Fee Revenue	Totals
G18 - Opiate / Meth Specific Program	60,750			60,750
				-
				-
				-
				-
				-
				-
Sub - Total	60,750	-	-	60,750

**Contract 4**

Name of Provider:	
Services Provided:	
Terms of Reimbursement:	

Funding Sources & Cost Allocation				
Program Code	CPS	Local/Other	Fee Revenue	Totals
				-
				-
				-
				-
				-
				-
				-
Sub - Total	-	-	-	-

**Contract 5**

Name of Provider:	
Services Provided:	
Terms of Reimbursement:	

Funding Sources & Cost Allocation				
Program Code	CPS	Local/Other	Fee Revenue	Totals
				-
				-
				-
				-
				-
				-
				-
Sub - Total	-	-	-	-

**Contract 6**

Name of Provider:	
Services Provided:	

Terms of Reimbursement:					
Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
Sub - Total	-	-	-	-	

**Contract 7**

Name of Provider:					
Services Provided:					
Terms of Reimbursement:					
Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
Sub - Total	-	-	-	-	

**Contract 8**

Name of Provider:					
Services Provided:					
Terms of Reimbursement:					
Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
Sub - Total	-	-	-	-	

**Contract 9**

Name of Provider:					
Services Provided:					
Terms of Reimbursement:					
Funding Sources & Cost Allocation					
Program Code	CPS	Local/Other	Fee Revenue	Totals	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
Sub - Total	-	-	-	-	

**Contract 10**

Name of Provider:	
Services Provided:	
Terms of Reimbursement:	

Funding Sources & Cost Allocation				
Program Code	CPS	Local/Other	Fee Revenue	Totals
				-
				-
				-
				-
				-
				-
				-
				-
				-
Sub - Total	-	-	-	-
<b>Total</b>	227,880	-	-	227,880

Equipment					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
Administration	2,000			2,000	Office Equipment
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
<b>Total</b>	2,000	-	-	2,000	

Supplies					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
Administration	2,000			2,000	Office Supplies
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
<b>Total</b>	2,000	-	-	2,000	

Travel					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
Administration	1,000			1,000	Mileage expense for Comm Corr Coordinator & Assistant Coordinator
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
<b>Total</b>	1,000	-	-	1,000	

Training					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
Administration	2,000			2,000	Training for Comm Corr Coordinator, Assistant Coordinator and others who are a part of TARCCAB
				-	
				-	
				-	
				-	
				-	
				-	
<b>Total</b>	2,000	-	-	2,000	

Board Expenses					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
Administration	650			650	Meals for TARCCAB meetings
				-	
<b>Total</b>	650	-	-	650	

Other					
Program Code	CPS	Local/Other	Fee Revenue	Totals	Description
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
				-	
<b>Total</b>	-	-	-	-	

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# Program Description

## Administration

**FY:** 2025

**CCAB:** THUMB AREA REGIONAL

Administration is defined as those activities and related costs that have been incurred for the overall executive and administrative functions of the local office or other expenses of a general nature that do not relate solely to the operation of a specific program as defined/approved within the local plan. They are costs, that by their nature, are administrative in support of the overall duties and functions of the local OCC. This category must also include its share of fringe benefits, costs, operations (utilities, office supplies, travel, etc.), and maintenance expenses and must be identified in the Budget Cost Descriptions.

**NOTE:**

- Staff time for completing Administration duties and responsibilities, including eligibility screening, must be billed for actual time worked. Duties billed to Administration cannot also be billed under individual program codes.
- A **SUPPLY** has a life expectancy of less than a year (paper, toner, folders, drug testing supplies, etc.) while **EQUIPMENT** has a life expectancy of more than a year (fax machine, PBT, computer).

1. Local/other contributions to Administrative functions per fiscal year: \$ 87,000.00 <i>*this amount must be reflected in your budget documents within the OCC Funding Application.</i>
2. How frequently are CCAB meetings held? 4 times a year; additional meetings are held, if needed. What is included on CCAB meeting agendas? Agendas include; approval of Quarterly Reports, financial reports, program utilization, jail information, old business, new business and other pertinent information as needed and the minutes from the previous meetings are also included.
3. Describe how expenditure reports are processed and verified then forwarded to OCC in Lansing: Invoices are sent to the Coordinator and Assistant Coordinator and from there another verification of eligibility is checked, enrollment into the program and availability of funding takes place. A local billing form is filled out along with a local excel spreadsheet to compile accurate expenditures prior to completing OCC's form. Once the OCC form is completed it is emailed to OCC and the Grant Coordinator.
4. When and how are utilization and expenditures monitored? Utilization and expenditures are monitored monthly (at a minimum) when those reports are completed. In the event that those numbers are higher or lower than expected they are then looked at weekly so that actions can be taken, as needed.
5. As a contractual requirement, how often does the CCAB manager meet with, visit, and evaluate contracted programs? Contractors are met with twice a year (at minimum) to ensure programs and files are being completed per grant requirements. Other meetings are held, as needed.
6. How often does the CCAB manager meet with program referral sources? (probation supervisors/agents, prosecutor, defense attorney, judges, etc.)? Four times a year and as





# Program Description

## Administration

<p>needed. Explain: The Judges from Lapeer County, Tuscola County, Huron County and Sanilac County who are tasked with sentencing offenders to PA511 programming attend the TARCCAB meetings, the respective Prosecutors and Probation Supervisors also attend the meetings. Other special meetings are held as needed to address specific concerns or new ideas. Community Corrections Staff communicates with Probation Agents on a daily basis.</p>
<p>7. How often is program utilization reviewed? Explain: Program utilization is reviewed every month when the data comes in from the service providers. If utilization is outside of projections it is looked at on a weekly basis so that either funding can be continued in the event of over utilization or problems can be solved if there is an under-utilization situation.</p>
<p>8. What actions are taken when programs are under or over-utilized? Programs that are under-utilized are evaluated to see what is causing the under-utilization as follows: Is there no longer a need for the program? Is there an entry criteria issue? Are there eligible probationers who are not being referred? Is there another issue? Once those answers are discovered, adjustments will be made, as needed. Programs that are over-utilized are evaluated as follows: Entrance criteria is checked to make sure it does not need to be adjusted. Probationers are double checked to make sure they meet the set criteria. Once those answers are detected, adjustments will be made, as needed.</p>
<p>9. Describe when and how the comprehensive corrections plan is developed: The comprehensive corrections plan is developed through the year as information is gathered from referral sources, MDOC, stakeholders and service providers. As the needs of the Region change, so does the plan. If and when a new need is identified, the Coordinator and Assistant Coordinator work with service providers to develop and/or modify existing programs to satisfy the new and changing needs of the Region.</p>
<p>10. Describe the involvement of other stakeholders or subcommittees in data analysis or comprehensive corrections plan/program development. Contracted providers and Probation Agents and Supervisors who have contact with offenders are some of the first to see changes in risk/needs such as drug of choice changes and/or increases in certain types of arrests. Their input helps to keep the comprehensive corrections plan up to date with the needs of the offenders.</p>
<p>11. What is your plan to provide orientation and to educate all stakeholders? Explain: Constant communication coupled with factual driven meetings will provide orientation and education to all stakeholders. Ensuring everyone who is a direct part of the process of someone being enrolled into PA511 programming has a working knowledge of the programs that are available as the path to enrollment is vital. Program description binders and cheat sheets explaining and detailing eligibility criteria are distributed.</p>

# TUSCOLA COUNTY BOARD OF COMMISSIONERS

125 W. Lincoln Street  
Suite 500  
Caro, MI 48723

Telephone: 989-672-3700  
Fax: 989-672-4011

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## 2024- RESOLUTION

### Fiscal Year 2025 Community Corrections Grant Application

**WHEREAS**, Tuscola County, as a member of the Thumb Area Regional Community Corrections with Lapeer and Sanilac Counties, recognizes the need to offer felony probationers with specific programming targeted at further advancing offender success rates and reducing repeat offender rates; and

**WHEREAS**, the Fiscal Year 2025 Community Corrections Grant Application, written on behalf of the Thumb Area Regional Community Corrections, will provide a funding source to incorporate such programming and administrative oversight in Tuscola County.

**THEREFORE, BE IT RESOLVED** that the Tuscola County Board of Commissioners hereby approves Tuscola County's participation in the Thumb Area Regional Community Corrections Fiscal Year 2025 Community Corrections Grant Application, for the period of 10/01/2024 through 9/30/2025.

**BE IT FURTHER RESOLVED**, that this resolution be spread upon the proceedings of the Tuscola County Board of Commissioners this 16<sup>th</sup> day of May 2024.

Date \_\_\_\_\_

\_\_\_\_\_  
*Kim Vaughan, Chairperson*  
*Tuscola County Board of Commissioners*

*I, Jodi Fetting, Tuscola County Clerk, do hereby certify that the foregoing is a true and complete copy of an agreement approved by the Board of Commissioners at a regular meeting on May 16, 2024.*

Date \_\_\_\_\_

\_\_\_\_\_  
*Jodi Fetting*  
*Tuscola County Clerk*

# MICHIGAN DEPARTMENT OF CORRECTIONS

*“Committed to Protect, Dedicated to Success”*



## Office of Community Corrections

Community Corrections Plan and Application  
Fiscal Year 2025

**CCAB Name: THUMB AREA REGIONAL**

Email the application to:

1. [MDOC-OCC@michigan.gov](mailto:MDOC-OCC@michigan.gov)
2. Your assigned Community Corrections Specialist

**DUE DATE: May 1, 2024**

<b>SECTION I: COMMUNITY CORRECTIONS ADVISORY BOARD INFORMATION</b>				
<b>Name of CCAB:</b> THUMB AREA REGIONAL			<b>Federal I.D. Number:</b> 386005780	
<b>A: GENERAL CONTACT INFORMATION:</b>				
	CCAB Manager	CCAB Manager's Direct Supervisor	CCAB Chairperson	Agency Serving as Fiduciary of Award & Contact Person
<b>Name:</b>	David Lee Stevens	CCAB Chairperson	Philip A. Fulks	Moses Sanzo
<b>Title:</b>	Coordinator			County Administrator
<b>Address:</b>	255 Clay Street Rm 83		505 Handley Street	255 Clay Street
<b>City:</b>	Lapeer		Imlay City	Lapeer
<b>State:</b>	Michigan		Michigan	Michigan
<b>Zip:</b>	48446		48444	48446
<b>Phone:</b>	810-245-4744		586-946-0375	810-667-0366
<b>Fax:</b>	N/A		N/A	N/A
<b>Email:</b>	dstevens@lapeercounty.org		philipfulks@gmail.com	msanzo@lapeercounty.org

Type of Community Corrections Board:	Regional Advisory Board
Counties/Cities Participating in the CCAB:	Lapeer County, Tuscola County, Sanilac County and Huron County
Date application was approved by the local CCAB:	April 24, 2024
Date application was approved by county board(s) of commissioners and/or city council:	Huron County May 9, 2024; Lapeer County May 9, 2024; Sanilac County May 7, 2024; Tuscola County May 30, 2024
Date application was submitted to OCC:	April 30 <sup>th</sup> , 2024

<b>B: CCAB MEMBERSHIP</b> <i>(please enter "vacant" for any vacant membership position)</i>		
Representing:	Name	Email
County Sheriff:	Paul Rich, Sanilac County Glen Skrent, Tuscola County	prich@sanilacounty.net ggs@tuscolacounty.org
Chief of Police:	David Mallett, Chief of Police - Metamora Township	dmallett@metamoratownship.com
Circuit Court Judge:	Gerald Prill, Huron County	herringd@co.huron.mi.us
District Court Judge:	Maureen Salayko David Herrington	msalayko@lapeercounty.org herringd@co.huron.mi.us
Probate Court Judge:	Justus Scott	jscott@lapeercounty.org
County Commissioner(s) <i>(One required for each member county):</i>	Bill Lutz, Tuscola County John Moody, Sanilac County Mike Meissner, Huron County Tom Kohlman, Lapeer County	blutz@tuscolacounty.org jmoody@sanilacounty.net mikemeissner@gmail.com tkohlman@lapeercounty.org
Service Area (Up to 3):	Jacqueline List, List Psychological Todd Anglebrandt, Lapeer County CMH SUD	jacquelinelist@listpsych.com tanglebrandt@lapeercmh.org
County Prosecutor:	John Miller, Lapeer County Mark Reene, Tuscola County	jmiller@lapeercounty.org mreene2011@gmail.com
Criminal Defense Attorney:	Philip Fulks	philipfulks@gmail.com
Business Community:	VACANT	
Communications Media:	VACANT	
Circuit/District Probation:	Michael Slater, Lapeer County/Sanilac County	slaterm@michigan.gov

	<b>Kimberly Reinert, Tuscola County/Huron County</b>	<b>reinertk@michigan.gov</b>
<b>City Councilperson</b> ( <i>Applies to City or City/County Regional CCABs only – one from each member City/County required</i> ):	<b>N/A</b>	<b>N/A</b>
<b>Workforce Development:</b>	<b>Jody Kerbyson, Michigan Works</b>	<b>jkerbyson@gstmiworks.org</b>
<ol style="list-style-type: none"> <li>1. Does your CCAB have Bylaws? Yes</li> <li>2. What steps does your CCAB take to orientate new CCAB members ensuring the understanding of their roles and responsibilities? <b>New CCAB members are given an overview of the PA511 Act to include: current funded programs, eligibility criteria, PCR, State Board Priorities, target population, evidence-based practices, etc. Once there is a general understanding of the before mentioned items, there can be further discussions on what is expected of them.</b></li> <li>3. What steps are your CCAB taking to fill vacant membership positions (enter N/A if you have no vacant positions)? <b>Communications are made with stakeholders and interested parties in attempt to fill vacancies. Vacancies are also brought up and discussed at CCAB meetings.</b></li> </ol>		

**SECTION II: DATA ANALYSES & COMPREHENSIVE CORRECTIONS PLAN**

**Introduction and Instructions for your Comprehensive Corrections Plan:**

Michigan Public Act 511, also known as the Community Corrections Act, was established in 1988 in an effort to improve the State’s prison commitment rates (PCR) through the development and utilization of evidence-based, community corrections programming that targets moderate to high risk/needs offenders. Counties and regions establishing a Community Corrections Advisory Board (CCAB) appoint member stakeholders as required by PA-511 to identify and target local criminogenic needs that impact prison commitments and recidivism. CCABs are obligated to abide by PA-511 and Michigan Office of Community Corrections (MOCC) requirements when receiving MOCC funding, including but not limited to data tracking and analysis, key performance measures, as well as minimum program eligibility and utilization requirements.

This Application serves as your CCAB’s Comprehensive Corrections Plan. To be considered for funding, it must include specific and detailed explanation as to how your plan will impact State Board Priorities, local prison commitment rates, recidivism, and local priorities/initiatives through identified key objectives. Strategies to obtain key objectives as well as performance measures must also be identified. For the purpose of this application, the following terms and definitions apply:

- **State Board Priority Populations** – CCABs requesting funding must target at least one of the following State Board Priority Populations:
  - Sentenced Felons assessed as having moderate to high risk/needs when using a State approved actuarial, objective validated risk and need assessment
  - Pretrial Population
- **Key Objectives** – CCABs requesting funding must identify local Key Objective(s) for each of the following applicable categories:
  - **Reduction of Statewide Overall PCR** – *This is required for all CCABs requesting funding for any services/programming that targets sentenced felons.* This may include local objectives that impact Overall PCR, Group 2 Straddle PCR, OUIL 3<sup>rd</sup> PCR, PVT or PVNS Recidivism, or other categories that impact the State’s Overall PCR. *You must identify at least one local Key Objective if your Comprehensive Corrections Plan targets sentenced felons.*
  - **Increase of Statewide Appearance and Public Safety Rates for Pretrial Defendants** – *These are required for all CCABs requesting funding for any pretrial services and/or programming that targets*

*pretrial defendants. –You must identify both local Appearance and Public Safety Rate Key Objectives if your Comprehensive Corrections Plan targets pretrial defendants.*

Your CCAB may identify other objectives in addition to these required objectives.

- **Supportive Strategies** – Proposed OCC funded programming and/or services, identified by CCIS Code and Local Program Name, that are intended to support the objectives identified.
- **Key Performance Measures** – Identified in each proposed program description, these are the specific methods your CCAB will utilize to measure outcomes of programming and their impact on State Board Priorities.

### **Felony Data Analyses:**

OCC will provide CCABs with relevant felony dispositional and recidivism data to complete the application. CCABs must analyze this data along with local CCIS data (reports run locally from COMPAS Case Manager) and develop key objectives and supportive strategies that will help attain local goals and support State Board Priorities.

A thorough analysis of the data should include:

- Overall PCRs, rates within sentencing guideline ranges, PCRs within Group 1 and Group 2 offense categories, status at time of offense and recidivism of probation violators, both new sentence and technical.
- Reference to changes in PCRs compared to prior year
- Review your past OCC funding proposals for ideas
- CCAB stakeholder changes
- New judicial, probation, or CCAB staff or other personnel issues that impact referrals, screenings, or programming
- Service provider changes or issues
- Trends in local criminality (example: increase in drug related offenses, decrease in probation violations, etc.)
- Development or changes in local court services or programming (example: new Specialty Court programming, changes to court programming eligibility, etc.)

**Your data analyses form the basis of your objectives and strategies. A weak link between them may result in denial of, or conditional revisions to, your Comprehensive Corrections Plan. Therefore, it is important to demonstrate a solid connection between your data, objectives, and supportive strategies.**

Your CCAB must then determine its proposed PCR category/categories based on this analysis, with consideration given to the average of the last 3 years. Your CCAB must then identify the strategies that will impact its PCR category/categories. **All strategies that you are requesting funding for must also be listed on the Budget Cost Description and have a completed Program Description.** If you request funding for a program or service that is not identified as a strategy impacting any objective, it will not be considered for funding.

**Example #1:** State Board Priority Target Population: Sentenced Felons.  
Objective: To reduce the County's Overall Prison Commitment Rate (PCR) to 16% or less.  
Supportive Strategy: C01 Thinking Matters, G18 Intensive Outpatient Group, & B15 Employment Skills.

**Example #2:** State Board Priority Target Population: Pretrial Population  
Objective: To increase the County's current Appearance Rate from 87% to 90%.  
Supportive Strategy: F22 PRAXIS and F23 Pretrial Supervision Services.

**Example #3:** State Board Priority Target Population: Pretrial Population  
Objective: To increase the County's current Public Safety Rate from 80% to 89%.  
Supportive Strategy: F22 PRAXIS and F23 Pretrial Supervision Services.

## A: FELONY DATA ANALYSES

1. Using felony dispositional data supplied by MOCC\*, please fill in the rates (%) and number of dispositions for the **previous two years** in the two charts below.

**\*Please note: Due to MDOC's transition from OMNI to COMS, full Fiscal Year 2023 data could not be obtained. Therefore, you are directed to use the partial year OMNI Felony Dispositional Data Reports for both FY 2022 and FY 2023 provided by MOCC (date ranges of October 1 – July 31). \*\*State Rates identified for both FY 2022 and FY 2023 reflect partial year data (date ranges of October 1 – July 31).**

2. Does the following data exclude felony dispositions with prisoner status at time of the offense?  Yes  No

<b>**FY 2022 State PCR:</b>	<b>18.6%</b>	<b>Group 2 Rate:</b>	<b>12.7%</b>	<b>Straddle Cell Rate:</b>	<b>21.3%</b>	<b>Group 2 Straddle Rate:</b>	<b>20.5%</b>
Overall PCR:	<b>17.3% - 121</b> prison dispositions out of <b>701</b> felony dispositions						
Group 1:	<b>24.5% - 76</b> prison dispositions out of <b>309</b> felony dispositions						
Group 2:	<b>11.4% - 45</b> prison dispositions out of <b>392</b> felony dispositions						
Straddle PCR:	<b>19.0% - 31</b> prison dispositions out of <b>163</b> felony dispositions						
Group 1:	<b>14.5% - 10</b> prison dispositions out of <b>69</b> felony dispositions						
Group 2:	<b>22.3% - 21</b> prison dispositions out of <b>94</b> felony dispositions						
<b>**FY 2023 State PCR:</b>	<b>19.4%</b>	<b>Group 2 Rate:</b>	<b>13.2%</b>	<b>Straddle Cell Rate:</b>	<b>21.0%</b>	<b>Group 2 Straddle Rate:</b>	<b>20.5%</b>
Overall PCR:	<b>17.2% - 130</b> prison dispositions out of <b>754</b> felony dispositions						
Group 1:	<b>25.4% - 90</b> prison dispositions out of <b>354</b> felony dispositions						
Group 2:	<b>10.0% - 40</b> prison dispositions out of <b>400</b> felony dispositions						
Straddle PCR:	<b>16.2% - 27</b> prison dispositions out of <b>166</b> felony dispositions						
Group 1:	<b>17.8% - 13</b> prison dispositions out of <b>73</b> felony dispositions						
Group 2:	<b>15.1% - 14</b> prison dispositions out of <b>93</b> felony dispositions						

### 3. ANALYSIS

a. For returning applicants:

Did you meet all your Key Objectives for the previous two fiscal years?  Yes  No

b. For all applicants:

i. Please provide information/local data analysis to explain any changes in PCRs and dispositions from the previous two fiscal years: **Felony dispositions for FY 2023 are up by 53 (7.5%) dispositions while the overall PCR only went up by 9 (7.4%) prison dispositions. While the felony dispositions are on the rise, the data shows the Region is stable regarding the PCR. The increase in felony dispositions can be attributed to all four Courts in the Region processing the COVID caused back log as well as returning to a more normal processing of dispositions on a daily basis. Although the Key Objective to reduce the Region's Overall Prison Commitment Rate (PCR) to 17.0% or less was not met, it was only missed by 2 dispositions; and the overall PCR did go down by 0.1% so the Region is going in the right direction.**

ii. Are you requesting programming for the Pretrial Population?  Yes  No **If yes:**

- What was your FY 2023 Public Safety Rate? LAPEER COUNTY 85%
- What was your FY 2023 Appearance Rate? LAPEER COUNTY 60%

- iii. Are you requesting funding for specific populations (examples: OUIL-3rds, delayed/deferred sentences, prison diversion, etc.)?  **Yes**  **No** **If yes, please provide supportive data and analyses for these populations, including any additional pertinent information necessary to establish trends: **The Intensive Outpatient (IOP) Program provides programming for those offenders sentenced on a MCL 257.625 - 3rd Offense charge - Operating a motor vehicle under the influence of intoxicating liquor or a controlled substance, or both, 3rd or subsequent offense. This program is also available to those under pretrial supervision and that meet the needed criteria. As a Region, those sentenced on an OUIL-3<sup>rd</sup> is on the rise increasing from 64 for the reporting period of FY 2022 to 88 for the reporting period of FY 2023. Tuscola County had the biggest increase from 20 to 46, followed by Lapeer County increasing from 24 to 29, followed by Huron County increasing from 7 to 11. Sanilac County actually was the only County in the Region that had a decline in OUIL-3<sup>rd</sup> dispositions decreasing from 9 to 6. This program provides specific treatment for this population and covers topics not present in other SUD programs. Historically, those who complete this program receive a reduced jail sentence. Opioid and Meth continue to plague the Region. Although there is currently no way to track this data other than looking at enrollments into the program, this program offers residential treatment far beyond anything else available by other providers. Enrollments for this program are on the rise from 12 in FY 2022 to 15 in FY 2023 (for the reporting period).****

## B: FELONY RECIDIVISM ANALYSIS

Using felony recidivism data supplied by MOCC\* (Report #3), please fill in the following table to report the number of Probation Violators ***that resulted in a prison disposition*** for each listed category. Regional CCABs should list the Probation Violation data for each County separately and provide a total, regional rate at the end of each row.

***\*Please note: Due to MDOC's transition from OMNI to COMS, full Fiscal Year 2023 data could not be obtained. Therefore, you are directed to use the partial year OMNI Felony Dispositional Data Report #3 provided by MOCC (date ranges of October 1 – July 31).***

*FY 2023 Recidivism Rates							
County Name	HURON	LAPEER	SANILAC	TUSCOLA			Totals for Region:
<b>*FY 2023 Probation Violation - New Sentence to Prison</b>							
Total	6	6	7	7			26
<b>*FY 2023 Probation Violation – Technical to Prison</b>							
Total	1	1	3	7			12

### 1. ANALYSIS

- a. ***For all applicants:*** Please provide information/local data analysis to explain any changes in Probation Violator data, ***including prison and non-prison dispositions:*** **For the Region, the Probation Violators sentenced to prison with a new sentence increased from 15 in FY2022 to 26 in FY2023 and Probation Violators with a technical sent to prison for the Region remained at 12. Overall, the Region saw an increase of 9 Probation Violators going to prison for FY2023 (for the reporting period). Non-prison dispositions increased from 571 dispositions in FY2022 to 623 dispositions in FY2023 for the Region. Non-prison dispositions for PV New were 47 for FY2022 and 52 For FY2023. Non-prison dispositions for PV Technical were 46 for FY2022 and 60 for FY2023. These increases are consistent with the increased felony dispositions for FY2023.**



<b>C: IMPACTING STATE BOARD PRIORITIES</b>	
<b>❖ TARGET POPULATIONS, KEY OBJECTIVES, AND STRATEGIES</b>	
<b>NOTE:</b>	
<ul style="list-style-type: none"> <li>• Target Populations include Sentenced Felons and Pretrial Population.</li> <li>• CCABs applying for funding targeting Sentenced Felons <u>must have at least one</u> Sentenced Felons Key Objective.</li> <li>• CCABs applying for funding targeting Pretrial Population <u>must have both</u> Pretrial Population Key Objectives (Appearance Rate and Public Safety Rate).</li> <li>• CCABs may identify additional Key Objectives that support proposed programming.</li> <li>• Key Objectives should be measurable and provide sufficient detail so progress can be monitored.</li> <li>• Strategies are the local programs that will be used to impact your Key Objectives.</li> <li>• Only proposed programs that impact at least one Key Objective will be considered for funding.</li> </ul>	
<b>1. Key Objective #1 is intended to impact Sentenced Felons</b> <b>Please state the Objective: To reduce the Region's Overall Prison Commitment Rate (PCR) to 17.0% or less.</b>	
<b>List</b> OCC Programs in support of Objective #1 (include CCIS Code and Local Name of Program <i>as they appear on the program descriptions</i> ):	
<b>C01 Thinking Matters Program, G18 Substance Abuse Program, G18 IOP, G18 Opiate/Meth Specific Program, Z00 Gender Specific Substance Abuse Program, F22 Pretrial Assessment and F23 Pretrial Supervision Services.</b>	
<b>List</b> Non-OCC funded Programs in support of Objective #1:	
<b>GED programs, Michigan Works, Lapeer County Community Mental Health (several programs), Local Heroin Support Groups (FAN), Hope Not Handcuffs, MSP Angels Program, Literacy Center, Alcohol Highway Safety Education Class, Anger Management Group, Repeat Offenders Group, Driver's License Reinstatement, United Way and Local Veteran's Affairs Department, Specialty Courts (mental health &amp; sobriety).</b>	
<b>2. Key Objective #2 is intended to impact Pretrial Population</b> <b>Please state the Objective: To increase Lapeer County's Appearance Rate from 60% to 70% or higher.</b>	
<b>List</b> OCC Programs in support of Objective #2 (include CCIS Code and Local Name of Program <i>as they appear on the program descriptions</i> ):	
<b>F22 Pretrial Assessment and F23 Pretrial Supervision Services.</b>	
<b>List</b> Non-OCC funded Programs in support of Objective #2:	
<b>GED programs, Michigan Works, Lapeer County Community Mental Health (several programs), Local Heroin Support Groups (FAN), Hope Not Handcuffs, MSP Angels Program, Literacy Center, Alcohol Highway Safety Education Class, Anger Management Group, Repeat Offenders Group, Driver's License Reinstatement, United Way and Local Veteran's Affairs Department, Specialty Courts (mental health &amp; sobriety).</b>	
<b>3. Key Objective #3 is intended to impact Pretrial Population</b> <b>Please state the Objective: To increase Lapeer County's Public Safety Rate to 80% or higher.</b>	
<b>List</b> OCC Programs in support of Objective #3 (include CCIS Code and Local Name of Program <i>as they appear on the program descriptions</i> ):	
<b>F22 Pretrial Assessment and F23 Pretrial Supervision Services.</b>	
<b>List</b> Non-OCC funded Programs in support of Objective #3:	
<b>GED programs, Michigan Works, Lapeer County Community Mental Health (several programs), Local Heroin Support Groups (FAN), Hope Not Handcuffs, MSP Angels Program, Literacy Center, Alcohol Highway Safety Education Class, Anger Management Group, Repeat Offenders Group, Driver's License Reinstatement, United Way and Local Veteran's Affairs Department, Specialty Courts (mental health &amp; sobriety).</b>	
<b>4. Key Objective #4 is intended to impact Choose an item.</b> <b>Please state the Objective: N/A</b>	
<b>List</b> OCC Programs in support of Objective #4 (include CCIS Code and Local Name of Program <i>as they appear on the program descriptions</i> ):	
<b>N/A</b>	
<b>List</b> Non-OCC funded Programs in support of Objective #4:	
<b>N/A</b>	

## D: COMPAS CRIMINOGENIC NEEDS PROFILE

1. Please list the Top 3 needs scales (medium/probable and high/highly probable combined) as identified within the COMPAS Criminogenic Needs and Risk Profile for **all probationers** provided by OCC. Additionally, identify both the local and proposed OCC strategies that will impact the identified needs scales. **OCC funded strategies must be identified by CCIS Code and Local Name of Program as it appears on the program descriptions:** The number one Criminogenic Need for the Region and each of the four Counties is Substance Abuse. The second Criminogenic Need for the Region and the second for Lapeer and Sanilac County is Criminal Personality. The third Criminogenic Need for the region is Family Criminality and also, the third for Tuscola and Lapeer County and the second for Huron County. In summary, all four Counties share the same top three Criminogenic Needs, although in a different order; except Sanilac County, which identifies Social Isolation as it's third Criminogenic Need. The following OCC funded strategies impact the Region and the needs of the Counties: C01 Thinking Matters Program, G18 Substance Abuse Program, G18 IOP, G18 Opiate/Meth Specific Program, Z00 Gender Specific Substance Abuse Program, F22 Pretrial Assessment and F23 Pretrial Supervision Services. The following non-funded OCC programs impact the Regions and the needs of the Counties: GED programs, Michigan Works, Lapeer County Community Mental Health (several programs), Local Heroin Support Groups (FAN), Hope Not Handcuffs, MSP Angels Program, Literacy Center, Alcohol Highway Safety Education Class, Anger Management Group, Repeat Offenders Group, Driver's License Reinstatement, United Way and Local Veteran's Affairs Department, Specialty Courts (mental health & sobriety).

## E: LOCAL PRACTICES TO ADDRESS PERSONS WITH SUBSTANCE USE DISORDER(S)

1. How do defendants and offenders get screened for substance use services in your area (regardless of funding source)? **Offenders are screened by the Probation Agents COMPAS risk/needs assessments and Community Corrections Staff also screens offenders. Offenders are also screened at the time of the Pretrial Assessment.**
2. How do defendants and offenders get referred for a substance use assessment and subsequent appropriate ASAM Level of Care in your area (regardless of funding source)? **Referrals are made by Probation Agents, Community Corrections and Pretrial Staff.**
3. Are there any barriers or gaps in service to obtaining an assessment and treatment that your CCAB is requesting OCC funding to fill? **Yes** If so, please describe in detail: **The G18 IOP and G18 Opiate/Meth Specific Program provide a level of care in the community that is otherwise not available by any other local program. The Substance Abuse, Thinking Matters and Gender Specific (Women) Substance Abuse Programs offer programming to those in the jails where PIHP treatment programs are not funded. All of those programs alleviate the issue of unaffordable copays for those offenders with insurance and high copays. Also, in a rural area travel can become an issue, therefore, services provided while being lodged in the jail, as well as locally, is very beneficial in the Region.**
4. What non-PA 511 funded services are available in your area? Be sure to include treatment court services. **GED programs, Michigan Works, Lapeer County Community Mental Health (several programs), Local Heroin Support Groups (FAN), Hope Not Handcuffs, MSP Angels Program, Literacy Center, Alcohol Highway Safety Education Class, Anger Management Group, Repeat Offenders Group, Driver's License Reinstatement, United Way and Local Veteran's Affairs Department, Specialty Courts (mental health, drug & sobriety). Also, available in the Region is Sobriety, Drug and Mental Health Courts.**

## F: COMPREHENSIVE CORRECTIONS PLAN SUMMARY

1. Please explain how the Comprehensive Corrections Plan, in coordination with the local practices, will impact the State Board Priorities, and ultimately offender success: TARCCAB Coordinator and Assistant Coordinator and the Probation Agents from all four Counties of the Region will ensure that all offenders are enrolled in the correct programs according to their Criminogenic Needs. This includes giving offenders information on locally available programs not funded by Community Corrections. Ultimately, this will give offenders the best chance

at becoming a contributing part of society and the highest positive impact on State Board Priorities by lowering the Region's Overall Prison Commitment Rate (PCR) thus, help to lower the State's Overall PCR.

2. What steps will you take if you find that you are not meeting your objectives, or your strategies are not being implemented as planned? **The first step is to identify the reason why the objective was not met and then figure out if it was a strategy implementation issue or the wrong strategy. If one of those are the cause, internal fixes can be applied to the issue. If the reason for an objective not being met is external, such as an increase in felony dispositions driving up the PCR, then meetings need to take place to analyze the cause and figure out what the solutions may be. For instance, Vocational/Education is no longer one of the higher risk needs of the Region, therefore, the Employability Skills Program has been removed from the comprehensive plan.**
3. Program eligibility overrides may be requested in writing to the assigned OCC Specialist. Please document any additional override procedures your CCAB has approved. **Sex Offenders do not score correctly when the COMPAS risk/needs is utilized, therefore, the TARCCAB Coordinator or Assistant Coordinator may override eligibility when there is a documented need for a specific program. Other offenders who are found to be ineligible via COMPAS, yet their actions or situation can show a documented need for available programming, the TARCCAB Coordinator or Assistant Coordinator may override eligibility when documented. The ability to override shall not be used to boost new enrollments, its purpose is only to ensure offenders are referred and enrolled into the needed program(s).**



# Program Description

## Administration

FY: 2025

CCAB: THUMB AREA REGIONAL

Administration is defined as those activities and related costs that have been incurred for the overall executive and administrative functions of the local office or other expenses of a general nature that do not relate solely to the operation of a specific program as defined/approved within the local plan. They are costs, that by their nature, are administrative in support of the overall duties and functions of the local OCC. This category must also include its share of fringe benefits, costs, operations (utilities, office supplies, travel, etc.), and maintenance expenses and must be identified in the Budget Cost Descriptions.

**NOTE:**

- Staff time for completing Administration duties and responsibilities, including eligibility screening, must be billed for actual time worked. Duties billed to Administration cannot also be billed under individual program codes.
- A **SUPPLY** has a life expectancy of less than a year (paper, toner, folders, drug testing supplies, etc.) while **EQUIPMENT** has a life expectancy of more than a year (fax machine, PBT, computer).

1. Local/other contributions to Administrative functions per fiscal year: \$ 87,000.00 <i>*this amount must be reflected in your budget documents within the OCC Funding Application.</i>
2. How frequently are CCAB meetings held? 4 times a year; additional meetings are held, if needed. What is included on CCAB meeting agendas? Agendas include; approval of Quarterly Reports, financial reports, program utilization, jail information, old business, new business and other pertinent information as needed and the minutes from the previous meetings are also included.
3. Describe how expenditure reports are processed and verified then forwarded to OCC in Lansing: Invoices are sent to the Coordinator and Assistant Coordinator and from there another verification of eligibility is checked, enrollment into the program and availability of funding takes place. A local billing form is filled out along with a local excel spreadsheet to compile accurate expenditures prior to completing OCC's form. Once the OCC form is completed it is emailed to OCC and the Grant Coordinator.
4. When and how are utilization and expenditures monitored? Utilization and expenditures are monitored monthly (at a minimum) when those reports are completed. In the event that those numbers are higher or lower than expected they are then looked at weekly so that actions can be taken, as needed.
5. As a contractual requirement, how often does the CCAB manager meet with, visit, and evaluate contracted programs? Contractors are met with twice a year (at minimum) to ensure programs and files are being completed per grant requirements. Other meetings are held, as needed.
6. How often does the CCAB manager meet with program referral sources? (probation supervisors/agents, prosecutor, defense attorney, judges, etc.)? Four times a year and as



# Program Description

## Administration

<p>needed. Explain: The Judges from Lapeer County, Tuscola County, Huron County and Sanilac County who are tasked with sentencing offenders to PA511 programming attend the TARCCAB meetings, the respective Prosecutors and Probation Supervisors also attend the meetings. Other special meetings are held as needed to address specific concerns or new ideas. Community Corrections Staff communicates with Probation Agents on a daily basis.</p>
<p>7. How often is program utilization reviewed? Explain: Program utilization is reviewed every month when the data comes in from the service providers. If utilization is outside of projections it is looked at on a weekly basis so that either funding can be continued in the event of over utilization or problems can be solved if there is an under-utilization situation.</p>
<p>8. What actions are taken when programs are under or over-utilized? Programs that are under-utilized are evaluated to see what is causing the under-utilization as follows: Is there no longer a need for the program? Is there an entry criteria issue? Are there eligible probationers who are not being referred? Is there another issue? Once those answers are discovered, adjustments will be made, as needed. Programs that are over-utilized are evaluated as follows: Entrance criteria is checked to make sure it does not need to be adjusted. Probationers are double checked to make sure they meet the set criteria. Once those answers are detected, adjustments will be made, as needed.</p>
<p>9. Describe when and how the comprehensive corrections plan is developed: The comprehensive corrections plan is developed through the year as information is gathered from referral sources, MDOC, stakeholders and service providers. As the needs of the Region change, so does the plan. If and when a new need is identified, the Coordinator and Assistant Coordinator work with service providers to develop and/or modify existing programs to satisfy the new and changing needs of the Region.</p>
<p>10. Describe the involvement of other stakeholders or subcommittees in data analysis or comprehensive corrections plan/program development. Contracted providers and Probation Agents and Supervisors who have contact with offenders are some of the first to see changes in risk/needs such as drug of choice changes and/or increases in certain types of arrests. Their input helps to keep the comprehensive corrections plan up to date with the needs of the offenders.</p>
<p>11. What is your plan to provide orientation and to educate all stakeholders? Explain: Constant communication coupled with factual driven meetings will provide orientation and education to all stakeholders. Ensuring everyone who is a direct part of the process of someone being enrolled into PA511 programming has a working knowledge of the programs that are available as the path to enrollment is vital. Program description binders and cheat sheets explaining and detailing eligibility criteria are distributed.</p>



# Program Description

## Outpatient Treatment Programming

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: IOP	
Service Provider: Lapeer County Community Mental Health (CMH)	
CCIS Service Type: G18 – Outpatient Treatment Services	
Total Projected New Enrollment: 24	
For Regional CCABs, total projected new enrollment by member county: Lapeer County 18 (15 Men/3 Women), Sanilac County 6 (4 Men/2 Women)	
Projected Length of Stay in Days: 45	
Program Location (select all that apply): Jail: <input type="checkbox"/> Residential: <input type="checkbox"/> Community: <input checked="" type="checkbox"/>	
Program Status: Continuation	
If modification, describe here:	

**GROUP/CLASS DELIVERED PROGRAMMING –**

- Groups must be separate for both male and female populations.
- Documentation of assessment for eligibility (with appropriate release of information) must be available during annual file review.
- Use of individual sessions must be described.
- Funding for G18 programming is used to fill the CCAB identified gaps in services.
- If this is an Intensive Outpatient Treatment program, you must use SAMHSA guidelines.

**ANSWER ALL QUESTIONS USING “NA” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM.**

<b>1. Based on your objective(s), what is your target population?</b>
<input checked="" type="checkbox"/> Sentenced Felons <input checked="" type="checkbox"/> Pretrial <input type="checkbox"/> Other: <b>Pretrial and/or sentenced on a MCL 257.625 - 3rd Offense charge - Operating a motor vehicle under the influence of intoxicating liquor or a controlled substance, or both, 3rd or subsequent offense. A current Substance Abuse Assessment completed by a licensed clinician must confirm need for services.</b>

<b>2. Describe the program:</b>												
<p>a. The COMPAS assessment is considered a screening tool for outpatient treatment and DOES NOT replace the required actuarial assessment.</p> <p>P.A. 511 states eligibility for programming <b>must include moderate to high risk.</b> Please select which needs the program will impact for your target population(s).</p> <p><b>Sentenced Felons:</b> You must identify the number of scales required for referral here: 1</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><input type="checkbox"/> Vocational/Education</td> <td style="width: 33%;"><input type="checkbox"/> Social Environment</td> <td style="width: 33%;"><input type="checkbox"/> Criminal Association</td> </tr> <tr> <td><input checked="" type="checkbox"/> Substance Abuse</td> <td><input type="checkbox"/> Residential Instability</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Cognitive Behavioral</td> <td><input type="checkbox"/> Family Criminality</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Criminal Personality</td> <td><input type="checkbox"/> Social Isolation</td> <td></td> </tr> </table>	<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association	<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability		<input type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality		<input type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation	
<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association										
<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability											
<input type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality											
<input type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation											



# Program Description

## Outpatient Treatment Programming

<input type="checkbox"/> Leisure & Recreation	<input type="checkbox"/> Criminal Opportunity
<p><b>Gender Responsive Scales:</b></p> <input type="checkbox"/> Experiences of Abuse as an Adult <input type="checkbox"/> Experiences of Abuse as a Child <input type="checkbox"/> Relationship Dysfunction <input type="checkbox"/> Parental Stress <p><input checked="" type="checkbox"/> <b>Felony Probation Violators, regardless of COMPAS Assessment Score</b></p> <p><input type="checkbox"/> <b>Pretrial Defendants – list referral criteria here:</b></p>	
<p>b. Assessment is the foundation of evidence-based practices. Enrollments in treatment programs should be based upon assessed needs by a licensed or credentialed professional. Please describe your assessment practices below:</p>	
<p style="padding-left: 40px;">i. What assessment is used, identify the tool: <b>Assessment is a comprehensive biopsychosocial history that utilizes several screening tools; CAGE-AID, Kessler, and ASAM. A COMPAS Risk/Needs Assessment is completed by Circuit Court Probation for new sentences.</b></p>	
<p style="padding-left: 40px;">ii. Who completes the assessment? <b>Lapeer County Community Mental Health</b></p>	
<p style="padding-left: 40px;">iii. Does the assessment result in a recommended level of treatment per American Society of Addiction Medicine (ASAM) criteria? <b>YES</b></p>	
<p>c. Identify who is responsible for confirming eligibility and describe the process. <b>Community Corrections Staff screens all sentenced offenders for eligibility criteria prior to an offender being enrolled into the program and the contracted service provider also completes their assessment prior to enrollment, as well. Ultimately, the Community Corrections Coordinator is responsible for making sure the process is carried out as designed.</b></p>	
<p>d. Describe the program design:</p>	
<p style="padding-left: 40px;">i. Name of curriculum or treatment model: <b>The Matrix Model, Intensive Alcohol &amp; Drug Treatment Program by Hazelden.</b></p>	
<p style="padding-left: 40px;">ii. Identify what skills are addressed within the treatment program:</p>	
<p style="padding-left: 40px;">iii. <b>Week 1:</b></p>	
<p style="padding-left: 40px;">iv. <b>Session #1 Orientation</b></p>	
<p style="padding-left: 40px;">v. <b>Session #2 (Family session) Helping Checklist for Family Members</b></p>	
<p style="padding-left: 40px;">vi. <b>Session #3 Alcohol, Other Drugs</b></p>	
<p style="padding-left: 40px;">vii. <b>Week 2:</b></p>	
<p style="padding-left: 40px;">viii. <b>Session #1 Recovery Checklist/Looking at Fears</b></p>	
<p style="padding-left: 40px;">ix. <b>Session #2 Dreams (Alcohol and Other Drugs)</b></p>	
<p style="padding-left: 40px;">x. <b>Session #3 Relapse Prevention</b></p>	
<p style="padding-left: 40px;">xi. <b>Week 3:</b></p>	
<p style="padding-left: 40px;">xii. <b>Session #1 Safety Plan/Risk Factors</b></p>	
<p style="padding-left: 40px;">xiii. <b>Session #2 (Family Session) 2nd Checklist for Family Members</b></p>	
<p style="padding-left: 40px;">xiv. <b>Session #3 Emotions and Recovery</b></p>	
<p style="padding-left: 40px;">xv. <b>Week 4:</b></p>	



# Program Description

## Outpatient Treatment Programming

	<p>xvi. <b>Session #1 Setting Goals/Post Treatment Evaluation/Continuing Care Plan</b></p> <p>xvii. <b>Session #2 Relapse Analysis</b></p> <p>xviii. <b>Session #3 (Family Session) Assuming my role in the family</b></p> <p>xix. <b>Week 5:</b></p> <p>xx. <b>Session #1 Identifying Internal and External Triggers</b></p> <p>xxi. <b>Session #2 Avoiding Relapse Drift/Relapse Prevention</b></p> <p>xxii. <b>Session #3 (Adjustment topic) group to pick topic #1-18</b></p>
	xxiii. Is the group open or closed? <b>Closed</b>
	xxiv. What is the minimum/maximum number of participants per group, as identified in the curriculum? <b>3 minimum / 8 maximum</b>
	xxv. How many sessions does this group curriculum provide? <b>15</b>
	xxvi. Minimum number of group sessions attended for successful completion: <b>7</b>
	xxvii. If the group occurs in various locations, (jail/residential/community) identify how participants transition between them: <b>N/A</b>
	xxviii. If individual sessions are part of the program and billed separately, how many individual sessions are anticipated per participant? <b>2</b>
	xxix. On what basis would individual sessions be used? <b>Intakes and exit interviews.</b>
e.	Identify the license and/or credentials held by your service provider qualifying him/her to provide this service: <b>Minimum of CADC (Certified Alcohol and Drug Counselors) or equivalent/development plan through the State of Michigan.</b>
f.	How are delivered services and individual progress and participation documented by the service provider and provided to the probation agents and/or referral source? (i.e., progress notes, case notes and/or group notes) <b>The service provider maintains sign-in sheets to document attendance/participation for each session. The service provider also maintains a file on each offender that contains progress notes and pre and post-test results. The service provider provides monthly progress reports (enrollment, successful or unsuccessful completions) to the Probation Department, as well as the Community Corrections Staff. Significant/negative incidents are reported immediately.</b>
g.	Review your answers above. Summarize other aspects of the program not specifically identified above that you feel are critical to understanding this program: <b>This program offers a level of care not provided or covered by any PIHP funded program.</b>
3.	Evaluation is part of evidence-based principles which you <b>must</b> identify in section (a). You are <b>required</b> to develop <b>at least one key performance measure</b> for this program in section (b). Be sure to include the data source, how its tracked and measured. <b>NOTE:</b> Successful completion of programming, if listed as the only key performance measure, is not sufficient.
a.	<b>Describe how this program meets each of the following Evidence Based Principles:</b>
1.	<b>Assess Actuarial Risk/Needs</b> - Targeting moderate to high-risk offenders with probable to highly probable needs in the substance abuse category using assessment completed by credentialed clinician provides diagnosis and recommendations for treatment.





# Program Description

## Outpatient Treatment Programming

2. **Enhance Intrinsic Motivation** - Curriculum is designed to allow participants to work at their own pace, allowing for a person-centered approach.
  3. **Target Interventions (minimum of 1 required; indicate all that apply)**
    - a. **Risk Principle: Prioritize supervision and treatment resources for higher risk offenders** -Program is designed for higher risk offenders.
    - b. **Need Principle: Target interventions to criminogenic needs** -Curriculum targets moderate to high-risk substance abuse and cognitive criminogenic responsive needs.
    - c. **Responsivity Principle: Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs** -The Curriculum is designed to be delivered so offenders with different learning styles are accommodated as well as different motivation levels, cultures and the groups are gender specific.
    - d. **Dosage: Structure 40-70% of high-risk offenders' time for 3-9 months** -N/A
    - e. **Treatment Principle: Integrate treatment into the full sentence/sanction requirements** -Structured sentencing that may include jail and other community programming, treatment and sanctions.
  4. **Skill Train with Directed Practice** – Curriculum facilitated by credentialed clinicians with appropriate credentials utilizes cognitive behavioral techniques and is designed to encourage willful participation through group setting, role play and homework.
  5. **Increase Positive Reinforcement** - Incentives are provided for each participant including a possible reduction in jail days upon completion of programming.
  6. **Engage Ongoing Support in Natural Communities** - Utilizes participant's natural resources and makes referrals to relevant/helpful community-based supports and programming when appropriate.
  7. **Measure Relevant Processes/Practices** - Captures statistical data regarding aspects of group participation and completion, including pre and post-tests.
  8. **Provide Measurement Feedback** - Shares data regarding participation/program success and effectiveness with stakeholders.
- b. **Program Key Performance Measure** - 70% of successfully completed participants will not be re-arrested within the respective county, tracking at 6 and 12 month intervals.
- Data Element - JIS, JDW and BIRs
- Tracking Source -
1. Who is tracking the Data Element? The Coordinator and Assistant Coordinator
  2. How is it being tracked? By searching the data elements
  3. At what frequency is it being tracked? Quarterly
- Additional Program Key Performance Measure -
- Data Element -
- Tracking Source -



# Program Description

## Outpatient Treatment Programming

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

### Additional Program Key Performance Measure -

#### Data Element -

#### Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

### Additional Program Key Performance Measure -

#### Data Element -

#### Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?



# Program Description

## Outpatient Treatment Programming

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: Opiate/Methamphetamine Specific Program	
Service Provider: TRICAP	
CCIS Service Type: G18 – Outpatient Treatment Services	
Total Projected New Enrollment: 18	
For Regional CCABs, total projected new enrollment by member county: Huron County 4 (2 Men/2 Women) Lapeer County 9 (6 Men/3 Women) Sanilac County 3 (2 Men/1 Woman) Tuscola County 2 (1 Man/1 Woman)	
Projected Length of Stay in Days: 150-180	
Program Location (select all that apply): Jail: <input type="checkbox"/> Residential: <input checked="" type="checkbox"/> Community: <input type="checkbox"/>	
Program Status: Continuation	
If modification, describe here:	

**GROUP/CLASS DELIVERED PROGRAMMING –**

- Groups must be separate for both male and female populations.
- Documentation of assessment for eligibility (with appropriate release of information) must be available during annual file review.
- Use of individual sessions must be described.
- Funding for G18 programming is used to fill the CCAB identified gaps in services.
- If this is an Intensive Outpatient Treatment program, you must use SAMHSA guidelines.

**ANSWER ALL QUESTIONS USING “NA” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM.**

<b>1. Based on your objective(s), what is your target population?</b>
<input checked="" type="checkbox"/> Sentenced Felons <input checked="" type="checkbox"/> Pretrial <input checked="" type="checkbox"/> Other: <b>Convicted/Presentenced participants, defendants participating in specialty courts or as part of plea agreements, OWI 3rd defendants, and misdemeanor defendants under the supervision of Circuit Court Probation.</b>

<b>2. Describe the program:</b>												
<p>a. The COMPAS assessment is considered a screening tool for outpatient treatment and DOES NOT replace the required actuarial assessment.</p> <p>P.A. 511 states eligibility for programming <b>must include moderate to high risk.</b> Please select which needs the program will impact for your target population(s).</p> <p><b>Sentenced Felons:</b> You must identify the number of scales required for referral here: 1</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><input type="checkbox"/> Vocational/Education</td> <td style="width: 33%;"><input type="checkbox"/> Social Environment</td> <td style="width: 33%;"><input type="checkbox"/> Criminal Association</td> </tr> <tr> <td><input checked="" type="checkbox"/> Substance Abuse</td> <td><input type="checkbox"/> Residential Instability</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Cognitive Behavioral</td> <td><input type="checkbox"/> Family Criminality</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> Criminal Personality</td> <td><input type="checkbox"/> Social Isolation</td> <td></td> </tr> </table>	<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association	<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability		<input checked="" type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality		<input checked="" type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation	
<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association										
<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability											
<input checked="" type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality											
<input checked="" type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation											



# Program Description

## Outpatient Treatment Programming

- Leisure & Recreation                       Criminal Opportunity

**Gender Responsive Scales:**

- Experiences of Abuse as an Adult
- Experiences of Abuse as a Child
- Relationship Dysfunction
- Parental Stress

**Felony Probation Violators, regardless of COMPAS Assessment Score**

**Pretrial Defendants – list referral criteria here: Pretrial defendants with prior documented methamphetamine or opiate use history through either previous convictions or self-reported use are eligible to be assessed for the OMSP. If the individual does not meet the appropriate diagnosis through the SUD assessment for the program enrollment, they will not be enrolled.**

b. Assessment is the foundation of evidence-based practices. Enrollments in treatment programs should be based upon assessed needs by a licensed or credentialed professional. Please describe your assessment practices below:

i. What assessment is used, identify the tool: **Praxis assessments can be completed by local Community Corrections Staff. The COMPAS assessments can be completed by local staff or Circuit Court Probation. The TCU can be completed by local staff or by licensed TRICAP staff. TRICAP will complete a Biopsychosocial assessment and report to determine a diagnosis for Opioid (Opioid Use Disorder) and/or Methamphetamine diagnosis (Stimulant Use Disorder-Amphetamine type substance) with an ASAM treatment recommendation. If the above listed assessment does not result in the required diagnosis to participate in the OMSP program, then licensed TRICAP staff can utilize DAST (Drug Abuse Screening Tool), MAST (Michigan Alcohol Screening Tool), AUDIT (Alcohol Use Disorders Identification Test), or SASSI 4 (Substance Abuse Subtle Screening Inventory) to assist with determining the appropriate diagnosis.**

ii. Who completes the assessment? **Licensed TRICAP Therapists**

iii. Does the assessment result in a recommended level of treatment per American Society of Addiction Medicine (ASAM) criteria? **YES**

c. Identify who is responsible for confirming eligibility and describe the process. **A referral form, along with a copy of the TCU or PRAXIS or COMPAS Bar Chart can be completed and turned into the Community Corrections Manager for consideration. The information is reviewed by the CCAB Manager to ensure the defendant meets the minimum screening or assessment score and has a history of opiate or methamphetamine use. All information is then forwarded (via email) to TRICAP for secondary assessment(s). TRICAP Staff notifies the CCAB Manager by phone/email once the secondary assessment(s) have been completed and qualifies them to participate with the program. If the defendant does not meet criteria, the CCAB Manager will be notified by phone or email.**



# Program Description

## Outpatient Treatment Programming

d.	Describe the program design:
i.	Name of curriculum or treatment model: <b>Living In Balance Curriculum for the 4.5 intensive specific classes; Specific (OPI/Meth) Drug Education - Matrix Model with What You Need To Know Methamphetamine and Workbook and What You Need To Know Opioids and Workbook (Hazelden Betty Ford Foundation) - 3 hours. Also incorporated is Seeking Safety, Thinking Matters and Thinking for a Change for all groups. All of the groups have cognitive behavioral basics and are evidence-based and best practice approved. Both groups (Opioid &amp; Methamphetamine) receive Helping Men/Women Recover, Early Recovery, Relapse Prevention, Mental Health (co-occurring), TREM/M-TREM (trauma), Anger Management &amp; SUD, 5 hours of cognitive classes, 12 step weekly program. Peer Recovery Coaching is also available as well as daily exercise, Peer Recovery Coaching and Mindful Yoga.</b>
ii.	Identify what skills are addressed within the treatment program: <b>Seek safe environments, cognitive behavioral processes, social skills, anger management, relapse prevention, how to deal with trauma and uncomfortable emotions, obtain/maintain sobriety.</b>
iii.	Is the group open or closed? <b>Open</b>
iv.	What is the minimum/maximum number of participants per group, as identified in the curriculum? <b>3-15</b>
v.	How many sessions does this group curriculum provide? <b>336 (16 groups per week for 21 weeks)</b>
vi.	Minimum number of group sessions attended for successful completion: <b>Successful completion of the program is 150 days.</b>
vii.	If the group occurs in various locations, (jail/residential/community) identify how participants transition between them: <b>N/A. All groups are held at TRICAP.</b>
viii.	If individual sessions are part of the program and billed separately, how many individual sessions are anticipated per participant? <b>One individual session per week per client.</b>
ix.	On what basis would individual sessions be used? <b>Individual weekly sessions are built in as part of the curriculum standard.</b>
e.	Identify the license and/or credentials held by your service provider qualifying him/her to provide this service: <b>The service provider shall, per verification of credentialing in the MDOC-OCC contract, possess a Master's degree or above in the Behavioral Sciences (Social Work, Counseling, or Psychology), and appropriate licensure through the State of Michigan to practice; and possess appropriate Michigan Certification Board for Addiction Professionals (MCBAP) certification; Certified Advanced Alcohol and Drug Counselor (CAADC); or minimum certified Alcohol and Drug Counselor (CADC) at time of hire; or MCBAP-approved development-plan in place with eligibility to obtain CAADC certification within six months from time of hire; MCBAP certificate or development-plan status must be able to be verified through MCBAP search at any time.</b>



# Program Description

## Outpatient Treatment Programming

f. How are delivered services and individual progress and participation documented by the service provider and provided to the probation agents and/or referral source? (i.e., progress notes, case notes and/or group notes) **TRICAP will keep records of assessments, treatment plans, progress notes and discharge/aftercare plans. Notes will be kept for individual and group sessions. Notes are taken at every session with the offender as well as a sign in sheet for group sessions. Monthly progress reports are provided to the Probation Agents and CCAB Manager, indicating the level of progress thus far. Notification is also sent when an offender is sanctioned for a rule violation or terminated from the program for non-compliance. Probation Agents and CCAB Manager also receive aftercare plans and discharge summaries. Agents and CCAB Manager are notified immediately if an offender absconds from the facility.**

g. Review your answers above. Summarize other aspects of the program not specifically identified above that you feel are critical to understanding this program: **Defendants referred to this program will have to be detoxed from all illicit substances/alcohol for a minimum of 10 days prior to enrollment. Defendants are also eligible to receive Vivitrol and enrolled into Medicaid for other health services while at TRICAP. Defendants are required to complete home work assignments and are drug tested 3 times per week.**

3. Evaluation is part of evidence-based principles which you **must** identify in section (a). You are **required** to develop **at least one key performance measure** for this program in section (b). Be sure to include the data source, how its tracked and measured. **NOTE:** Successful completion of programming, if listed as the only key performance measure, is not sufficient.

**a. Describe how this program meets each of the following Evidence Based Principles:**

1. **Assess Actuarial Risk/Needs** - Substance abuse assessment completed by licensed clinician provides diagnosis and recommendations for treatment.
2. **Enhance Intrinsic Motivation** - Curriculum is designed to allow participants to work at their own pace, allowing for a person-centered approach.
3. **Target Interventions (minimum of 1 required; indicate all that apply)**
  - a. **Risk Principle:** Prioritize supervision and treatment resources for higher risk offenders -Program is designed for higher risk defendants.
  - b. **Need Principle:** Target interventions to criminogenic needs -Curriculum targets moderate to high-risk substance abuse and cognitive criminogenic and gender responsive needs.
  - c. **Responsivity Principle:** Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs -Each treatment plan is person-centered, tailored to each defendant's learning level, motivation level and some are gender specific.
  - d. **Dosage:** Structure 40-70% of high-risk offenders' time for 3-9 months -Treatment program is at least 5 months long with other aspects of treatment, such as Mindful Yoga, AA/NA, journaling, and Peer Recovery.



# Program Description

## Outpatient Treatment Programming

e. **Treatment Principle: Integrate treatment into the full sentence/sanction requirements -Structured sentencing that may include jail and other community programming, treatment and sanctions.**

**4. Skill Train with Directed Practice** - Curriculum facilitated by licensed clinicians with appropriate credentials, utilizes cognitive behavioral techniques and is designed to encourage willful participation through group setting, role play and homework.

**5. Increase Positive Reinforcement** - Incorporating positive reinforcement including encouragement, verbal praise, later bed times, increased privileges, peer leader, assisting group leader, and special events like movies.

**6. Engage Ongoing Support in Natural Communities** - Utilizes participants local resources and makes referrals to relevant/helpful community-based supports and programming when appropriate.

**7. Measure Relevant Processes/Practices** - Captures statistical data regarding aspects of group participation and completion, including pre- and post-test measurements.

**8. Provide Measurement Feedback** - Shares statistical KPM data regarding participation/program success and effectiveness with stakeholders.

b. **Program Key Performance Measure** - 70% of successfully completed participants will not be re-arrested within the respective county, tracking at 6 and 12 month intervals using the OMSP tracking spreadsheet.

Data Element - OMSP Spreadsheet, JIS, JDW and BIRs

Tracking Source -

1. Who is tracking the Data Element? The Coordinator and Assistant Coordinator
2. How is it being tracked? By searching the data elements
3. At what frequency is it being tracked? Quarterly

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?



# Program Description

## Outpatient Treatment Programming

3. At what frequency is it being tracked?

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?





# Service Description

## Pretrial Risk Assessment Services

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: Pretrial Assessment	
Service Provider: Community Corrections	
CCIS Service Type: F22 - Pretrial Assessment	
Total Projected Number of New Assessments (enrollment): 300	
For Regional CCABs, total projected number of new assessments by member county: Lapeer County	
Program Location (select all that apply): Jail: <input checked="" type="checkbox"/> Community: <input checked="" type="checkbox"/>	
Program Status: Continuation	
If modification, describe here:	

**PRETRIAL RISK ASSESSMENT SERVICES –**

- Provides for risk assessment of pre-adjudicated defendants.
- Funding under F22 Pretrial Assessment may include the following: The interview with the defendant, criminal history investigation, verification of interview information, and conducting the Praxis and subsequent report to include presentation at arraignment.
- Enrollment projections should also include an appropriate calculation of staff’s time. The total amount of time spent per projected enrollee should balance with the requested funding amount.
- To be considered for funding, you must utilize the Praxis Risk Assessment Tool (2023 version) for all completed assessments.

**ANSWER ALL QUESTIONS USING “NA” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM**

<b>1. Describe the service:</b>
a. Describe eligibility criteria, including exclusionary criteria, for the assessment: <b>Defendants charged with a felony or serious misdemeanor awaiting arraignment in Lapeer County. Priority will be given to those lodged in jail awaiting arraignment.</b>
b. What PA-511 funded programs does this assessment support (check all that apply): <input checked="" type="checkbox"/> F23 Pretrial Supervision <input type="checkbox"/> D08 Electronic Monitoring
c. Are you using the Praxis Risk Assessment Tool (2023 version)?    Yes
d. Is the assessment completed through an interview with the defendant or would the defendant fill out a questionnaire for later scoring? <b>The PRAXIS is completed in person. Phone interviews and/or video format interviews with the defendant can be utilized if such a circumstance arises where an in person interview is not practical.</b>
e. Is the assessment completed prior to arraignment?    Yes
f. How much time is anticipated to score one pretrial risk assessment (not including subsequent development of a recommendation or plan)? <b>Approximately 20 to 30 minutes based on the offender's criminal history. Criminal record checks required or needed to complete the assessment may take additional time.</b>
g. How much time is estimated to interview the defendant? <b>45-60 minutes</b> Explain your response. <b>If the defendant is in custody and lodged at the jail, Community Corrections Staff will travel to the jail to conduct the interview. When possible, defendants who are lodged at the jail may be interviewed via</b>



# Service Description

## Pretrial Risk Assessment Services

	telecommunication or video conferencing. If Jail Staff is busy there may be a delay in conducting the interview. Those defendants taken directly to Court will be interviewed at the Courthouse. If the defendant has posted bond prior to being assessed, an interview will be scheduled as soon as possible.
h.	How much time is estimated to complete a criminal history investigation on the defendant? <b>20-30 minutes</b> Explain your response. <b>Judicial Data Warehouse, JIS and/or LEIN are utilized to gather the needed information.</b>
i.	How much time is estimated to verify interview information? <b>20-30 minutes</b> Explain your response. <b>The time needed to verify interview information can drastically change based on the need for follow up calls and the availability of individuals.</b>
j.	How much time is estimated to complete the subsequent report, including the presentation at arraignment/court? <b>30-60 minutes</b> Explain your response. <b>The time needed to verify any information, complete the report and provide it to the Court.</b>
k.	What is the total amount of time required to complete the assessment process? (add the time responses to questions i. through m.) <b>Approximately 1 hour.</b>
l.	Is subsequent verification of information attempted prior to making a recommendation or determining eligibility? <b>Yes</b>
m.	Is the recommendation written? <b>Yes</b>
n.	For defendants who do not gain release, does your County utilize a review process (sequential review)? Choose an item. Explain: <b>Bond is reviewed at each Court Hearing.</b>
o.	Is information about the number of completed assessments entered in COMPAS Case Manager and tracked for CCIS purposes? <b>Yes</b>
p.	Review your answers above. Summarize other aspects of the program not specifically identified above that you feel are critical to understanding this program: <b>N/A</b>
2.	Evaluation is part of evidence-based principles which you <b>must</b> identify in section (a). Required key performance measures for this program are identified in section (b). You may include additional key performance measures as well. Be sure to include the data source, how its tracked and measured. <u>NOTE</u> : Successful completion of programming, if listed as the only key performance measure, is not sufficient.
a.	<p><b>Describe how this program meets each of the following Evidence Based Principles:</b></p> <ol style="list-style-type: none"> <li><b>1. Assess Actuarial Risk/Needs</b> - The PRAXIS Assessment is conducted to help in determining bond conditions and level of supervision.</li> <li><b>2. Enhance Intrinsic Motivation</b> - Encourages willful participation through the least restrictive means; defendants are informed that their participation with Pretrial Services is voluntary and is designed to assist in a fair appropriate bond.</li> <li><b>3. Target Interventions (indicate all that apply)</b> <ol style="list-style-type: none"> <li><b>a. Risk Principle: Prioritize supervision and treatment resources for higher risk offenders</b> -Supervision levels will be determined by the PRAXIS, more attention will be given to those offenders at a high risk level as well as those suffering from chronic substance abuse issues.</li> </ol> </li> </ol>



# Service Description

## Pretrial Risk Assessment Services

- b. **Need Principle:** Target interventions to criminogenic needs -
- c. **Responsivity Principle:** Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs -
- d. **Dosage:** Structure 40-70% of high-risk offenders' time for 3-9 months -
- e. **Treatment Principle:** Integrate treatment into the full sentence/sanction requirements -

- 4. **Skill Train with Directed Practice** - Community Corrections Staff are trained in PRAXIS.
- 5. **Increase Positive Reinforcement** -
- 6. **Engage Ongoing Support in Natural Communities** - Refers defendants to local agencies for support when needed.
- 7. **Measure Relevant Processes/Practices** -
- 8. **Provide Measurement Feedback** -

b. **Program Key Performance Measure** - *Concurrence Rate – (REQUIRED) – Enter your projected percentage in the text box: 75 % of OCC-funded defendants will have release decisions/court-ordered bail corresponding with their assessed risk level (Praxis).*

**Data Element** - PRAXIS Results

**Tracking Source** -

- 1. Who is tracking the Data Element? Pretrial Services
- 2. How is it being tracked? Spreadsheet
- 3. At what frequency is it being tracked? Following Court release decisions and quarterly.

**Program Key Performance Measure** – *Release Rate (REQUIRED) - Enter your projected percentage in the text box: 65 % of OCC-funded defendants will secure release pending case disposition.*

**Data Element** - PRAXIS Assessment/Court bond orders

**Tracking Source** –

- 1. Who is tracking the Data Element? Pretrial Services
- 2. How is it being tracked? Spreadsheet
- 3. At what frequency is it being tracked? Following Court release decisions and quarterly.

**Additional Program Key Performance Measure** -

**Data Element** -

**Tracking Source** -

- 1. Who is tracking the Data Element?
- 2. How is it being tracked?
- 3. At what frequency is it being tracked?

**Additional Program Key Performance Measure** -

**Data Element** -



# Service Description

## Pretrial Risk Assessment Services

### Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?



# Program Description

## Pretrial Supervision Services

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: Pretrial Supervision	
Service Provider: Community Corrections	
CCIS Service Type: F23 – Pretrial Supervision Services	
Total Projected New Enrollment: 175	
For Regional CCABs, total projected new enrollment by member county: Lapeer County	
Projected Length of Stay in Days: 120	
Program Location (select all that apply): Jail: <input type="checkbox"/> Residential: <input type="checkbox"/> Community: <input checked="" type="checkbox"/>	
Program Status: Continuation	
If modification, describe here:	

**SUPERVISION SERVICES – Pretrial supervision should utilize the least restrictive means while working to promote court appearances and public safety.**

- Funding under Pretrial Supervision Services may include the following: court reminders (if not available through other means), report methodology and frequency that comports with the assessed level of risk and written compliance reports to the Court.
- Electronic monitoring is supported for the following: those charged with an OUIL III, victim cases, serious misdemeanors and non-violent felonies scoring 6 or higher (PRAXIS) and/or a violent felony scoring 3 or higher (PRAXIS).
- Supervision programs are not intended to simply provide access to substance abuse testing absent other supervision activities.
- You are required to complete a G17 Substance Abuse Testing program description if you are requesting funds for pretrial substance abuse testing, as part of your pretrial supervision plan.
- OCC requires that an objective pretrial assessment be used before defendants are referred for pretrial supervision.

**ANSWER ALL QUESTIONS USING “NA” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM.**

<b>1. Based on your objective(s), what is your target population?</b>
<input checked="" type="checkbox"/> Pretrial

<b>2. Describe the program:</b>
<p>a. A Pretrial risk assessment is mandatory for pretrial supervision services. What are your eligibility criteria based on the assessed risk levels? <b>Be sure to include assessment scores. 1) Defendants that score 0-2 on the PRAXIS and are charged with a violent felony. 2) Defendants that score 3-5 on the PRAXIS and are charged with a serious misdemeanor or non-violent felony. 3) Defendants that score 6-9 on the PRAXIS and are charged with a misdemeanor. Electronic monitoring while on pretrial supervision is supported for the following: 1) Defendants charged with an OUIL-3rd. 2) Victim cases. 3) Serious misdemeanor or non-violent felony scoring 6 or higher on the PRAXIS. 4) Violent felony scoring 3 or higher on the PRAXIS.</b></p> <p>b. If using electronic monitoring (GPS and/or SCRAM) answer and clearly explain the following questions (use NA if not applicable to your program):  <b>**Refer to the first page for information on pretrial EM eligibility information.</b></p>



# Program Description

## Pretrial Supervision Services

	i. What kind of equipment/system: <b>GPS and CAM (Continuous Alcohol Monitor)</b>
	ii. Vendor for equipment/service: <b>Alcohol Monitoring Systems, Inc</b>
	iii. Cost assessed by the vendor per unit/defendant/day (clearly describe): <b>All costs are paid for by the defendant</b>
	iv. Who does the equipment installation/retrieval? <b>Community Corrections Staff</b>
	v. Who sets up schedules and/or monitors compliance? <b>Community Corrections Staff and Alcohol Monitoring Systems, Inc</b>
	c. What are your supervision reporting requirements, i.e. frequency and type of reporting? <b>The PRAXIS scores are used to determine the eligibility and frequency of reporting; those found eligible to be enrolled in Pretrial Supervision with scores of (6-9) and released on a personal recognizance bond was not recommended may result in weekly reporting, those found eligible to be enrolled in Pretrial Supervision with scores of (3-5) released with bond conditions or released on personal recognizance bond may result in bi-weekly reporting and those found eligible to be enrolled in Pretrial Services with scores of (1-2) released on a personal recognizance bond or with bond conditions may result in monthly reporting. Those who are placed on Pretrial Supervision utilizing the above criteria and also have one of the following: Defendants charged with an OUIL-3rd; victim cases; serious misdemeanor or non-violent felony scoring 6 or higher on the PRAXIS; violent felony scoring 3 or higher on the PRAXIS, may be placed on electronic monitoring equipment. The first meeting is usually held in person so that an intake can be performed adequately, after that, telephone reporting is utilized when appropriate. With each case, the totality of the case will determine the frequency and type of reporting following the eligibility and criteria as stated above.</b>
	d. What is your average daily caseload per full time equivalent position (FTE) for pretrial supervision? <b>The Average Daily Caseload per FTE is 49.3 (calculated as projected new enrollments x projected length of stay in days / 365).</b>
	e. What happens during a typical "check-in" and how long is it estimated to take? Court date reminder: <input checked="" type="checkbox"/> Verification of address: <input checked="" type="checkbox"/> New criminal contact: <input checked="" type="checkbox"/> Verification of bond conditions: <input checked="" type="checkbox"/> Referrals to programs: <input checked="" type="checkbox"/> Other (describe): <b>Contact information is confirmed, attendance of scheduled appointments addressed as needed, those on electronic monitoring have compliance with equipment issues addressed, as well as any concerns that pertain to being fitted with equipment, other issues are addressed as needed whether it's a referral to a program or service, simple information to keep someone on track or redirecting them to a path that leads to a successful outcome.</b>  Time per check in (including the time to complete compliance report documentation) <b>10-15 minutes</b>
	f. Does the program design include collateral contacts with family, employer, school, treatment provider, etc.? <b>Yes</b>



# Program Description

## Pretrial Supervision Services

<p>g. This program does not use PA-511 funds for drug/alcohol testing. <b><i>If you select “uses PA-511 funds” then you are required to complete a G17 Substance Abuse Testing program description.</i></b></p>
<p>h. Pretrial release conditions which include drug/alcohol testing should be limited. Describe the County’s plan should a defendant test positive for a controlled substance. What interventions are available and presented to the court and/or defendant: <b>If a defendant has a condition of bond for drug testing and they test positive for drugs, the Prosecutor, the Court and Pretrial Services are notified by the testing facility. Normally, a second subsequent test is ordered to check for lower levels, if the levels are lower, the bond is continued. If the defendant levels do not drop, the Prosecutor will make a determination on whether to revoke bond or not. The same procedure is followed for a defendant who has been fitted with a continuous alcohol monitor (CAM tether) and has a confirmed alcohol event.</b></p>
<p>i. How is the County’s plan mentioned in (h.) documented per defendant? <b>Emails are sent as needed and documentation is kept in their file.</b></p>
<p>j. Are compliance reports shared with MDOC PSI writers? <b>Yes</b></p>
<p>k. Review your answers above. Summarize other aspects of the program not specifically identified above that you feel are critical to understanding this program: <b>Completion of the Pretrial Services with no bond violations or new charges, as well as the defendant demonstrating they are being a contributing part of the community, may result in a reduced sentence or no jail time at all.</b></p>
<p><b>3. Provide the following information:</b> <i>(For CCABs requesting a new initiative, provide the <u>expected or current</u> Appearance and Public Safety Rates as defined below)</i></p>
<p>a. <b>What is your current Appearance Rate? 65% (The percentage of released defendants on OCC-funded pretrial supervision who attend all scheduled court appearances pending case disposition.)</b></p>
<p>b. <b>What is your current Public Safety Rate? 85% (The percentage of released defendants on OCC-funded pretrial supervision who are not charged with a new criminal offense pending case disposition.)</b></p>
<p>c. <b>What is your current Success/Compliance Rate? 80% (The percentage of released defendants on OCC-funded pretrial supervision who appear for all scheduled court appearances and are not charged with a new crime pending case disposition.)</b></p>
<p>4. Evaluation is part of evidence-based principles which you <b>must</b> identify in section (a). Required key performance measures for this program are identified in section (b). You may identify additional key performance measures as well. Be sure to include the data source, how its tracked and measured.</p>
<p><b>a. Describe how this program meets each of the following Evidence Based Principles:</b></p> <p><b>1. Assess Actuarial Risk/Needs</b> - The Praxis Assessment is conducted to help in determining bond conditions and level of supervision.</p>



# Program Description

## Pretrial Supervision Services

2. **Enhance Intrinsic Motivation** - Encourages willful participation through the least restrictive means, defendants are informed that their participation with Pretrial Services is voluntary and is designed to assist in a fair appropriate bond.
3. **Target Interventions (indicate all that apply)**
  - a. **Risk Principle:** Prioritize supervision and treatment resources for higher risk offenders -Supervision levels will be determined by the PRAXIS; more attention will be given to those offenders at a high risk level as well as those suffering from chronic substance abuse issues.
  - b. **Need Principle:** Target interventions to criminogenic needs -
  - c. **Responsivity Principle:** Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs -
  - d. **Dosage:** Structure 40-70% of high-risk offenders' time for 3-9 months -
  - e. **Treatment Principle:** Integrate treatment into the full sentence/sanction requirements -
4. **Skill Train with Directed Practice** - Community Corrections Staff are trained in PRAXIS.
5. **Increase Positive Reinforcement** - Bond compliance may result in reduced incarceration times, no incarceration or sentences with HYTA, Deferrals or 7411's, etc.
6. **Engage Ongoing Support in Natural Communities** - Refers defendants to local agencies for support when needed.
7. **Measure Relevant Processes/Practices** - The Defendant is given the PRAXIS assessment which generates a score which then helps establish recommendations for bond conditions.
8. **Provide Measurement Feedback** - Shares data quarterly at the CCAB meetings.

b. **Program Key Performance Measure – Appearance Rate (REQUIRED) – Enter your projected percentage in the text box: 70 % of released defendants on OCC-funded pretrial supervision will attend all scheduled court appearances pending case disposition.**

**Data Element – JIS, JDW and/or LEIN**

**Tracking Source -**

1. Who is tracking the Data Element? Pretrial Services
2. How is it being tracked? Spreadsheet
3. At what frequency is it being tracked? Monthly

**Program Key Performance Measure – Public Safety Rate (REQUIRED) – Enter your projected percentage in the text box: 80 % of released defendants on OCC-funded pretrial supervision will not be charged with a new criminal offense pending case disposition.**

**Data Element – JIS, JDW and/or LEIN**

**Tracking Source –**

1. Who is tracking the Data Element? Pretrial Services
2. How is it being tracked? Spreadsheet





# Program Description

## Pretrial Supervision Services

3. At what frequency is it being tracked? Monthly

**Program Key Performance Measure** – *Success/Compliance Rate (REQUIRED)* – *Enter your projected percentage in the text box: 75 % of released defendants on OCC-funded pretrial supervision will appear for all scheduled court appearances and will not be charged with a new criminal offense pending case disposition.*

**Data Element** - JIS

**Tracking Source** -

1. Who is tracking the Data Element? Pretrial Services
2. How is it being tracked? Spreadsheet
3. At what frequency is it being tracked? Monthly

**Additional Program Key Performance Measure** -

**Data Element** -

**Tracking Source** -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?



# Program Description

## Outpatient Treatment Programming

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: SUBSTANCE ABUSE	
Service Provider: Lapeer County Community Mental Health and List Psychological Services, PLC.	
CCIS Service Type: G18 – Outpatient Treatment Services	
Total Projected New Enrollment: 80	
For Regional CCABs, total projected new enrollment by member county: Lapeer County 25 (20 Men/5 Women) Huron County 20 (17 men/3 Women) Sanilac County 15 (12 Men/3 Women) Tuscola County 20 (17 Men/3 Women)	
Projected Length of Stay in Days: 50	
Program Location (select all that apply): Jail: <input checked="" type="checkbox"/> Residential: <input type="checkbox"/> Community: <input checked="" type="checkbox"/>	
Program Status: Continuation	
If modification, describe here:	

**GROUP/CLASS DELIVERED PROGRAMMING –**

- Groups must be separate for both male and female populations.
- Documentation of assessment for eligibility (with appropriate release of information) must be available during annual file review.
- Use of individual sessions must be described.
- Funding for G18 programming is used to fill the CCAB identified gaps in services.
- If this is an Intensive Outpatient Treatment program, you must use SAMHSA guidelines.

**ANSWER ALL QUESTIONS USING “NA” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM.**

<b>1. Based on your objective(s), what is your target population?</b>
<input checked="" type="checkbox"/> Sentenced Felons <input checked="" type="checkbox"/> Pretrial <input checked="" type="checkbox"/> Other: <b>Felony probation violator, regardless of COMPAS Score; -OR- Pretrial defendants with a documented need. A current Substance Abuse Assessment completed by a licensed clinician must confirm the need for services.</b>

<b>2. Describe the program:</b>												
<p>a. The COMPAS assessment is considered a screening tool for outpatient treatment and DOES NOT replace the required actuarial assessment.</p> <p>P.A. 511 states eligibility for programming <b>must include moderate to high risk.</b> Please select which needs the program will impact for your target population(s).</p> <p><b>Sentenced Felons:</b> You must identify the number of scales required for referral here: 1</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;"><input type="checkbox"/> Vocational/Education</td> <td style="width: 33%;"><input type="checkbox"/> Social Environment</td> <td style="width: 33%;"><input type="checkbox"/> Criminal Association</td> </tr> <tr> <td><input checked="" type="checkbox"/> Substance Abuse</td> <td><input type="checkbox"/> Residential Instability</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Cognitive Behavioral</td> <td><input type="checkbox"/> Family Criminality</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Criminal Personality</td> <td><input type="checkbox"/> Social Isolation</td> <td></td> </tr> </table>	<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association	<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability		<input type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality		<input type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation	
<input type="checkbox"/> Vocational/Education	<input type="checkbox"/> Social Environment	<input type="checkbox"/> Criminal Association										
<input checked="" type="checkbox"/> Substance Abuse	<input type="checkbox"/> Residential Instability											
<input type="checkbox"/> Cognitive Behavioral	<input type="checkbox"/> Family Criminality											
<input type="checkbox"/> Criminal Personality	<input type="checkbox"/> Social Isolation											



# Program Description

## Outpatient Treatment Programming

<input type="checkbox"/> Leisure & Recreation	<input type="checkbox"/> Criminal Opportunity
<b>Gender Responsive Scales:</b>	
<input type="checkbox"/> Experiences of Abuse as an Adult	
<input type="checkbox"/> Experiences of Abuse as a Child	
<input type="checkbox"/> Relationship Dysfunction	
<input type="checkbox"/> Parental Stress	
<input checked="" type="checkbox"/> <b>Felony Probation Violators, regardless of COMPAS Assessment Score</b>	
<input type="checkbox"/> <b>Pretrial Defendants – list referral criteria here:</b>	
b. Assessment is the foundation of evidence-based practices. Enrollments in treatment programs should be based upon assessed needs by a licensed or credentialed professional. Please describe your assessment practices below:	
i. What assessment is used, identify the tool: <b>A COMPAS Risk/Needs Assessment and a Biopsychosocial Assessment, which includes the DSM-5, ASAM, and MH screening.</b>	
ii. Who completes the assessment? <b>The Probation Department completes the COMPAS Risk/Needs Assessment and the contracted service provider completes the Biopsychosocial Assessment.</b>	
iii. Does the assessment result in a recommended level of treatment per American Society of Addiction Medicine (ASAM) criteria? <b>Yes.</b>	
c. Identify who is responsible for confirming eligibility and describe the process. <b>Community Corrections Staff screens all sentenced offenders for eligibility criteria prior to an offender being enrolled into the program and the contracted service provider also completes their assessment prior to enrollment, as well. Ultimately, the Community Corrections Coordinator is responsible for making sure the process is carried out as designed.</b>	
d. Describe the program design:	
i. Name of curriculum or treatment model: <b>Living in Balance by Hazelden</b>	
ii. Identify what skills are addressed within the treatment program: <b>The following skills are taught: Addicts and Addiction, Your Body on Alcohol and other Drugs, Disease of Addiction (Parts 1&amp;2), Now is the Time for Real Change, Change and Relapse Prevention, Change and Recovery, Transition Planning, pro-social thinking, managing high risk situations.</b>	
iii. Is the group open or closed? <b>Open</b>	
iv. What is the minimum/maximum number of participants per group, as identified in the curriculum? <b>3 minimum / 8 maximum</b>	
v. How many sessions does this group curriculum provide? <b>12</b>	
vi. Minimum number of group sessions attended for successful completion: <b>10</b>	
vii. If the group occurs in various locations, (jail/residential/community) identify how participants transition between them: <b>If a participant starts the</b>	



# Program Description

## Outpatient Treatment Programming

<p><b>program in the jail and is not able to complete, they are transferred to the community based program for completion.</b></p>
<p>viii. If individual sessions are part of the program and billed separately, how many individual sessions are anticipated per participant? <b>2</b></p>
<p>ix. On what basis would individual sessions be used? <b>Intakes and exit interviews.</b></p>
<p>e. Identify the license and/or credentials held by your service provider qualifying him/her to provide this service: <b>Minimum of CADC (Certified Alcohol and Drug Counselors) or equivalent/development plan through the State of Michigan.</b></p>
<p>f. How are delivered services and individual progress and participation documented by the service provider and provided to the probation agents and/or referral source? (i.e., progress notes, case notes and/or group notes) <b>The service provider maintains sign-in sheets to document attendance/participation for each session. The service provider also maintains a file on each offender that contains progress notes and pre and post-test results. The service provider provides monthly progress reports (enrollment, successful or unsuccessful completions) to the Probation Department, as well as the Community Corrections Staff. Significant/negative incidents are reported immediately.</b></p>
<p>g. Review your answers above. Summarize other aspects of the program not specifically identified above that you feel are critical to understanding this program: <b>This program provides services in the jail where PIHP treatment services are not funded. This program also alleviates offenders from paying unaffordable copays.</b></p>
<p>3. Evaluation is part of evidence-based principles which you <b>must</b> identify in section (a). You are <b>required</b> to develop <b>at least one key performance measure</b> for this program in section (b). Be sure to include the data source, how its tracked and measured. <b>NOTE:</b> Successful completion of programming, if listed as the only key performance measure, is not sufficient.</p>
<p><b>a. Describe how this program meets each of the following Evidence Based Principles:</b></p> <ol style="list-style-type: none"> <li><b>1. Assess Actuarial Risk/Needs</b> - Targeting moderate to high-risk offenders with probable to highly probable needs in the substance abuse category using assessment completed by credentialed clinician provides diagnosis, and recommendations for treatment.</li> <li><b>2. Enhance Intrinsic Motivation</b> - Curriculum is designed to allow participants to work at their own pace, allowing for a person-centered approach.</li> <li><b>3. Target Interventions (minimum of 1 required; indicate all that apply)</b> <ol style="list-style-type: none"> <li><b>a. Risk Principle:</b> Prioritize supervision and treatment resources for higher risk offenders -Program is designed for higher risk offenders.</li> <li><b>b. Need Principle:</b> Target interventions to criminogenic needs -Curriculum targets moderate to high-risk substance abuse and cognitive criminogenic responsive needs.</li> <li><b>c. Responsivity Principle:</b> Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs -The Curriculum is designed to be delivered so offenders with different learning styles are accommodated as well as different motivation levels, cultures and the groups are gender specific.</li> <li><b>d. Dosage:</b> Structure 40-70% of high-risk offenders' time for 3-9 months -N/A</li> </ol> </li> </ol>



# Program Description

## Outpatient Treatment Programming

e. **Treatment Principle: Integrate treatment into the full sentence/sanction requirements -Structured sentencing that may include jail and other community programming, treatment and sanctions.**

4. **Skill Train with Directed Practice** - Curriculum facilitated by credentialed clinicians with appropriate credentials utilizes cognitive behavioral techniques and is designed to encourage willful participation through group setting, role play and homework.

5. **Increase Positive Reinforcement** - Incentives are provided for each participant including a possible reduction in jail days upon completion of programming.

6. **Engage Ongoing Support in Natural Communities** - Utilizes participant's natural resources and makes referrals to relevant/helpful community-based supports and programming when appropriate.

7. **Measure Relevant Processes/Practices** - Captures statistical data regarding aspects of group participation and completion, including pre and post-tests.

8. **Provide Measurement Feedback** - Shares data regarding participation/program success and effectiveness with stakeholders.

b. **Program Key Performance Measure** - 70% of successfully completed participants will not be re-arrested within the respective county, tracking at 6 and 12 month intervals.

Data Element - JIS, JDW and BIRs

Tracking Source -

1. Who is tracking the Data Element? The Coordinator and Assistant Coordinator
2. How is it being tracked? By searching the data elements
3. At what frequency is it being tracked? Quarterly

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?



# Program Description

## Outpatient Treatment Programming

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?



# Program Description

## Group Programming

CCAB: THUMB AREA REGIONAL	FY: 2025
Local Program Name: <b>THINKING MATTERS</b>	
Service Provider: <b>Lapeer County Community Mental Health and List Psychological Services, PLC</b>	
CCIS Service Type: <b>C01 - Cognitive</b>	
Total projected number of new enrollments: <b>110</b>	
For Regional CCABs, projected number of new enrollments per member county: <b>Lapeer County 45 (35 Men/10 Women) Huron County 10 (7 Men/3 Women) Tuscola County 45 (40 Men/5 Women) Sanilac County 10 (7 Men/3 Women)</b>	
Program Location (select all that apply): Jail: <input checked="" type="checkbox"/> Residential: <input type="checkbox"/> Community: <input checked="" type="checkbox"/>	
Program status: <b>Continuation</b>	
If modification, describe here:	

**GROUP/CLASS DELIVERED PROGRAMMING –**

- This form is for program activities delivered through a group or class-type structure.
- Groups that are cognitive in nature must be separate for both male and female populations.
- When developing eligibility criteria, think about what behavior or characteristics in addition to addressing PCRs or jail utilization that the program is intended to address.
- Cognitive, Employability Skills, Education and Domestic Violence programs are all programs that would use this form.
- If this form is utilized for an Employability Skills group, the County must clearly identify how it is not a duplication of services provided through the Michigan Works Agency or other local workforce development agencies in (3.h.).
- G00 is an option for “other” group-type programming not specifically identified here (discuss with your assigned Community Corrections Specialist first).
- Pretrial defendants who are not convicted are not an eligible Target Population on this form. For exceptions, please discuss with assigned Community Corrections Specialist first.

**ANSWER ALL QUESTIONS USING “N/A” IF NOT APPLICABLE TO THIS PARTICULAR PROGRAM.**

<b>1. What is your target population?</b>
<input checked="" type="checkbox"/> Sentenced Felons <input type="checkbox"/> Other (include eligibility criteria):

<b>2. Describe the program:</b>
a. What is your referral process to this program? <b>Offenders can be sentenced to the program through a Court Order, Probation Referral, Attorney, Sheriff Department, Community Corrections Staff or self-referral.</b>
b. What assessment is used, identify the tool: <b>COMPAS</b>
c. Who completes the assessment? <b>MDOC Agents</b>
d. P.A. 511 states eligibility for programming <b>must include moderate to high risk.</b> Please select which needs the program will impact for your target population(s).
<b>Sentenced Felons:</b>



# Program Description

## Group Programming

You must identify the number of scales required for eligibility here: 1

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Vocational/Education            | <input type="checkbox"/> Social Environment                 | <input checked="" type="checkbox"/> Criminal Association |
| <input checked="" type="checkbox"/> Substance Abuse      | <input checked="" type="checkbox"/> Residential Instability |  |
| <input checked="" type="checkbox"/> Cognitive Behavioral | <input checked="" type="checkbox"/> Family Criminality      |  |
| <input checked="" type="checkbox"/> Criminal Personality | <input type="checkbox"/> Social Isolation                   |  |
| <input type="checkbox"/> Leisure & Recreation            | <input checked="" type="checkbox"/> Criminal Opportunity    |  |

**Gender Responsive Scales:**

- Experiences of Abuse as an Adult
- Experiences of Abuse as a Child
- Relationship Dysfunction
- Parental Stress

**Felony Probation Violator, regardless of COMPAS Assessment Score**

e. Describe the program design (programs using this description form should be delivered through a group or class structure):

i. Name of curriculum: **THINKING MATTERS**

ii. Identify what skills are taught in this program: **The Thinking Matters curriculum addresses the anti-social thinking patterns that lead to criminal behaviors. The program helps develop the skills necessary to identify thinking errors and establish replacement thoughts through thinking reports and role play.**

iii. Is the group open or closed? **Open**

iv. What is the minimum/maximum number of participants per group, as identified in the curriculum? **3 minimum / 8 maximum**

v. Minimum number of group sessions attended for successful completion: **A minimum of 6 for Jail based groups and a minimum of 8 for Community based groups.**

vi. If the group occurs in various locations, (jail/residential/community) identify how participants transition between them: **Participants may transition from the in jail program to the program provided in the community in order to achieve successful completion.**

f. Identify the training or credentials held by your service provider qualifying him/her to provide this service: **Certification by Abe French after attending training.**

g. How are delivered services and individual progress and participation documented by the service provider and provided to the probation agents and/or referral source? (i.e., progress notes, case notes and/or group notes) **Signed attendance sheets and progress notes kept in files, programs done via a video format have proof of attendance kept in files.**

h. Provide any other pertinent information you feel is necessary:

3. Evaluation is part of evidence-based principles which you **must** identify in section (a.). You are also **required** to develop **at least one key performance measure** for this program in section





# Program Description

## Group Programming

(b.). Be sure to include the data source, how its tracked and measured. NOTE: Successful completion of programming, if listed as the only key performance measure, is not sufficient.

**a. Describe how this program meets each of the following Evidence Based Principles:**

1. **Assess Actuarial Risk/Needs** - COMPAS assessment is completed by the Probation Agents.
2. **Enhance Intrinsic Motivation** - The curriculum is designed to allow participants to work at their own pace, allowing for a person-centered approach.
3. **Target Interventions (indicate all that apply)**
  - a. **Risk Principle: Prioritize supervision and treatment resources for higher risk offenders** -Program is designed for higher risk offenders.
  - b. **Need Principle: Target interventions to criminogenic needs** -Curriculum targets moderate to high-risk substance abuse and cognitive criminogenic responsive needs.
  - c. **Responsivity Principle: Be responsive to temperament, learning style, motivation, culture, and gender when assigning programs** -Each participant's navigation through the program will be tailored specifically to them based on their own life experiences and ability to grasp the concepts being taught.
  - d. **Dosage: Structure 40-70% of high-risk offenders' time for 3-9 months** -N/A
  - e. **Treatment Principle: Integrate treatment into the full sentence/sanction requirements** -Structured sentencing that may include jail and other community programming, treatment and sanctions.
4. **Skill Train with Directed Practice** - Curriculum, facilitated by program providers with appropriate credentials, utilizes cognitive behavioral techniques and is designed to encourage willful participation through group setting, role play and homework.
5. **Increase Positive Reinforcement** - Incentives are provided for each participant including a possible reduction in jail days upon completion of programming.
6. **Engage Ongoing Support in Natural Communities** - Utilizes participant's natural resources and makes referrals to relevant/helpful community-based supports and programming when appropriate.
7. **Measure Relevant Processes/Practices** - Captures statistical data regarding aspects of group participation and completion, including pre and post-tests.
8. **Provide Measurement Feedback** - Data is given and shared regarding participation/program success and effectiveness with stakeholders.

**b. Program Key Performance Measure - 70% of successfully completed participants will not be re-arrested within the respective county, tracking at 6 and 12 month intervals.**

Data Element - JIS, JDW and BIRs

Tracking Source -

1. **Who is tracking the Data Element? The Coordinator and Assistant Coordinator**
2. **How is it being tracked? By searching the data elements**



# Program Description

## Group Programming

3. At what frequency is it being tracked? Quarterly

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

Additional Program Key Performance Measure -

Data Element -

Tracking Source -

1. Who is tracking the Data Element?
2. How is it being tracked?
3. At what frequency is it being tracked?

**ALG-CX-1.1.2: Evaluating Potential  
Component Units and Reporting under GASBS No. 14, as Amended**

Reporting Entity: Tuscola County Financial Statement Date: 12-31-23  
 Unit Being Evaluated: Land Bank Authority  
 Completed by: Ashley Bennett Date: 4/22/24

**Instructions:** This checklist may be completed for each potential component unit being considered for inclusion in the financial reporting entity under GASBS No. 14, *The Financial Reporting Entity*, as amended by GASBS No. 39, *Determining Whether Certain Organizations Are Component Units*, GASBS No. 61, *The Financial Reporting Entity: Omnibus*, GASBS No. 80, *Blending Requirements for Certain Component Units*, GASBS No. 84, *Fiduciary Activities*, GASBS No. 85, *Omnibus 2017*, and GASBS No. 90, *Majority Equity Interests—an amendment of GASB Statements No. 14 and No. 61*. GASBS No. 84, Paragraph 7, was also amended by GASBS No. 97, *Certain Component Unit Criteria, and Accounting and Financial Reporting for Internal Revenue Code Section 457 Plans*, paragraph 5, effective upon issuance in June 2020, to apply the financial burden criterion guidance only to defined benefit pension and OPEB plans. A component unit is a legally separate organization for which the primary government is financially accountable or closely related. A component unit may be a governmental organization (except for a primary government), a nonprofit corporation, or a for-profit corporation. The term *reporting entity* as used in this checklist means the primary government and its component units. The term *PCU* refers to the potential component unit under consideration. The term *PG* refers to the primary government. The term *CU* refers to a PCU that has been determined to be a component unit.

**Legally Separate Organization**

1. Does the PCU have separate corporate powers that would distinguish it as being legally separate from the PG? (GASBS No. 14, para. 15)

YES  Go to Step 3.  
 NO  Go to Step 2.

Comments: \_\_\_\_\_

**Practical Considerations:**

- The PCU is generally considered to be a legally separate organization if it is a body corporate or corporate and politic or if the answers to all three of the following questions are "Yes."
  - Does the PCU have the capacity to have its own name?
  - Does the PCU have the right to sue and be sued in its own name without recourse to a state or local governmental unit?
  - Does the PCU have the right to buy, sell, lease, and mortgage property in its own name?
- A PCU may be legally separate even if it does not have all the corporate powers enumerated in the previous bullet. Professional judgment is required.
- The corporate powers granted to a separate organization are described in its corporate charter or in the legislation authorizing its creation.
- A PCU that is not legally separate from a PG should be considered, for financial reporting purposes, part of the PG that holds the corporate powers. Its financial data should be included with the financial data of the PG.

2. Does the PG hold the corporate powers of the PCU? (GASBS No. 14, para. 14)

- YES  Go to Step 26 and check the box.  
 NO  Go to Step 25 and check the box.

3. Does the PCU qualify as a PG? (GASBS No. 14, para. 20, footnote 4)

- YES  Go to Step 25 and check the box.  
 NO  Go to Step 4.

Practical Considerations:

- All general-purpose units of government—states, counties, cities, towns, etc.—as well as special purpose governments that are legally separate, have separately elected governing bodies, and are fiscally independent are PGs.
- A PG cannot be treated as a CU of any other government.
- GASBS No. 90, *Majority Equity Interests—an amendment of GASB Statements No. 14 and No. 61*, defines equity interest and the accounting for a majority equity interest both when it meets and does not meet the definition of an investment. PGs report a majority equity interest in a legally separate entity as a CU only if that interest does not meet the definition of an investment.

### Financial Accountability

4. Does the PG hold a majority equity interest in the PCU? (GASBS No. 14, para. 55, as amended by GASBS No. 61, para. 10, and GASBS No. 90, para. 7)?

- YES  Go to Step 5.  
 NO  Go to Step 6.

Comments: \_\_\_\_\_

Practical Consideration:

- GASBS No. 90 defines an equity interest as an interest in a legally separate organization in which the governmental unit (1) owns shares of the organization's stock (or equivalent in a noncorporate entity) or (2) has an explicit and measurable right to the net resources of that organization. A governmental unit typically acquires such an interest by expending financial or capital resources.

5. Does the majority equity interest in the PCU meet the definition of an investment as defined in GASBS No. 72, para. 64? (GASBS No. 90, para. 5)

- YES  Go to Step 25 and check the box.  
 NO  Go to Step 13.

Comments: \_\_\_\_\_

Practical Considerations:

- GASBS No. 72, para. 64, defines an investment as a security or other asset that (1) a governmental unit holds primarily to generate income or profit and (2) has a present service capacity based solely on the asset's ability to generate cash or generate cash when sold.
- GASBS No. 90, para. 7, indicates that holding a majority equity interest in a legally separate organization that does not meet the definition of an investment results in the governmental unit being financially accountable for the organization.

6. Does the PG appoint a voting majority of the PCU's governing body? (GASBS No. 14, paras. 21–24, as amended by GASBS No. 61, para. 6a)

YES  Go to Step 7.  
NO  Go to Step 8.

Comments: \_\_\_\_\_

Practical Considerations:

- In the absence of continuing appointment authority, the ability of a PG to unilaterally abolish a PCU that it created also provides the basis for ongoing accountability. In this case, check "Yes" for this step.
- PG officials serving on the governing body of the PCU as required by law (and, thus, technically not appointed by the PG) are, for purposes of this test, treated as though they were appointed by the PG.
- Appointments by the PG include appointments made by (1) any PG official(s)—whether elected or appointed, (2) anyone to whom a PG official(s) has delegated appointment authority, (3) an official(s) of a component unit of the PG, or (4) votes taken by a group of which PG and/or PG component unit officials are a majority. The appointments do not have to be appointments by the governing body of the PG nor do they have to be direct appointments by any official of the PG itself. (GASB *Comprehensive Implementation Guide*, Question 4.18.8 and related questions)
- If financial decisions require the approval of a simple majority, and the PG appoints a simple majority, the PG appoints a voting majority. On the other hand, if financial decisions require the approval of a two-thirds majority, the PG must appoint at least two-thirds of the voting members in order to appoint a voting majority.
- A PG's appointment authority should be substantive and not be limited by a nomination process. For instance, state statutes or local ordinances may require a PG to select its appointees from a slate of candidates provided by one or more individuals or groups other than the PG's officials or appointees. This would not be substantive appointment authority. It is also not substantive if the PG's responsibility is limited to confirming appointments made by individuals or groups other than the PG's officials or appointees. This responsibility has more to do with compliance than substantive authority.
- A PG is considered to be accountable for a PCU as long as continuing appointments are made by the PG, even if those appointments are made by a subsequent administration.
- A PG that appoints a voting majority of the governing body of a CU of another government should make the disclosures required for related organizations.

7. Can the PG impose its will on the PCU by significantly influencing the program, projects, activities, or level of service performed by the PCU? (GASBS No. 14, paras. 25–26)

YES  Go to Step 13.  
NO  Go to Step 9.

Comments: \_\_\_\_\_

Practical Considerations:

- The existence of any one of the situations covered by the first five bullets clearly indicates that the PG has the ability to impose its will on the PCU. Other conditions, covered by the last bullet, may also indicate a similar ability.
  - Can the PG remove appointed members of the PCU's governing body at will?
  - Does the PG have the ability to modify or approve the budget of the PCU?
  - Does the PG have the ability to modify or approve rate or fee changes affecting revenues, such as water usage rate increases?
  - Does the PG have the ability to veto, overrule, or modify the decisions (other than those in the two preceding bullets) of the PCU's governing body?
  - Does the PG have the ability to appoint, hire, reassign, or dismiss those persons responsible for the day-to-day operations of the PCU?
  - Are there other conditions that indicate that the PG has the ability to impose its will on the PCU?

- In determining whether imposition of will exists, a distinction should be made between substantive approvals and ministerial (or compliance) approvals. For example, budgetary approval is substantive if the PG has the authority to reduce a PCU's budget. An example of ministerial approval is a requirement for a state agency to review a local government's budget in evaluating qualifications for state funding. Only substantive approvals show imposition of will. Even though both are called approvals, compliance approval is basically a review function.

8. Is the PCU fiscally dependent on the PG? (GASBS No. 14, para. 21b, as amended by GASBS No. 61, para. 6b–f)

- YES  Go to Step 9.  
 NO  Go to Step 10.

Comments: \_\_\_\_\_

Practical Considerations:

- The PCU is fiscally dependent on the PG when the PG has substantive approval authority over any one or more of the following:
  - The PCU's budget. The PG has the authority to approve or modify that budget.
  - The PCU's tax levy or other rates or charges.
  - The PCU's issuance of bonded debt (if the PCU has legal authority to issue bonded debt at all).
- PCU may be fiscally dependent on a PG regardless of whether it receives financial assistance from the PG.

9. Does a financial benefit or burden exist? (GASBS No. 14, paras. 21, 27, and 34–38, as amended by GASBS No. 61, para. 6; GASBS No. 84, para. 7; and GASBS No. 97, para. 5)

- YES  Go to Step 13.  
 NO  Go to Step 10.

Comments: \_\_\_\_\_

Practical Considerations:

- A PCU has a financial benefit or burden relationship with the PG if any one of the following is "Yes."
  - Is the PG legally entitled to or can it otherwise access the PCU's resources?
  - Is the PG legally obligated or has it otherwise assumed the obligation to finance the deficits of, or provide financial support to, the PCU?
  - Is the PG obligated in some manner for the debt of the PCU?
- Exchange transactions, such as the purchase or sale of goods or services, between the PCU and the PG should not be considered manifestations of a financial benefit or burden relationship.
- A financial benefit or burden relationship exists if the PG is either directly or indirectly entitled to the resources of or is either directly or indirectly obligated for the deficits or debts of a PCU. An indirect benefit or burden exists if one or more of the PG's CUs is entitled to the resources or is obligated for the deficits or debts of the PCU.
- Including a CU is subject to the considerations in GASBS No. 14, paragraph 38, as amended, regarding the potential for dual inclusion.
- GASBS No. 84, paragraph 7, as amended by GASBS No. 97, explains that a financial burden exists for legally separate entities that administer defined benefit pension or OPEB plans that are administered through trusts and are within the scope of GASBS No. 67 or 74, if the PG is legally obligated or has otherwise assumed the obligation to make contributions to the defined benefit pension or OPEB plan. PGs may already be reporting these entities as CUs even before they implemented GASBS No. 84 and the implementation of GASBS No. 84 only provides a GASB standard for their current reporting. If these entities have not been reported as CUs, PGs will begin reporting them with the implementation of GASBS No. 84, which is effective for reporting periods beginning after December 15, 2019, as amended.

10. Is the PG legally obligated or has it otherwise assumed the obligation to make contributions to the defined benefit pension or other postemployment benefit plan that is administered through a trust and is within the scope of GASBS No. 67 or 74? (GASBS No. 84, para. 7, as amended by GASBS No. 97)

YES  Go to Step 22 and check "YES."  
 NO  Go to Step 11.

Comments: \_\_\_\_\_

### PCUs Included in the Reporting Entity Although the PG Is Not Financially Accountable

In some instances, the PCU should be included in the reporting entity (even if the previous criteria are not met), if exclusion would render the reporting entity's financial statements misleading. (GASBS No. 14, paras. 12, 39, 40, 41, and 55, as amended by GASBS No. 61, paras. 5–6 and para. 10; GASBS No. 39, paras. 4 and 5)

11. Should the PCU be included in the reporting entity because of the nature and significance of its relationship with the PG? (GASBS No. 14, para. 40a, as amended by GASBS No. 39) (See the GASBS No. 39, para. 5, criteria in the practical considerations.)

YES  Go to Step 23 and check the box.  
 NO  Go to Step 12.

Comments: \_\_\_\_\_

#### Practical Considerations:

- The PCU should be included in the reporting entity if *all* of the following criteria established by GASBS No. 39, para. 5, are met:
  - Is the PCU a tax-exempt organization?
  - Are the economic resources received or held by the PCU held entirely, or almost entirely, for the direct benefit of the PG, its CUs, or its constituents? (Direct benefit is not dependent upon an actual transfer during the period, but rather on the notion that all or almost all of their sources received or held will ultimately be used for the PG, its CUs, or its constituents. This criterion is intended to exclude organizations that benefit multiple constituent groups, such as federated fund-raising organizations. If the organization has the ability to redirect its resources at its discretion, so that all or almost all would not be used for the benefit of the PG, it would not meet this criterion.)
  - Is the PG, or its CUs, entitled to, or does it have the ability to otherwise access, a majority of the economic resources received by the PCU?
  - Are the economic resources received or held by the PCU that the PG or its CUs is entitled to, or has the ability to otherwise access, significant to the PG?
- The ability of a PG to "otherwise access" resources does not necessarily mean control. The ability to otherwise access may be demonstrated in various ways. For example:
  - The PG or its CUs have historically received, directly or indirectly, a majority of the economic resources of the PCU.
  - The PCU has previously received and honored requests from the PG for resources.
  - The PCU is a financially interrelated organization, as defined by FASBS No. 136, *Transfers of Assets to a Not-for-Profit Organization or Charitable Trust That Raises or Holds Contributions for Others*. [Note: GASBS No. 39, para. 5, and the related GASB Codification paragraph (GASB Cod. sec. 2100.140, footnote 8) have retained this reference to FASBS No. 136.]
- FASBS No. 136, para. 13, defines *financially interrelated organizations* as ones where the relationship between them has both of the following characteristics:
  - One has the ability to influence the operating and financial decisions of the other. For example: (1) they are affiliates, (2) one has considerable representation on the governing board of the other, (3) the charter or bylaws of one limits its activities to those that are beneficial to the other, and (4) an agreement between them allows one to actively participate in policymaking processes of the other, such as setting organizational priorities, budgets, and management compensation.
  - One has an ongoing economic interest in the net assets of the other.

- An example of an affiliated organization that may be included is a nonprofit corporation whose purpose is to benefit a PG by soliciting contributions and managing the funds.

12. In management's professional judgment, should this PCU be included in the reporting entity because, due to its close relation to, or financial integration with, the PG, its exclusion would render the financial statements misleading? (GASBS No. 14, para. 12, as amended by GASBS No. 61, paras. 4 and 5)

- YES  Go to Step 13.  
 NO  Go to Step 25 and check the box.

Comments: \_\_\_\_\_

Practical Consideration:

- GASBS No. 14, para. 39, as amended by GASBS No. 61, para. 4, states that the inclusion decision should be based on the nature and significance of the PCU's relationship with the PG.

**Including the PCU**

In some instances, an organization may meet the criteria for inclusion in more than one reporting entity. However, an organization should be included in only one reporting entity. In these cases, judgment must be exercised by management (of the reporting entities) as to which reporting entity the organization should be included. (GASBS No. 14, para. 38, as amended by GASBS No. 61, para. 6g)

13. Could the PCU be part of another financial reporting entity?

- YES  Go to Step 14.  
 NO  Go to Step 15.

Comments: \_\_\_\_\_

14. Has the accountant concluded that the PCU should be included in the financial statements of this reporting entity?

- YES  Go to Step 15.  
 NO  Go to Step 25 and check the box.

Comments: \_\_\_\_\_

**Financial Statement Presentation**

15. Is the CU engaged in a fiduciary activity? (GASBS No. 14, para. 19, as amended by GASBS No. 84, para. 5)

- YES  Go to 22 and check the box.  
 NO  Go to Step 16.

Comments: \_\_\_\_\_

Practical Considerations:

- The checklist at ALG-CX-1.9 may be completed to determine if the CU is engaged in a fiduciary activity in accordance with GASBS No. 84.



- PGs that have a majority equity interest in a PCU that meets the definition of an investment must still report the PCU as an investment, generally measured using the equity method of accounting. If the PG is a special purpose government engaged only in fiduciary activities or the interest is held by a fiduciary fund, an endowment, or a permanent fund, the investment should be measured at fair value. (GASBS No. 90, paras. 5 and 6)

\_\_\_\_ 26. YES. The PCU is part of the PG and by definition therefore part of the reporting entity. However, the PCU is *not* a CU. It is to be reported following the same guidance as used for all other "organizations" (i.e., funds, organizations, institutions, agencies, department, and offices) that make up the PG's legal entity. (GASBS No. 14, para. 14)

Comments on Conclusion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Does the CU provide services entirely, or almost entirely, to the PG or otherwise exclusively, or almost exclusively, benefit the PG even though it does not provide services directly to it? (GASBS No. 14, para. 53b, as amended by GASBS No. 61, para. 8; GASBS No. 85, para. 4)

- YES  Go to Step 24 and check the box.  
 NO  Go to Step 20.

Comments: \_\_\_\_\_

Practical Considerations:

- Usually, the services provided by a blended CU are financing services provided solely to the PG.
- A CU that provides services to more than just the PG should be blended if the services provided to others are insignificant to the overall activities of the CU.

20. Is the CU's debt, including leases, expected to be repaid entirely or almost entirely with the PG's resources? (GASBS No. 14, para. 53c, as amended by GASBS No. 61, para. 8; GASBS No. 85, para. 4)

- YES  Go to Step 24 and check the box.  
 NO  Go to Step 21.

Practical Consideration:

- Repayment generally consists of the PG making a pledge or continuing appropriation to cover debt service, which the CU, in turn, pledges as the primary source or security for repayment of the debt.

21. Is the CU organized as a nonprofit corporation with the PG as the sole corporate member as identified in the CU's articles of incorporation or bylaws? (GASBS No. 80, para. 5)

- YES  Go to Step 24 and check the box.  
 NO  Go to Step 23 and check the box.

Practical Consideration:

- GASBS No. 80 revised Question 4.30.1 of the GASB *Comprehensive Implementation Guide* to clarify that organizations that meet the criteria in GASBS No. 39, para. 5, should be discretely presented, even if they also meet the criterion in GASBS No. 14, paras. 53b or 53c, as amended by GASBS No. 61, para. 8, or GASBS No. 80, para. 5.

### Conclusion

- \_\_\_ 22. YES. This is a CU that should be included in the financial reporting entity as a fiduciary CU. Fiduciary CUs (including their own fiduciary CUs) are combined with the fiduciary funds of the PG and presented in aggregate based on the classification of the fund [pension (and other employee benefit) trust funds, investment trust funds, private-purpose trust funds, custodial funds].
- X 23. YES. This is a CU that should be included in the financial reporting entity and presented discretely.
- \_\_\_ 24. YES. This is a CU that should be included in the financial reporting entity and presented as a blended entity.
- \_\_\_ 25. NO. The PCU is not a CU.

Practical Considerations:

- If PG officials appoint some, or all, governing body members of an organization that is not included as a component unit in the PG's reporting entity, the PG should disclose, in the notes to its financial statements, the nature of its accountability for the related organization. The disclosures may be summarized for groups of related organizations with similar relationships with the PG (GASBS No. 14, para. 68).

**Summary of Audit Submission Dates  
for the Tuscola County Road Commission and the  
Road Commissions of Our Comparable Counties**

	<u>2023</u>	<u>2022</u>	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>
<b>Tuscola County Road Commission</b>	Not complete	06/29/2023	06/28/2022	07/29/2021	07/31/2020	07/01/2019
Days before due date		1 Day	2 Days	Late - Pandemic	Late - Pandemic	Late 1 Day
<b>Montcalm County Road Commission</b>	03/29/2023	03/24/2023	03/17/2022	03/01/2021	02/09/2020	02/05/2019
Days before due date	1 Day	7 Days	14 Days	30 Days	50 Days	54 Days
<b>Gratiot County</b>	02/27/2024	02/24/2023	02/22/2022	02/23/2021	02/19/2020	02/21/2019
Days before due date	33 Days	35 days	37 days	36 days	40 days	38 days
<b>St. Joseph County</b>	Not complete	05/08/2023	05/02/2022	06/16/2021	05/14/2020	05/13/2019
Days before due date		53 days	59 days	14 days	47 days	48 days
<b>Sanilac County</b>	Not complete	06/08/2023	05/25/2022	05/24/2021	05/12/2020	06/13/2019
Days before due date		22 days	36 days	37 days	49 days	17 days
<b>Shiawassee County</b>	Not complete	06/14/2023	05/11/2022	05/12/2021	05/20/2020	05/31/2019
Days before due date		16 days	50 days	49 days	41 days	30 days

**Ionia County**

Ionia County does not have a Road Commission; they have a Road Department within the County

**Tuscola County  
Statement of Activities  
For the Year Ended December 31, 2023**

Functions/Programs	Expenses	Program Revenues			Net (Expense) Revenue			Component Units
		Charges for Services	Operating Grants and Contributions	Capital Grants and Contributions	Governmental Activities	Primary Government Business-type Activities	Total	
<b>Primary Government</b>								
<b>Governmental Activities:</b>								
Interest on long-term debt	\$ 366,398	\$ --	\$ --	\$ --	\$ (366,398)	\$ --	\$ (366,398)	\$ --
Community and economic development	973,972	96,348	--	--	(877,624)	--	(877,624)	--
Legislative	175,719	--	--	--	(175,719)	--	(175,719)	--
Judicial	7,838,572	1,371,670	3,121,279	--	(3,345,623)	--	(3,345,623)	--
General government	4,496,724	1,562,261	1,068,100	--	(1,866,363)	--	(1,866,363)	--
Public safety	10,363,628	2,637,136	667,281	--	(7,059,211)	--	(7,059,211)	--
Public works	4,302,506	127,136	25,080	--	(4,150,290)	--	(4,150,290)	--
Health and welfare	8,911,637	782,720	6,816,990	--	(1,311,927)	--	(1,311,927)	--
Recreation and culture	17,992	22,448	--	--	4,456	--	4,456	--
<b>Total Governmental Activities</b>	<b>37,447,148</b>	<b>6,599,719</b>	<b>11,698,730</b>	<b>--</b>	<b>(19,148,699)</b>	<b>--</b>	<b>(19,148,699)</b>	<b>--</b>
<b>Business-type Activities:</b>								
Tuscola County Medical Care Facility	23,334,463	23,837,251	747,987	--	--	1,250,775	1,250,775	--
Tax Foreclosure	428,872	1,132,839	--	--	--	703,967	703,967	--
Combined Revolving Tax	--	696,835	--	--	--	696,835	696,835	--
<b>Total Business-type Activities</b>	<b>23,763,335</b>	<b>25,666,925</b>	<b>747,987</b>	<b>--</b>	<b>--</b>	<b>2,651,577</b>	<b>2,651,577</b>	<b>--</b>
<b>Total Primary Government</b>	<b>\$ 61,210,483</b>	<b>\$ 32,266,644</b>	<b>\$ 12,446,717</b>	<b>\$ --</b>	<b>\$ (19,148,699)</b>	<b>\$ 2,651,577</b>	<b>\$ (16,497,122)</b>	<b>--</b>
<b>Component Units</b>								
Tuscola County Landbank	\$ 120,746	\$ --	\$ --	\$ --	--	--	--	(120,746)
<b>Tuscola County Road Commission</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>--</b>
Tuscola County Drain Commission	2,500,937	2,548,758	--	--	--	--	--	47,821
<b>Total Component Units</b>	<b>\$ 2,621,683</b>	<b>\$ 2,548,758</b>	<b>\$ --</b>	<b>\$ --</b>	<b>--</b>	<b>--</b>	<b>--</b>	<b>(72,925)</b>
<b>General Purpose Revenues and Transfers:</b>								
<b>Revenues</b>								
Property taxes					18,890,585	523,507	19,414,092	--
Intergovernmental					1,322,801	--	1,322,801	500,000
Interest income					1,000,345	366,334	1,366,679	225,934
<b>Transfers</b>					<b>1,079,097</b>	<b>(1,079,097)</b>	<b>--</b>	<b>--</b>
<b>Total General Revenues and Transfers</b>					<b>22,292,828</b>	<b>(189,256)</b>	<b>22,103,572</b>	<b>725,934</b>
<b>Change in Net Position</b>					<b>3,144,129</b>	<b>2,462,321</b>	<b>5,606,450</b>	<b>653,009</b>
<i>Net Position at Beginning of Period</i>					<i>16,431,884</i>	<i>24,703,489</i>	<i>41,135,373</i>	<i>20,846,806</i>
<b>Net Position at End of Period</b>					<b>\$ 19,576,013</b>	<b>\$ 27,165,810</b>	<b>\$ 46,741,823</b>	<b>\$ 21,499,815</b>



Tuscola County

Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

Fwd: [EXTERNAL] MAC Legislative Update 5-3-24

1 message

Tom Young <tyoung@tuscolacounty.org>

To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

Thu, May 9, 2024 at 9:31 AM

Grant writing

----- Forwarded message -----

From: Michigan Association of Counties <melot@micounties.ccsend.com>

Date: Fri, May 3, 2024 at 1:06 PM

Subject: [EXTERNAL] MAC Legislative Update 5-3-24

To: <tyoung@tuscolacounty.org>

Donate to MACPAC

May 3, 2024

LEGISLATIVE UPDATE

- [County leaders, legislators discuss policy needs at 2024 conference](#)
- [FY25 state budget bills, with key trust fund, advance another step](#)
- [Governor signs trial court funding extension](#)
- [Troubling election bills get Senate hearing](#)
- [More than 60 commissioners graduate from MAC academy](#)
- [MACSC provides \\$250 prizes to 2 lucky conference attendees](#)
- [New tool provides 'one-stop shop' for your grant searches](#)



**Issue Brief**  
MICHIGAN COUNTIES  
LEGISLATIVE CONFERENCE  
Lansing Center | DoubleTree Hotel | April 29 - May 1, 2024

**Background**

The Medicaid Inmate Exclusion Policy (MIEP) prohibits states from billing Medicaid for any inmate care unless the covered individual requires a hospital stay of at least 24 hours. MIEP also denies federal Medicaid benefits to individuals who are still presumed innocent under the Constitution.

Approximately two-thirds of the county jail population across the United States are pre-trial detainees who have not been convicted of a crime. County jails are now some of the largest behavioral health care providers, with our national mental health crisis concentrated in county jails. Not only do counties provide these necessary services, but they are paying to fill the gap for those who are awaiting trial – and local taxpayers are paying for it. MIEP results in the full cost of health care for uninsured inmates being shifted to counties and local taxpayers, rather than the federal-state-local government partnership for safety-net services.

**MAC's Efforts**

- MAC has prioritized reforming the Medicaid Inmate Exclusion Policy at the state and federal level. At the state level, MAC has pushed the State of Michigan to apply for a Section 1115 Re-entry waiver. With federal approval, the waiver would exempt Michigan from MIEP with specific caveats. Ideally, an approved proposal would include Medicaid coverage for county jail inmates and juvenile detainees for 90 days prior to release.
- MAC has partnered with other local stakeholders to help the Michigan Department of Health and Human Services to craft a proposal that reflects the needs of counties.
- MAC supports multiple federal legislative initiatives aimed at reforming the MIEP and advocates for such changes to Michigan's federal delegation alongside NACO.

**Medicaid Inmate Exclusion Policy**




**Message to Lawmakers**

- Counties and local taxpayers cannot and should not carry the burden of healthcare costs for uninsured inmates when federal benefits are available.
- The Michigan Department of Health and Human Services must join 20 states in applying for the Section 1115 Re-entry Waiver to allow for Medicaid coverage for inmates up to 90 days prior to release.
- The policy is not only a cost burden on counties, but also an infringement upon the constitutional rights of pre-trial detainees who have not been convicted of a crime.

[Check out MAC's new Issue Briefs!](#)

- [Use cyber courses to bolster your county's defenses](#)
- [Electronic options now offered on payments from state](#)
- [Report offers suggestions on spending opioid dollars](#)
- [Staff picks](#)



## MAC Events

### County leaders, legislators discuss policy needs at 2024 conference

"Success is not final. Failure is not fatal. It is the courage to continue that counts." With these words from Winston Churchill, Dr. Peter Cressy concluded his keynote address to the 2024 Michigan Counties Legislative Conference on Tuesday in Lansing.

Cressy spoke to a filled conference hall at the event, which drew nearly 300 county leaders and others to Lansing this week.



Earlier on Tuesday, MAC honored its County Advocate Award winners for legislative work done in 2023.

Rep. Amos O'Neal (D-Saginaw) was lauded for championing Revenue Sharing Trust Fund legislation that would fulfill a longstanding MAC priority. Rep. Curt VanderWall (R-Mason) was honored for "commitment to preserving local control and championing legislation that helps counties provide services to the best of their abilities."

During a legislative panel on Wednesday, attendees heard all four participants — Sens. Aric Nesbitt and Jeremy Moss and Reps. John Fitzgerald and Graham Filler — pledge support for "proper" revenue sharing, with Moss, Filler and Fitzgerald endorsing the trust fund reform effort.

National Association of Counties President Mary Jo McGuire of Ramsay County, Minnesota, not only delivered an address on her "ForwardTogether" initiative but spent two days with attendees making connections at receptions and presentations.

“We’re pleased at well everything came together,” said Executive Director Stephan Currie. “We had more than 30 legislators attend our reception on Tuesday evening, at a time when there were several other major events going on in Lansing. This shows the importance of counties at the state level.”

Materials from the conference’s Plenary sessions and 12 policy breakouts [can be found at MAC’s website](#). In coming weeks, MAC also will be adding video segments from the event to its [YouTube channel](#).

MAC’s next major educational event is the 2024 Policy Summit, to be held June 25 in Lansing and via zoom. Details and registration information should be released in mid-May.

## State Budget

### FY25 state budget bills, with key trust fund, advance another step

Budget work continued in the Legislature this week with various spending bills gaining approval of each chamber’s full appropriations committee.

[Click here to see a review of county spending issues](#) from the April 26 Legislative Update.

A focus of MAC’s budget work right now is enactment of its Revenue Sharing Trust Fund proposal, as each chamber’s appropriators have now endorsed the concept, but with different provisions.

As detailed in this [Issue Brief](#) and by Governmental Affairs Director Deena Bosworth [at this week’s Legislative Conference](#), House and Senate appropriations panels want to set up a dedicated trust fund using a portion of state sales tax receipts. The Senate version would secure a larger slice than the House’s, yielding \$52 million more for counties in FY25 alone.

To gain the higher amount, MAC is working with legislators to address how the budget handles a separate “public safety fund” pushed by House Democrats.

As budget work accelerates in advance of the Legislature’s June 30 deadline to finish its fiscal work, keep an eye out for MAC Advocacy Alerts so you can add your voice to MAC’s call for maximizing revenue sharing.

For more information on MAC’s budget advocacy, contact Deena Bosworth at [bosworth@micounties.org](mailto:bosworth@micounties.org).



### Revenue Sharing Trust Fund

#### Background

MAC has spent years on legislation to carve out a portion of the state sales tax for statutory revenue sharing, which would thereby secure those dollars for use on revenue sharing only.

In fiscal 2024 budget, the governor sought a 17 percent increase to county revenue sharing, with some ongoing funding and one-time allocations. But during final negotiations, the increase was lowered to just 7 percent. These arbitrary allocations do not track with the increase the state sees in revenue from the state sales tax.

House Bills 4274-75 establish a Revenue Sharing Trust Fund, allocating 8 percent of the first 4 percentage points of the state sales tax to it. These bills passed the House in November 2023 by 106-4.

#### Message to Lawmakers

- Revenue sharing was established because locals gave up certain taxing authority in exchange for the sharing of state revenue.
- The growth has not kept up with the growth of state revenue.
- It’s time to create a growing revenue source that tracks with state growth.
- That revenue should be protected from being redirected to other state projects.
- Counties rely on this unrestricted revenue source to provide for many of the basic service needs of the county.
- Every county has the same mandates, but they use different budget accounts to cover that work.

#### FY 25 PROPOSALS



- 9.1% of first 4 percentage points of state sales tax
- Roll-in CIP and earmarked \$\$
- New distribution for amounts over FY24 base of \$256.2M
- No Public Safety Trust Fund
- 8% of the first 4 percentage points of state sales tax
- Roll-in CIP & earmarked \$\$
- Carves out 1.5% of first 4 percentage points of state sales tax for Public Safety Trust Fund (\$110M) - few \$\$ to counties
- No dedicated revenue stream
- 5% increase in base
- 3% for allocating ARPA funds
- 2% for public safety

## Courts

## Governor signs trial court funding extension

A key part of funding for trial courts in Michigan is again secure for another 30 months after Gov. Gretchen Whitmer signed [House Bill 5392](#) this week.

Extension of the ability of local judges to impose fees, this time to Dec. 31, 2026, was a [MAC priority for the 2024 legislative year](#). HB 5392, by Rep. Sarah Lightner (R-Jackson), moved the extension of fee authority from May 1, 2024 to Dec. 31, 2026.



A related measure, [House Bill 5534](#), by Rep. Kelly Breen (D-Oakland), has not yet received a final vote of concurrence in the House. HB 5534 would require the State Court Administrative Office to complete data collection and turn over to the Legislature by May 1, 2026, for advancement towards implementing the [2019 Trial Court Funding Commission recommendations](#).

MAC supports HB 5534 and long has supported adoption of the funding commission's recommendations.

For more information on this issue, contact Samantha Gibson at [gibson@micounties.org](mailto:gibson@micounties.org).

## Elections

### Troubling election bills get Senate hearing

Election bills that would impose sweeping new duties on local governments received a hearing in a Senate committee this week. Known collectively as the "Michigan Voting Rights Act," [Senate Bills 401-404](#) were introduced to bolster federal law and voting rights in the state for members of a protected class and for disabled electors. While the intent is straightforward, the practical implementation would be complex and could expose locals to frivolous legal challenges.



Local governments will have an incalculable degree of legal liability. SB 401, by Sen. Darin Camilleri (D-Wayne), for example, prohibits a local government from impairing a protected class from participating in elections or the political process, but many of the listed impairments are beyond the control of a local government or conflict with Michigan election law.

The other major bill of concern is SB 403, by Sen. Stephanie Chang (D-Wayne), which mandates local governments must provide language assistance for elections. This includes providing translated signage, forms, ballots and a communication system that offers translation to electors. The local government will have to rely on the Secretary of State's Office to produce these materials.

**MAC opposed the bills** when they were first introduced but is still working through the latest amendments. We will be meeting with bill sponsors and various stakeholders in the coming weeks in anticipation of further committee discussion.



For more information on this issue, contact Madeline Fata at [fata@micounties.org](mailto:fata@micounties.org).

## MAC News

### More than 60 commissioners graduate from MAC academy

MAC's County Commissioner Academy (CCA) honored its largest graduating class ever during a Plenary session on Tuesday, April 30 at the 2024 Michigan Counties Legislative Conference.

Sixty-six county commissioners earned recognition as "certified" or "advanced." Commissioners who attended the conference were presented their certificate by MAC President Jim Storey. Those who were unable to attend will be shipped their certificate.



Gail Patterson-Gladney of Van Buren receives her certificate from MAC President Jim Storey.

Participants in CCA earn continuing education "hours" by attending designated events and workshops. "Certification" is offered at two different levels: "Certified" is reached at 10 hours, while "Advanced" is reached with 20 hours. In addition to MAC events, credit-qualified presentations also are offered by MSU Extension and the Michigan Department of Treasury.

For a full list of this year's graduates and more information on the academy, [click here](#).

## MAC News

### MACSC provides \$250 prizes to 2 lucky conference attendees

Commissioner Jeri Strong of Mecosta County and Administrator Katie Zeits of Benzie County (pictured) were the winners of the MACSC Exhibitor Bingo drawing at the 2024 Legislative Conference on Wednesday, May 1.



Each received \$250 after their completed bingo cards were drawn from a bowl by MAC President Jim Storey and Executive Director Stephan Currie.

In the last decade, [MAC Service Corp.](#) has issued more than \$7,000 in cash prizes to attendees of MAC's two major conferences each year.

## Finance

### New tool provides 'one-stop shop' for your grant searches



Help with the perennial challenge of finding and securing grants for county initiatives is here.

**The MI Funding Hub** is a new effort led by the Michigan Municipal League and state Department of Labor and Economic Opportunity to develop one-stop shop for grants. The hub provides open access to a searchable database of federal and state funding sources as well as philanthropic foundations that can be queried based on type of applicant and funding category as funding becomes available.

The hub provides a monthly newsletter announcing new grants, webinars and grant readiness training. Local officials also have free access to hands-on technical assistance from a team of experts across many fields through the MI Funding Hub helpdesk. After receiving your helpdesk request form, the team will schedule a meeting to discuss funding needs, answer funding questions, direct applicants to appropriate funding sources and coach you on developing application strategies.

Services provided through the MI Funding Hub do not include writing grant applications, but MAC's CoProPlus subsidiary does have a [pre-negotiated grant writing contract available](#).

Get started by watching a [recorded introductory webinar](#).

## Learning Opportunity

### Use cyber courses to bolster your county's defenses

It can happen to you.

In early April, Grand Traverse County was hit with a "[spear phishing](#)" attack through its email system. The county's IT team was able to ward off the assault, but this is yet

another reminder that digital security is a fundamental duty for any county government in the 21<sup>st</sup> century.

The [NACo Cyberattack Simulation](#) is a reality-based simulation that prepares county risk leaders for cyberattacks by assessing counties' current state of readiness and identifying gaps. This simulation will help attendees evaluate their incident response procedures and tools and guide them in developing a detailed cyberattack response strategy.

Upcoming sessions will focus on:

- June 2024: Supplier Management Access
- September 2024: Financial Access
- December 2024: Cloud Security

The NACo Cyberattack Simulation is designed for cybersecurity managers, their teams and those responsible for risk defense, protection, and recovery, including HR, policy management, finance, public



safety and emergency services. It requires 30-60 minutes per day for one week. Activities can be completed on the participants' schedule and accessed online anywhere.

The retail price of the one week Cyberattack Simulation is \$795 per enrollee; however, the simulations are fully sponsored for all counties, bringing your price down to ZERO.

To learn more or enroll, email [moderator@pdaleadership.com](mailto:moderator@pdaleadership.com).

## Finance

### Electronic options now offered on payments from state

The Michigan Municipal Services Authority (MMSA) and Local Community Stabilization Authority (LCSA) are working to ensure local governments are receiving the state reimbursements the Legislature has worked hard to protect. These reimbursements include personal property tax (PPT) reimbursement, Fire Protection Grants, ELPHA and Metro Act payments.



The LCSA issues thousands of checks each year to local governments and a number of these remain uncashed. Issuing physical checks means there's a greater chance of those funds being lost.

While we do work with the local units to try to locate checks and/or reissue them, if necessary, this process can take months.

As a result, we are commencing an electronic payment outreach program with the goal of ensuring local governments receive payments required under state statute(s). Our partners at Plante Moran are launching an outreach effort to contact local units of government directly to set up electronic payment.

LCSA offers two options for electronic deposit: through an ACH or through a Michigan Class participant-to-participant transfer.

If you would like to begin the simple process of converting to electronic payment, email us at [electronicpayment@lcsami.gov](mailto:electronicpayment@lcsami.gov). For questions, please contact Samantha Harkins, [ceo@michiganmsa.org](mailto:ceo@michiganmsa.org).

## Public Health

### Report offers suggestions on spending opioid dollars

Recommendations on how counties could deploy their opioid settlement funds are included in a new report paid for by the Michigan Opioid Partnership.



The partnership, a public-private collaborative including representatives from Michigan state government and key philanthropic organizations and the Center for Health and Research Transformation (CHRT) at the

University of Michigan, worked to understand the needs and challenges of community-based recovery organizations in supporting recovery for individuals and families.

CHRT researched gaps and identified opportunities to address those gaps with relation to opioid settlement funding and to develop potential recommendations for state government and local governments. The report outlines areas for investment with opioid settlement funds in the areas of recovery and harm reduction, highlighting specific practices and pointing to Michigan-specific examples of these activities. Primary strategies presented in the report include recovery housing, peer support, recovery community organizations, engagement centers and jail services.

Read the full report [here](#).

For additional information, contact Amy Dolinky at [dolinky@micounties.org](mailto:dolinky@micounties.org).

## Staff Picks

### Staff picks

- [Michigan Policy Insiders Panel and 88th State of the State Survey](#) (MSU Institute for Public Policy and Social Research)
- [DHS announces \\$1.8 billion in preparedness grants to advance county security and resilience](#) (NACo News)
- [Nine states approve, pursue speed, red-light camera rule revisions](#) (Landline Media)
- [Satellite image reveals strange warm spot in Lake Michigan](#) (MLive)



## MAC Services

### MAC Jobs Hub

Visit the Jobs Hub



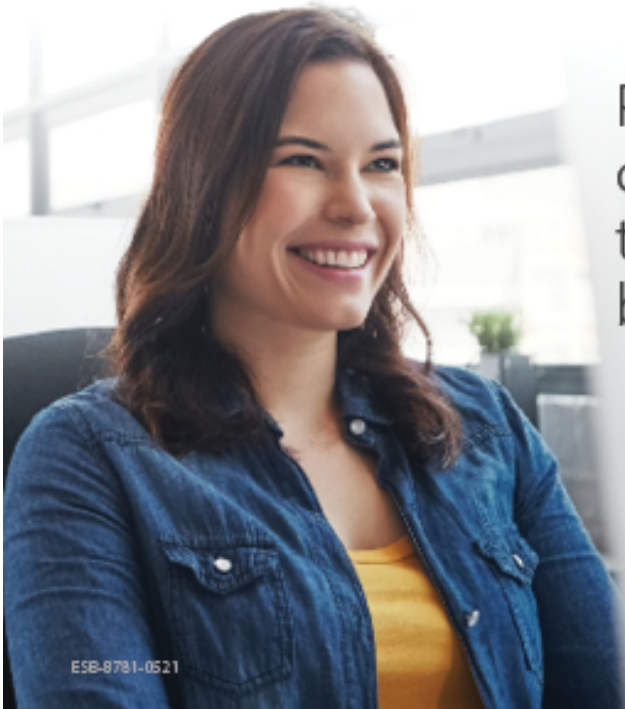
### County Commissioners Forum

- [Quasi-Judicial Officer, Barry County](#)

MAC's online message board allows county commissioners to share challenges, solutions and ideas with their colleagues. You must register to use the message board. ([See these easy-to-follow instructions for registration.](#))

For more information on the Forum, contact Derek Melot at [melot@micounties.org](mailto:melot@micounties.org).

[Visit the Forum](#)



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**Michigan Association of Counties**  
110 W. Michigan Ave., Suite 200  
Lansing, MI 48933  
(800) 258-1152 | (517) 372-5374

Contact MAC



Michigan Association of Counties | 110 W. Michigan Ave., Suite 200, Lansing, MI 48933

[Unsubscribe tyoung@tuscolacounty.org](mailto:tyoung@tuscolacounty.org)

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Tuscola County

Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

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**[EXTERNAL] FW: Compliance Review Scheduled**

9 messages

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**Thorp, Susan - RD, MI** <susan.thorp@usda.gov>

Thu, May 9, 2024 at 11:17 AM

To: "Clayette Zechmeister (zclay@tuscolacounty.org)" <zclay@tuscolacounty.org>

Good morning.

I wanted to touch base with you regarding the upcoming on-site review scheduled for May 21 at 9am.

The current active grants for Tuscola County are as follows:

- 2019 Ford Interceptor, VIN 1FM5K8AT1KGA29410 (Sheriff Patrol)
- 2018 Ford F150 Pick-Up, VIN 1FTMF1EB7JKC20872 (Animal Control)
- Drone- Matric 210 V2 RTK V2, Serial 17UDG7B0133610
- Tester- TruNarc Handheld Chemical Tester, Serial TN6628
- 2019 Dodge Ram, Vin 3C6TRVAG6KE517705 (Animal Control)

I will need to see these projects when I am on site for the Security Inspection portion of the review.

Please do not hesitate to contact me if you have any questions or if I can be of any assistance.

I am looking forward to our meeting.

With Regards,

**Susan Thorp**

Area Specialist

Caro Area Office, Rural Development

United States Department of Agriculture

Phone: 989.673.8173 ext. 135

[www.rd.usda.gov](http://www.rd.usda.gov)

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**From:** Thorp, Susan - RD, MI  
**Sent:** Monday, April 22, 2024 10:47 AM  
**To:** Clayette Zechmeister ([zclay@tuscolacounty.org](mailto:zclay@tuscolacounty.org)) <[zclay@tuscolacounty.org](mailto:zclay@tuscolacounty.org)>  
**Subject:** Compliance Review Scheduled

Good morning.

According to our records, your organization is required to have an on-site compliance review completed by September 30, 2024.

Please see the attached letter for the date and time of your scheduled compliance review. Additionally, please fill out the attachments and return them to me prior to the compliance review.

Please do not hesitate to contact me if you have any questions or if I can be of any assistance.

Thank you.

With Regards,

**Susan Thorp**

Area Specialist

Caro Area Office, Rural Development

United States Department of Agriculture

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**2 attachments**



**Tuscola County.pdf**

164K



**Community Facilities Compliance Review Questionnaire.pdf**

4881K

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**Neil Hammerbacher** <nhammerbacher@tuscolacounty.org>

Thu, May 9, 2024 at 11:37 AM

To: Debbie Babich <dbabich@tuscolacounty.org>, Renee Francisco <renee@tuscolacounty.org>

What, if anything, do you know about this?

[Quoted text hidden]

--

**Neil Hammerbacher, CPA, CPM**

**Neil Hammerbacher, CPA, CPM**

**Tuscola County Controller-Administrator**

125 W Lincoln St, Suite 500

Caro, MI 48723

nhammerbacher@tuscolacounty.org

voice 989-672-3710

fax 989-672-4011

**Visit us Online for County Services @ [www.tuscolacounty.org](http://www.tuscolacounty.org)**

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**2 attachments**



**Tuscola County.pdf**

164K



**Community Facilities Compliance Review Questionnaire.pdf**

4881K



**Renee Francisco** <renee@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>  
Cc: Debbie Babich <dbabich@tuscolacounty.org>

Thu, May 9, 2024 at 11:44 AM

I'm not familiar with this.

*Renee*

[Quoted text hidden]

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**Debbie Babich** <dbabich@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>  
Cc: Renee Francisco <renee@tuscolacounty.org>

Thu, May 9, 2024 at 11:47 AM

Good morning Neil,

I was not aware of the communication. It has been a very long time, but we have had on site reviews in the past with one of Susan's associates.

I would be happy to help where I can.

Thank you,  
Deb

Deborah Babich  
Tuscola County Fiscal Personnel Analyst  
[125 W Lincoln Street, Ste. 500](#)  
[Caro, MI 48723](#)  
Work: 989-672-3268  
Fax: 989-672-4011  
E-Mail: [dbabich@tuscolacounty.org](mailto:dbabich@tuscolacounty.org)

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On Thu, May 9, 2024 at 11:37 AM Neil Hammerbacher <nhammerbacher@tuscolacounty.org> wrote:

[Quoted text hidden]

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**Debbie Babich** <dbabich@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>  
Cc: Renee Francisco <renee@tuscolacounty.org>

Thu, May 9, 2024 at 11:51 AM

There is a folder on the S Drive>USDA Grant Report with some pertinent information regarding our annual review which may be helpful?

Deborah Babich  
Tuscola County Fiscal Personnel Analyst  
[125 W Lincoln Street, Ste. 500](#)  
[Caro, MI 48723](#)  
Work: 989-672-3268

Fax: 989-672-4011

E-Mail: [dbabich@tuscolacounty.org](mailto:dbabich@tuscolacounty.org)

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[Quoted text hidden]

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**Neil Hammerbacher** <nhammerbacher@tuscolacounty.org>  
To: Tyler Ray <tray@tuscolacounty.org>

Thu, May 9, 2024 at 2:23 PM

Hi Tyler,

Can you verify the two grants the USDA identified as "Animal Control" are actually for Animal Control? If so, can you read the two attachments and put together what they are asking for? Also, please be available the date she says she will be here for her review.

Thank you,

----- Forwarded message -----

From: **Thorp, Susan - RD, MI** <[susan.thorp@usda.gov](mailto:susan.thorp@usda.gov)>  
Date: Thu, May 9, 2024 at 11:17 AM  
Subject: [EXTERNAL] FW: Compliance Review Scheduled

[Quoted text hidden]

[Quoted text hidden]

[Quoted text hidden]

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**2 attachments**

 **Tuscola County.pdf**  
164K

 **Community Facilities Compliance Review Questionnaire.pdf**  
4881K

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**Neil Hammerbacher** <nhammerbacher@tuscolacounty.org>  
To: Robert Baxter <rbaxter@tuscolacounty.org>

Thu, May 9, 2024 at 2:30 PM

Hi Bob,

Can you verify the three non-Animal Control grants listed above are for the Sheriff's Department? If so, can you read the attachments and see if you can complete the questionnaire the reviewer provided? Also, can you be available the day she says she will be here?

Thank you,

----- Forwarded message -----

From: **Thorp, Susan - RD, MI** <[susan.thorp@usda.gov](mailto:susan.thorp@usda.gov)>  
Date: Thu, May 9, 2024 at 11:17 AM  
Subject: [EXTERNAL] FW: Compliance Review Scheduled

[Quoted text hidden]

[Quoted text hidden]

[Quoted text hidden]

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**2 attachments**

 **Tuscola County.pdf**  
164K

 **Community Facilities Compliance Review Questionnaire.pdf**  
4881K


**Robert Baxter** <rbaxter@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

Thu, May 9, 2024 at 3:10 PM

Hello,

Yes the 3 are ours, I will be here that date. I will reach out to her, the questionnaire isn't loading for me.

**Undersheriff Robert E. Baxter**  
**Tuscola County Sheriff Administration**  
**420 Court St**  
**Caro, MI 48723**  
**989-673-8161 ext 2225**  
**Fax: 989-673-8164**

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[Quoted text hidden]

**Tyler Ray** <tray@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

Thu, May 9, 2024 at 3:13 PM

Yes! Both of those Animal Control vehicles were purchased with a USDA Grant before I was appointed Director. Both vehicles are still in service within the Department!

I marked 5/21 on my calendar for the on-site review. I will make sure both vehicles are local so the USDA Rep can examine them!

Thank you,  
ACO Tyler Ray  
[Quoted text hidden]

## COMMUNITY FACILITIES COMPLIANCE REVIEW QUESTIONNAIRE

DATE OF REVIEW \_\_\_\_\_ REVIEWERS \_\_\_\_\_

BORROWER ID \_\_\_\_\_ BORROWER NAME \_\_\_\_\_

RECIPIENT CONTACT \_\_\_\_\_ EMAIL \_\_\_\_\_

PROJECT LOCATION \_\_\_\_\_

PROJECT SERVICE AREA \_\_\_\_\_

COMMENTS OR QUESTIONS:

1. Please complete the attached Demographic chart for the borrower's service area.

2. Does the organization conduct outreach in the service area about the availability and accessibility of services or benefits for the program? If yes, please provide a sample.

Yes  No  N/A

3. Does the organization outreach material and website include the USDA Non-Discrimination Statement? If no, please see the Non-Discrimination statement.

Yes  No  N/A

4. Has the organization completed the required Limited English Proficiency (LEP) 4-Factor Assessment? If yes, please provide a copy. If no, please see the attached LEP information.

Yes  No  N/A

5. Does the organization have a written Language Access Plan (LAP) that includes reasonable steps to provide meaningful access to LEP individuals? If yes, please provide a copy. If no, please see the attached LAP information.

Yes  No  N/A

6. Does the organization use the LEP Safe Harbor provisions when translating documents in the project? Please see the attached Safe Harbor Provisions information.

Yes  No  N/A

7. Does the organization have a public notice or poster stating that language services are available, free of charge? If not, please see the attached USDA Taglines sheet.

Yes  No  N/A

8. Are organization staff members aware of LEP requirements?

Yes  No

9. Does the organization employ fifteen (15) or more persons and have a designated person to coordinate their efforts to comply?

Yes  No

10. Does the organization have a Section 504 Grievance Procedure that is visible and available to all persons? If yes, please provide a copy. If no, please see attached 504 Grievance Procedure example.

Yes  No

11. Has the organization conducted an accessibility Self-Evaluation that includes the following mandatory elements. Please see the attached Self-Evaluation Worksheet:

Yes  No

- a. Designated Point of Contact
- b. Identify specific areas evaluated for accessibility.
- c. Identify the accessibility standard used in the evaluation.
- d. Identify the disability advocacy groups or other groups that were consulted.
- e. Identify who completed the Self-Evaluation.

12. Does the organization provide public parking for applicants or other persons to access the project, benefits, or services? If yes, please complete the attached Accessible Parking Worksheet.

Yes  No

13. Does the organization provide an accessible route from the public parking area through all public and common use areas? If yes, please complete the attached Accessible Route Worksheet.

Yes  No

14. Does the organization provide public restrooms open to applicants or other persons? If yes, please complete the attached Accessible Public Restroom Worksheet.

Yes  No

15. Are there allegations of discrimination against the organization within the past three (3) years? If yes, please offer a brief overview and explanation of the situation.

16. Has the current organization staff received Civil Rights Training, to include awareness about accessibility (Section 504/ADAA) requirements and general methods to ensure fair and equitable treatment of all persons, in the past three (3) years? If yes, please note the type of training, the staff members that attended, and when the training occurred.

17. Please list past loans, grants, or other federal financial assistance from other Federal Agencies.

18. Does the organization have a pending application with USDA Rural Development or another Federal Agency?

Yes

No

N/A

Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

**ALG-CX-5.19: Control Activities Form for Grant and Similar Programs**

Governmental Unit: [Client Name]  
 Completed by: [ ]

Financial Statement Date: [Engagement Date]  
 Date: [ ]

**Instructions:** See separate instructions at [ALG-CX-5](#) .

<b>Recording Grants and Similar Programs</b>	<b>Assertions</b>	<b>Addresses Fraud or Significant Risk?</b>	<b>Control Has Been Implemented?</b>	<b>Automated?</b>	<b>Effectively Designed?</b>	<b>Test Control?</b>	<b>Comments</b>
C1000—Management reviews the entity’s financial reports on a periodic basis and investigates significant variances from budgets and expected results.	E/O, C, R/O, V, A/CL/P, CO						
C2104—The government has procedures for identifying federal, state, and other awards.	E/O, C, A/CL/P, CO						
C2105—The government has accounting procedures, charts of accounts, etc., for identifying and recording receipts and expenditures of program funds separately and in the appropriate cost category for each award or grant.	E/O, C, A/CL/P						
C2106—The government provides written notification to employees when grant provisions or regulations impose requirements that differ from the government’s normal policies and procedures.	E/O, C, A/CL/P						
C2107—Reconciliations of grant financial reports with supporting accounting records are prepared, reviewed, and approved by a responsible official before filing.	E/O, C, A/CL/P						
C2108—Financial reports are prepared for required accounting periods within the time imposed and on the basis of accounting required by the grantor agencies.	E/O, C, A/CL/P						



	Assertions	Addresses Fraud or Significant Risk?	Control Has Been Implemented?	Automated?	Effectively Designed?	Test Control?	Comments
C2109—Financial reports and claims for advances and reimbursements agree with the supporting financial records and general ledger.	E/O, C, A/CL/P						
<b>Processing Program Receipts</b>							
C1000—Management reviews the entity's financial reports on a periodic basis and investigates significant variances from budgets and expected results.	E/O, C, R/O, V, A/CL/P, CO						
C2110—The government has procedures, including cash requirement projections, minimizing the time between the transfer of funds from the grantor agency or primary recipient and disbursement.	E/O, C						
C2111—Governmental funds are deposited in a separate bank account or accounted for through general ledger control accounts.	E/O, C, A/CL/P						
C2112—A responsible official approves requests for advances or reimbursements.	E/O, C, A/CL/P						
C2113—The government's calculation of required funds considers updated estimates of allowable program costs.	E/O, C						
C2114—The government has a formal approval process for activities generating program income.	E/O, C						
C2105—The government has accounting procedures, charts of accounts, etc., for identifying and recording receipts and expenditures of program funds separately and in the appropriate cost category for each award or grant.	E/O, C, A/CL/P						
C2109—Financial reports and claims for advances and reimbursements agree with the supporting financial records and general ledger.	E/O, C, A/CL/P						
<b>Processing Program Expenditures</b>							
C1000—Management reviews the entity's financial reports on a periodic basis and investigates significant variances from budgets and expected results.	E/O, C, R/O, V, A/CL/P, CO						

	Assertions	Addresses Fraud or Significant Risk?	Control Has Been Implemented?	Automated?	Effectively Designed?	Test Control?	Comments
C1126—The government has established controls to preclude charging federal award programs with unallowable costs and expenditures.	E/O, A/CL/P						
C1127—The government has procedures for tracking property and equipment purchased with federal award funds.	E/O, C, A/CL/P						
C1128—If the government has awards or grants with matching requirements, levels of effort, and earmarking limitations, a responsible member of management monitors activities to ensure that requirements and limitations were met and amounts claimed or used for matching were determined in accordance with applicable laws and regulations (for example, the Uniform Guidance).	E/O, C, A/CL/P						
C1129—The government has written personnel policies covering job descriptions, hiring procedures, salary or wage levels, promotions, dismissals, and conflicts of interest.	E/O, C, A/CL/P						
C1130—The government has written policies prohibiting discrimination based on race, sex, age, or marital status in its employment practices.	E/O, C, A/CL/P						
C1131—The government has procedures that provide reasonable assurance that consistent treatment is applied in the distribution of charges as direct or indirect costs to all awards or grants.	E/O, C, A/CL/P, V						
C2105—The government has accounting procedures, charts of accounts, etc., for identifying and recording receipts and expenditures of program funds separately and in the appropriate cost category for each award or grant.	E/O, C, A/CL/P						
C1132—A responsible member of management reviews costs charged to direct and indirect cost centers in accordance with applicable grant agreements and cost principles.	E/O, C, V, A/CL/P						
C1133—If the government provides services under award programs with eligibility requirements, a responsible member of management uses a set checklist to review and approve the provision of services to ensure that recipients are eligible under specific program requirements.	E/O						
C1134—The government’s depreciation policies or methods of computing use allowances are in accordance with the standards outlined in agency regulations or the Uniform Guidance.	E/O, C, A/CL/P						
C1135—If the government has an indirect cost allocation plan, it is prepared in accordance with the provisions of the Uniform Guidance.	E/O, C, A/CL/P						

	Assertions	Addresses Fraud or Significant Risk?	Control Has Been Implemented?	Automated?	Effectively Designed?	Test Control?	Comments
C1136—If the government has an indirect cost allocation plan, the plan has been submitted to the cognizant agency for indirect costs, and the rates are accepted by all participating federal and state agencies.	E/O, C, A/CL/P						
C1137—The government's employee time allocation method is in accordance with the standards outlined in agency regulations and the Uniform Guidance.	E/O, C						
C1138—The government has a written procurement manual that complies with the applicable grant agreements and the Uniform Guidance.	E/O, C						
C1139—If the government has subrecipients, it has policies and procedures for making required communications to the subrecipients and monitoring the subrecipients' activities as required.	E/O, C						
<b>Reporting Grants and Similar Programs</b>							
C1000—Management reviews the entity's financial reports on a periodic basis and investigates significant variances from budgets and expected results.	E/O, C, R/O, V, A/CL/P, CO						
C8082—The government has a documented time schedule for filing financial reports with grantors and policies for identifying special requirements of grants.	A/CL/P						
C8083—The appropriate level of management or another appropriate person reviews reports from audits of the government's awards or grants prepared by other auditors.	E/O, C, A/CL/P						
C8084—Reconciliations of grant financial reports with supporting accounting records are prepared, reviewed, and approved by a responsible official before filing.	E/O, C, A/CL/P						
C8085—Financial reports are prepared for required accounting periods within the time imposed and on the basis of accounting required by the grantor agencies.	E/O, C, A/CL/P						
C8086—Financial reports and claims for advances and reimbursements agree with the supporting financial records and general ledger.	E/O, C, A/CL/P						

**ALG-AP-30: Audit Program for Federal Award Programs—General Procedures**

Governmental Unit: [Client Name]

Balance Sheet Date: [Engagement Date]

**Instructions:** This program is used for Single Audits conducted under OMB's *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). **ALG-AP-30** may be used as a supplement to **ALG-AP-10** and **ALG-AP-20** to address additional general procedures in a Single Audit.

**Uniform Guidance and Compliance Supplement.** OMB's *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance) is located in 2 CFR part 200. Its audit requirements are located in 2 CFR part 200, subpart F (2 CFR sections 200.500–.521). The Compliance Supplement is located in 2 CFR part 200, appendix XI. The most current version of 2 CFR part 200 is in the Electronic Code of Federal Regulations (eCFR) at [www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200?toc=1](http://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200?toc=1). Chapter 13 provides a discussion of the Uniform Guidance.

**Important Information about the 2022 Compliance Supplement and COVID-19.** The OMB Compliance Supplement and COVID-19 federal funding have significant implications for single audits. For example—

- The federal government's response to the ongoing COVID-19 pandemic has been unprecedented, resulting in significant federal financial assistance being provided to individuals, small businesses, nonprofit organizations, schools, health care entities, and state and local governments, among others. This funding, which may be received directly or indirectly, has required many entities that had historically received little to no federal funding to be subject to a single audit for the first time. Other organizations that routinely qualify for a single audit due to the \$750,000 single audit threshold have received funding from COVID-19-related programs and additional COVID-19-related funding to existing programs. OMB has also allowed federal agencies to provide additional flexibility and waivers of compliance requirements in existing programs. Auditors need to consider risks associated with the COVID-19 pandemic as they plan and perform their single audits.
- Appendix VII of the 2022 Compliance Supplement continues to include section I, Novel Coronavirus (COVID-19), which provides background information and important guidance on the effect of COVID-19 on single audits.
- Identifying new COVID-19 programs and determining whether they are subject to single audit is critical to determining the amount of federal expenditures to assess the single audit threshold and to effectively determine major programs. To help summarize the COVID-19 funding, the AICPA's Governmental Audit Quality Center has prepared and maintained a nonauthoritative summary of the new COVID-19 programs and whether each one is subject to single audit. The summary also includes links to agency websites for further guidance and some additional notes about what is posted on the <https://sam.gov> website. The AICPA has been updating this summary periodically based on the <https://sam.gov> website and information from federal agencies. Auditors should refer to the date at the top of the summary to be sure they are consulting the latest version. See <https://us.aicpa.org/interestareas/governmentalauditquality.html>. OMB published a listing of all COVID-19-related programs and their Assistance Listing numbers at [www.cfo.gov/wp-content/uploads/2020/07/M-20-21\\_FAQ\\_07312020\\_UPDATED.pdf](http://www.cfo.gov/wp-content/uploads/2020/07/M-20-21_FAQ_07312020_UPDATED.pdf) (published June 24, 2020). This listing includes those programs funded under the CARES Act and other earlier COVID-19 legislation. In addition, the OMB published a listing of all ARP programs and their Assistance Listing numbers at [www.cfo.gov/assets/files/Revised-American-Rescue-Plan-Assistance-Listings\\_10-29-2021.pdf](http://www.cfo.gov/assets/files/Revised-American-Rescue-Plan-Assistance-Listings_10-29-2021.pdf) (published October 29, 2021). In both listings, an asterisk by the Assistance Listing number indicates it is a new Assistance Listing number. Auditors should be alert for more updated information issued by federal agencies and the AICPA.
- COVID-19-related awards must be separately reported on the schedule of expenditures of federal awards and the data collection form. This requirement relates not only to COVID-19-related funds expended for new programs but also to those expended for existing programs. Expenditures of COVID-19-related funds must be separately reported even if there is not a new Assistance Listing number. This requirement for

explicit identification of new and existing program COVID-19 expenditures also extends to the findings presented in the Schedule of Findings and Questioned Costs, if applicable.

- Due to the unprecedented response from the federal government and the lack of guidance in many areas surrounding the compliance requirements for COVID-19-related new and existing programs, practitioners will likely have a number of questions and uncertainties as guidance continues to be finalized. Of particular importance is the schedule of expenditures of federal awards (SEFA), of which its accuracy is critical to determine major programs. Significant considerations such as the concept of lost revenues, out-of-period amounts and award timing, and reporting guidance specific to the U.S. Department of Health and Human Services Provider Relief Fund (PRF) and American Rescue Plan (ARP) Rural Distribution (Assistance Listing 93.498) are discussed in detail in Chapter 13. Auditors should familiarize themselves with this guidance and be alert for continuing guidance to be released via federal agencies and the AICPA.
- Appendix IV of the Compliance Supplement includes a complete list of programs designated as higher risk, and denotes with a single asterisk or a double asterisk which programs are considered 100% COVID-19-related funding, and which are existing programs that received additional COVID-19-related funding, respectively. Appendix IV states that auditors are not precluded from determining that a program or other cluster that has been designated as higher risk qualifies as a low-risk Type A program if both of the following criteria are met:
  - The program otherwise meets the criteria for a low-risk Type A program under 2 CFR 200.518; and
  - The percentage of COVID-19-related funding in the program or other cluster during the nonfederal entity's fiscal year is not material to the program or other cluster as a whole. (Appendix IV of the 2022 Compliance Supplement provides several examples.)

Note that the inclusion of COVID-19-related funding within the Research and Development (R&D) cluster does not create a higher risk for the R&D Cluster.

Auditors should prepare audit documentation supporting the risk considerations and conclusions for higher risk program determination.

- Appendix VII of the Compliance Supplement provides an alternative to the single audit or program-specific audit for certain recipients of the Department of Treasury Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) (Assistance Listing 21.027) who would not otherwise be subject to a single audit or program-specific audit. Criteria for eligibility for this alternative compliance examination is outlined in Part 4, Section IV of Assistance Listing 21.027 in the 2022 Compliance Supplement. This alternative is also discussed in Chapter 13 of this *Guide*.
- Although Appendix VII of the 2022 Compliance Supplement indicated that the provider of the Federal Audit Clearinghouse (FAC) would change from the U.S. Census Bureau (Census) to the U.S. General Services Administration (GSA) on October 1, 2022, OMB subsequently announced that this transition was delayed by at least one year. Single audits with fiscal periods ending in 2022 or earlier should continue to be submitted to the Census FAC. OMB and the Census have updated the data collection form for fiscal periods ending in 2022. The Compliance Supplement indicated that single audits with fiscal periods ending in 2022 would have been able to be submitted to the FAC beginning October 1, 2022. However, they will now be submitted to the Census FAC (instead of the GSA FAC). 2 CFR section 200.512(a) requires the reporting package and data collection form to be submitted to the FAC the earlier of 30 calendar days after the reports are received from the auditor or nine months after the end of the audit period. Due to the delayed timing of the release of the 2022 data collection form and the opening of the Census FAC website for submissions, there is a waiver of the 30 calendar day requirement for 2022 submissions with fiscal periods ending between January 1, 2022, and October 31, 2022. Those audits are not considered late if they are submitted within nine months after the fiscal period end date. Single audits with fiscal periods ending in 2023 will likely be submitted to the GSA FAC. Auditors should be alert for further guidance from the Census, GSA, and the OMB.
- There are a number of other changes in the 2022 Compliance Supplement. Auditors should pay particular attention to changes and corrections to applicable compliance requirements by program that were made in Part 2, Matrix of Compliance Requirements, which are highlighted in the matrix. The 2022 Compliance

Supplement continues the OMB six-requirement mandate adopted in the 2019 Compliance Supplement. **Note:** The six-requirement mandate does not apply to programs not included in the 2022 Compliance Supplement. Auditors should continue to use Part 7 guidance included in [ALG-AP-190](#) to identify compliance requirements that are applicable to programs not included in the Compliance Supplement.

- See Chapter 13 for additional information on COVID-19 and single audits.

Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
	<p><b>AUDIT OBJECTIVES</b></p> <p>The objectives in this program are naturally general in nature and are not necessarily related to specific financial statement assertions.</p> <p>A. The Single Audit has been properly planned, including developing an audit strategy, making an appropriate assessment of audit risk, and developing an audit plan. When applicable, subsequent changes to planning matters have been appropriately considered and documented. Audit procedures are appropriately performed and documented.</p> <p>B. Consideration has been given to the audit and reporting requirements that are supplementary to GAAS, including the need for a Single Audit in accordance with the Uniform Guidance.</p> <p>C. Schedules prepared by client personnel for audit use are clerically accurate.</p> <p>D. The entity’s accounting records are clerically accurate, and the budget or budgets appropriately prepared, documented, and approved.</p> <p>E. Procedures to address the risk of management override of controls have been performed.</p> <p>F. There has been a search for and evaluation of (1) commitments and contingencies, including requests of legal counsel; (2) significant estimates and concentrations; (3) subsequent events; (4) significant unusual transactions; and (5) related-party relationships and associated transactions; and these matters are adequately disclosed or recorded in the financial statements, if appropriate.</p> <p>G. Written representations have been obtained from management.</p> <p>H. Misstatements and noncompliance discovered during the Single Audit, including findings and questioned costs, have been evaluated and communicated.</p> <p>I. Financial statements and schedules are presented in accordance with GAAP or a special purpose framework. Required disclosures are complete, clearly expressed and understandable, and contain financial and other information that is fairly disclosed at appropriate amounts.</p> <p>J. A determination has been made as to whether the schedule of expenditures of federal awards is stated fairly in all material respects in relation to the financial statements as a whole and provides an appropriate basis for determining major programs.</p> <p>K. The auditor’s reports, including the Single Audit reports, are appropriate in the circumstances. The effect on the auditor’s reports of GAAP departures, scope limitations, component auditors, consistency, or other matters has been evaluated.</p>		

Audit Objectives		N/A Performed by and Date	Workpaper Index
	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>L. Internal control related matters, findings and questioned costs, fraud, violations of laws and regulations, other noncompliance, waste or abuse, and other matters related to the conduct of the audit have been communicated to the appropriate parties.</p> <p>M. Engagement team members have been properly directed and supervised.</p> <p>N. The audit documentation, planning procedures, and schedules have been reviewed in accordance with firm policies. Sufficient appropriate audit evidence has been obtained.</p> <p>O. The firm’s quality control procedures for independence and other ethical requirements, client and engagement acceptance and continuance, human resources, and engagement performance have been followed.</p> <p style="text-align: center;"><b>IDENTIFICATION CODES</b></p> <p>The letters preceding each of the above audit objectives (e.g., A, B, etc.) serve as identification codes. These codes are presented in the left column labeled “Audit Objectives” when a procedure accomplishes an objective. If the alpha code appears in a bracket (e.g., [A], [B], etc.), the audit procedure only secondarily accomplishes the objective. If an asterisk (*) precedes a procedure, it is a preliminary step or follow-up step.</p> <p style="text-align: center;"><b>BASIC PROCEDURES</b></p> <p><b>Planning</b></p>		
A, J, O	<p>1. Using a copy of the client’s schedule of expenditures of federal awards, perform the following procedures:</p> <p style="padding-left: 20px;">a. If the audit firm will be assisting the client in preparing the schedule of expenditures of federal awards, determine that such assistance will not impair (or has not impaired) the firm’s independence under the AICPA <i>Code of Professional Conduct</i> (GAAS) and <i>Government Auditing Standards</i> (Yellow Book). Document your assessment by completing <a href="#">ALG-CX-1.3</a> . (If the audit firm is not independent, it cannot perform a <i>Government Auditing Standards</i> audit.)</p> <p style="padding-left: 20px;">b. Perform the procedures in <a href="#">ALG-AP-180</a> , “Audit Program for the Schedule of Expenditures of Federal Awards.”</p>		
A	<p>2. If component auditors will be involved in the audit of compliance, perform the applicable Audits of Group Financial Statements procedures in the Other General Planning Procedures section of <a href="#">ALG-AP-10</a> .</p>		
A, B	<p>3. Perform the following procedures to obtain information about the compliance requirements (federal statutes, regulations, and terms and conditions of federal awards) that have a direct and material effect on the schedule of expenditures of federal awards and major federal award programs:</p> <p style="padding-left: 20px;">a. Inquire of management about the amount of federal awards expended during the current audit period, the dates and source of the awards, incremental funding on federal awards, and the compliance requirements.</p> <p style="padding-left: 20px;">b. Consider information about the awards and related statutes, regulations, and terms and conditions of federal awards obtained in prior years’ audits.</p>		

Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
	<p>c. Review minutes of the governing body and committee meetings with potential audit significance for the audit period and any new grant agreements, other related agreements, leases, contracts, and other important documents with relevance to federal awards. Also, review prior-period audit workpapers, permanent files, financial statements, single or program-specific audit reports (including the schedule of findings and questioned costs and the corrective action plan), and any current year financial statements and reports that the entity has filed with, or received from, grantor agencies. Excerpt minutes and obtain copies of agreements for the current or permanent workpaper files. Highlight matters relevant to the related audit area or for which disclosure will be required in the schedule of expenditures of federal awards, including the notes.</p> <p>d. Obtain and review program audit reports received since the prior year's audit or during the past two audit periods. (These may include reports from federal or state auditors, agency desk or quality review reports, or other special purpose audits.)</p> <p>e. Review federal awards and related statutes and regulations, including budget restrictions if applicable.</p> <p>f. Inquire of the cognizant or oversight agency for audit or program administrators of the federal agencies that provided the awards about the restrictions, limitations, terms, and conditions under which the awards were provided.</p> <p>g. Inquire of the cognizant or oversight agency for audit about any agency exceptions to the Uniform Guidance and perform appropriate additional procedures to identify exceptions. Based on Appendix VII of the Compliance Supplement, for programs included in the Compliance Supplement, review the program supplement and, as necessary, agency regulations adopting/implementing the Uniform Guidance to determine whether there are any exceptions related to the compliance requirements that apply to the program. For programs not included in the Compliance Supplement, review agency regulations adopting/implementing the Uniform Guidance to determine whether an exception applies to the program.</p>		
A	<p>4. Inquire of management (including grants managers), those charged with governance, internal auditors, and others about the risks of fraud related to major programs and possible or actual noncompliance or control deficiencies that have come to their attention during the period under audit or in the subsequent period.</p>		
A	<p>5. Inquire of management about whether there were findings and recommendations in reports or other written communications resulting from previous audits, attestation engagements, internal or external monitoring, or other studies that directly relate to the objectives of the Single Audit and whether the recommendations have been implemented.</p>		



Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
A	<p>6. Evaluate whether appropriate corrective action was taken to address findings and recommendations from previous engagements, internal or external monitoring, and other studies that could have a material effect on risk assessment procedures used to plan the current audit. Use this information when assessing risk and determining the nature, timing, and extent of audit work, including the extent to which testing implementation of the corrective action is applicable to the current audit.</p>		
A, B, [G]	<p>7. Perform the following procedures, as considered necessary, to determine whether a single audit reporting package and data collection form for each of the two prior years were submitted to the Federal Audit Clearinghouse (FAC) by the due date:</p> <ul style="list-style-type: none"> <li>a. Review prior year audit workpapers and reports and, if considered necessary, inquire of management about whether the entity met the threshold for having a Single Audit (i.e., expenditures of federal awards totaled at least \$750,000 for audit periods under 2 CFR part 200, subpart F) in each of the prior two audit periods.</li> <li>b. If the expenditures of federal awards were below the \$750,000 threshold in either of the prior two audit periods, obtain written representation from management that a Uniform Guidance audit was not required.</li> <li>c. If audits were conducted in both of the two prior years, obtain a copy of each year’s data collection form and reporting package and perform the following procedures to determine when the data collection form and reporting package were required to be filed, and when they were filed, with the FAC: <ul style="list-style-type: none"> <li>(1) If necessary, inquire of management regarding when the auditor’s reports were received for each year’s audit. Calculate and document the “Nine Month Due Date” for filing with the FAC (nine months after the end of the audit period): <p>Nine Month Due Date, prior year: [    ]</p> <p>Nine Month Due Date, 2nd prior year: [    ]</p> <p>If extensions/waivers apply, document the applicable waiver and Extended Due Date for the relevant year at Step 7.c.(5) and complete Step 7.c.(6).</p> </li> <li>(2) Search the FAC’s Single Audit Database, using the “Federal Audit Clearinghouse IMS” and “Search for Single Audits” options for the audit year in question, and locate the record for the entity. Verify that the record accessed is the correct record by comparing both the entity’s name and EIN from the copy of the data collection form to the FAC database.</li> <li>(3) Document the “Date Received” per the FAC database and compare it to the Nine Month Due Date for filing with the FAC calculated in Step 7.c.(1). <p>Date Received, prior year: [    ]</p> <p>Date Received, 2nd prior year: [    ]</p> </li> </ul> </li> </ul>		

Audit Objectives		N/A Performed by and Date	Workpaper Index
	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>(4) If the Nine Month Due Date for filing with the FAC was met, answer “Yes” to Item 1.a. of Part III in <a href="#">ALG-CX-1.5</a> .</p> <p>(5) If the Nine Month Due Date for filing with the FAC was not met and an automatic extension was not applicable, inquire of entity management whether they received an extension from the cognizant or oversight agency for audit. If an extension was received, review documentation from the federal agency supporting the extension and document the “Extended Due Date” considering the extension:</p> <p style="padding-left: 40px;">Extended Due Date, prior year: [    ]</p> <p style="padding-left: 40px;">Extended Due Date, 2nd prior year: [    ]</p> <p>(6) If the Extended Due Date for filing with the FAC was met, answer “Yes” to Item 1.a. of Part III in <a href="#">ALG-CX-1.5</a> .</p> <p>d. If the Nine Month Due Date for filing with the FAC or, if applicable, the Extended Due Date was not met, or if the entity did not submit the required audit to the FAC for either of the prior two audit periods, answer “No” to Item 1.a. of Part III in <a href="#">ALG-CX-1.5</a> and document the noncompliance on <a href="#">ALG-CX-15.3</a> .</p>		
A, B	8. Complete the “Single Audit and Major Program Determination Worksheet” at <a href="#">ALG-CX-1.5</a> to document the listing of federal award programs, determine whether a single audit or program-specific audit is required, and document the determination of major and nonmajor programs.		
A, B	9. Consider whether to complete the “Low-risk Federal Program Determination Worksheet” at <a href="#">ALG-CX-1.6</a> to determine if a Type A program can be considered low risk.		
A, B	10. Consider whether to complete the “High-risk Federal Program Determination Worksheet” at <a href="#">ALG-CX-1.7</a> to determine if a Type B program can be considered high risk.		
A	<p>11. Perform the following procedures to assess management’s identification of compliance requirements that have a direct and material effect on major programs:</p> <p>a. Review the information obtained in Steps 3–6.</p> <p>b. Consider also performing the following procedures:</p> <p>(1) Identify sources of federal award program revenues, review related agreements, and inquire about the applicability of any overall governmental regulations to accounting for the revenue.</p> <p>(2) Discuss compliance requirements with the entity’s chief financial officer, legal counsel, internal auditor, or program administrators.</p> <p>(3) Review information included in the Compliance Supplement and any subsequently issued relevant guidance, the Assistance Listing, federal audit guides, state and local policies and procedures, applicable AICPA audit and accounting guides, content available from other professional organizations, and other publications pertaining to applicable compliance requirements.</p>		

Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
	<p>(4) Inquire of federal, state, or local auditors, or other appropriate audit oversight organizations about applicable compliance requirements including statutes and uniform reporting requirements.</p> <p>(5) Inquire of grantor finance personnel or program administrators about restrictions, limitations, terms, and conditions pertaining to grants.</p> <p>(6) Assess the risk that noncompliance may have a material effect on the financial statements or schedule of expenditures of federal awards and on each major program.</p>		
A, B, [E]	12. Identify relevant fraud risk factors and assess whether the risk factors, individually or in combination, present a risk of material noncompliance with compliance requirements that could have a direct and material effect on a major federal program.		
A, B	13. Consider whether to communicate with the cognizant or oversight agency for audit, the cognizant agency for indirect costs, grantor agencies (including pass-through entities), federal or state auditors, or other oversight entities to aid in planning the audit or to discuss any matters related to the audit plan or any problems envisioned or arising during the audit that cannot be resolved at the local level. Document the communication and any resulting decisions.		
D	14. Consider confirming federal award program dates, terms, amounts, receipts, and receivables with federal agencies or pass-through entities.		
A	<p>15. Perform the following award budget procedures:</p> <p>a. Obtain a copy and review the award budget and budget amendments, if any.</p> <p>b. Compare budgeted and actual expenditures (expenses) and consider whether the budget has been violated by overexpenditure and the consequences, if any, of overexpenditure.</p> <p>c. Review correspondence with grantor agencies with respect to any disallowed budget items or budget changes.</p>		
A	16. Determine and document materiality for each major program by completing “Planning Materiality—Federal Award Programs” at <a href="#">ALG-CX-2.2</a> .		
A, B, E	<p>17. Perform the following procedures to determine whether the entity has written policies, procedures, and standards of conduct (“policies”) as required by 2 CFR 200, Subparts D and E (2 CFR sections 200.300 and 200.400, respectively):</p> <p>a. Inquire of management about the entity’s written policies relative to federal awards.</p> <p>b. Examine the written policies for compliance with the requirements of 2 CFR 200, Subpart D—Post Federal Award Requirements, and Subpart E—Cost Principles, as applicable.</p> <p>c. Document your understanding of the entity’s compliance with Uniform Guidance requirements to establish specific written policies relative to federal awards.</p>		

Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
A, B, H	<p>18. For each major program, perform the following procedures to form a preliminary risk assessment of compliance requirements, noncompliance with which could have a direct and material effect on the major program:</p> <ul style="list-style-type: none"> <li>a. For those compliance requirements deemed to have a direct and material effect on the major program, obtain and document an understanding of the system of internal control, including controls to prevent, or detect and correct, material noncompliance by completing <a href="#">ALG-CX-4.5</a> , including other practice aids referred to in <a href="#">ALG-CX-4.5</a> that are applicable for each major program.</li> <li>b. Plan tests of internal control over compliance for each major program to support a low assessed level of control risk of noncompliance for each major program.</li> <li>c. Perform and document the applicable tests of controls over compliance by completing <a href="#">ALG-CX-4.5</a> for each major program.</li> <li>d. Perform the following procedures to evaluate whether the preliminary assessment of the risk of material noncompliance for the compliance requirements subject to audit that are direct and material remains appropriate based on the tests of controls performed and the audit evidence obtained:                             <ul style="list-style-type: none"> <li>(1) Determine whether the tests of controls provide an appropriate basis for reliance on the controls.</li> <li>(2) Determine whether additional tests of controls are necessary and how the remaining risks of noncompliance need to be addressed using substantive procedures.</li> <li>(3) Consider whether any risks of material noncompliance affect multiple compliance requirements (that is, are pervasive) and develop an overall response to such risks.</li> </ul> </li> <li>e. Consider whether the results of audit procedures indicate internal control related matters that are required to be communicated to management and those charged with governance and add such matters to the memo of points for the communication of internal control related matters. (See <a href="#">ALG-CX-15.3</a> .)</li> <li>f. Consider whether a written communication of significant deficiencies and material weaknesses in internal control over compliance should be issued before completion of the audit.</li> </ul>		
A	<p>19. If the engagement team discussion did not address issues relating to federal awards, or if sufficient information was not gathered relating to the risks of material noncompliance due to fraud in federal programs, consider whether additional assessments of the risk of fraud relating to federal award programs should be performed.</p>		
A, [E]	<p>20. Document your assessment of the risks of material misstatement and material noncompliance, including specific fraud risks such as the risk of management override of controls, and develop your responses by completing <a href="#">ALG-CX-7.1</a> , “Risk Assessment Summary Form,” and <a href="#">ALG-CX-7.3</a> , “Risk of Material Noncompliance Assessment Worksheet—Federal Award Programs.”</p>		
A	<p>21. Perform the following procedures to develop an audit plan:</p>		

Audit Objectives		N/A Performed by and Date	Workpaper Index
	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>a. Prepare audit work programs, giving effect to the risk assessment, audit approach, and other responses summarized at <a href="#">ALG-CX-7.1</a> and <a href="#">ALG-CX-7.3</a> , and designed to determine (1) whether the auditee has complied with federal statutes, regulations, and the terms and conditions of federal awards that could have a direct and material effect on each major program and (2) whether the schedule of expenditures of federal awards is fairly stated in all material respects in relation to the financial statements as a whole and provides an appropriate basis for determining major programs (see <a href="#">ALG-AP-180</a> ).</p> <p>b. Modify the audit programs to respond to the assessed risks of material misstatement and material noncompliance.</p> <p>c. Ensure that the selection of audit procedures from year to year incorporates an element of unpredictability.</p> <p>d. Determine that the nature, timing, and extent of auditing procedures reflected in the audit programs appropriately address the assessed risk of material misstatement and material noncompliance (whether caused by error or fraud) for each major program.</p> <p>B 22. Perform and document tests of compliance with the compliance requirements that could have a direct and material effect on each major program, including tests of transactions and other necessary auditing procedures to obtain sufficient appropriate audit evidence to support an opinion on compliance for each major program. [GSA-AP-5 (in <i>PPC’s Government Documents Library</i> at Gov. Doc. No. 4a), <a href="#">ALG-AP-190</a> , “Audit Program for Federal Award Programs Not Included in the Compliance Supplement,” and/or PPC’s SMART Practice Aids—Single Audit Suite may be helpful in performing and documenting tests of compliance.</p>		
C, H	<p><b>Summary Schedule of Prior Audit Findings</b></p> <p>23. Using the summary schedule of prior audit findings (summary schedule) relative to federal awards, perform the following procedures:</p> <p>a. Compare the summary schedule to the schedule of findings and questioned costs for the prior audit and to the prior audit’s summary schedule and determine that all findings are listed or the reason they are not listed.</p> <p>b. Inquire of management and program personnel about the status of corrective actions and the estimated completion date for incomplete actions.</p> <p>c. When applicable, review management decisions issued by federal agencies and pass-through entities and any appeals of those decisions, and compare information to the summary schedule.</p> <p>d. When applicable, test similar current-year transactions and observe activities designed to correct prior-year findings.</p> <p>e. Determine whether the information in the summary schedule is consistent with management’s responses in the prior year’s corrective action plan, management’s responses to current year inquiries, and when applicable, the summary schedule included in the prior year’s reporting package.</p> <p>f. Determine whether the summary schedule is complete.</p>		

Audit Objectives		N/A Performed by and Date	Workpaper Index
F	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>g. Conclude on whether the summary schedule is reasonable and whether it meets the requirements of the Uniform Guidance. If the summary schedule materially misrepresents the status of any prior audit finding, report that misrepresentation as a current-year finding.</p> <p><b>Commitments and Contingencies</b></p> <p>24. Perform the following procedures to search for previously unidentified commitments and contingencies:</p> <ul style="list-style-type: none"> <li>a. Inquire of responsible client officials concerning the existence of commitments and contingencies related to federal award programs, such as (1) fraud involving management or employees that could affect federal award programs; (2) other noncompliance with provisions of federal statutes, regulations, or the terms and conditions of the federal award, including communications from grantor or regulatory agencies concerning violations or possible violations; and (3) commitments for awards to subrecipients that are payable over future periods.</li> <li>b. Inquire of grantor or cognizant/oversight agencies for audit regarding the existence of commitments or contingencies affecting federal award programs.</li> <li>c. Consider the need to include commitment and contingency information related to federal award programs in the auditor's standard request for legal representation.</li> <li>d. Review the results of compliance procedures or other procedures for the existence of significant commitments or contingencies related to federal award programs.</li> </ul>		
F, I	<p><b>Subsequent Events</b></p> <p>25. Perform the following procedures to obtain sufficient appropriate audit evidence that all subsequent events related to compliance during the period covered by the auditor's report on compliance have been identified:</p> <ul style="list-style-type: none"> <li>a. Perform a review for subsequent events relating to federal award programs, including applicable compliance requirements, to the date of the auditor's report when performing the General Subsequent Event procedures in the Basic Procedures section of <a href="#">ALG-AP-20</a>.</li> <li>b. Inquire about relevant reports issued during the subsequent period by internal auditors, other auditors reporting noncompliance, and federal awarding agencies and pass-through entities reporting noncompliance.</li> <li>c. Inquire about information about noncompliance obtained through other professional engagements performed for the entity.</li> <li>d. Consider whether noncompliance occurring in the subsequent period is of such nature and significance that its disclosure is necessary to prevent report users from being misled, and if so, discuss the matter with management, and if appropriate, with those charged with governance and describe the nature of the noncompliance in an other-matter paragraph in the auditor's report.</li> </ul> <p><b>Related-party Transactions and Significant Unusual Transactions</b></p>		

Audit Objectives		N/A Performed by and Date	Workpaper Index
F, I	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>26. Perform the following procedures to consider related parties, relationships, and transactions involving federal award programs:</p> <ol style="list-style-type: none"> <li>a. Perform a review for related parties, relationships, and transactions involving federal award programs when performing the General Related-party Transaction procedures at <a href="#">ALG-AP-20</a> .</li> <li>b. Determine whether related-party transactions that involve federal award programs are in compliance with applicable regulations and cost principles.</li> <li>c. Ensure that the workpapers include the information needed to support the disclosure of related-party transactions in the notes to the schedule of expenditures of federal awards and/or the notes to the financial statements.</li> </ol>		
H	<p><b>Evaluation and Other Completion Procedures</b></p> <p>27. Consider whether audit procedures have detected material noncompliance or misstatements relative to major federal award programs.</p>		
A, E, H	<p>28. Perform the following procedures to consider the accumulated results of audit procedures in relation to the audit risk assessment:</p> <ol style="list-style-type: none"> <li>a. Evaluate whether information identified during the audit or changes in the benchmark(s) used to determine materiality when planning the audit require (or required) revision of (1) materiality opinion units, (2) performance materiality, or (3) lesser material amount(s) for specific classes of transactions, account balances, or disclosures. If so, in conjunction with the following step, consider whether the nature, timing, and extent of further procedures are still appropriate.</li> <li>b. Evaluate whether the assessments of the risks of material misstatement or material noncompliance made during planning, at both the financial statement and relevant assertion levels and the major program and compliance requirement levels, respectively, remain appropriate considering the audit procedures performed and evidence collected. If necessary, document additional risks identified and revise the risk assessment and related responses documented at <a href="#">ALG-CX-7.1</a> and <a href="#">ALG-CX-7.3</a> . Perform and document any additional procedures considered necessary.</li> <li>c. If you believe that fraud or noncompliance may have occurred, document the circumstances identified that indicate the possible existence of the fraud or noncompliance and apply the procedures for Potential Fraud or Noncompliance with Laws and Regulations in the Other General Auditing and Completion Procedures section of <a href="#">ALG-AP-20</a> .</li> <li>d. Consider whether any information has come to your attention that could be indicative of waste or abuse. If such information has come to your attention: <ol style="list-style-type: none"> <li>(1) Consider whether and how to communicate such matters if you become aware of them.</li> <li>(2) Consider whether waste or abuse are indicative of fraud or noncompliance with provisions of laws, regulations, contracts, and grant agreements.</li> <li>(3) Document your consideration of potential waste or abuse, your response, and any reporting issues.</li> </ol> </li> </ol>		

Audit Objectives	Audit Procedures for Consideration	N/A Performed by and Date	Workpaper Index
H	29. Perform the following procedures to determine whether the entity complied, in all material respects, with the types of compliance requirements that are subject to audit for each of its major federal programs: <ul style="list-style-type: none"> <li>a. Summarize findings and questioned costs noted during the audit. The summary should include both <i>known</i> and <i>likely</i> questioned costs.</li> <li>b. Evaluate the materiality of both known and likely questioned costs in relation to each compliance requirement and each major federal award program.</li> <li>c. Evaluate other noncompliance that typically might not have questioned costs, such as noncompliance with a Reporting type of compliance requirement.</li> <li>d. Evaluate the materiality of findings and questioned costs and document your conclusion as to whether the net unadjusted audit differences cause the financial statements or schedule of expenditures of federal awards to be materially misstated.</li> <li>e. Evaluate unadjusted known and likely misstatements in relation to major federal award programs and document your conclusions as to whether the misstatements are material to the compliance requirement and to the major program.</li> </ul>		
A, B, H	30. Evaluate whether audit risk of noncompliance has been reduced to an appropriately low level and whether the nature, timing, and extent of auditing procedures need to be reconsidered. Document your conclusion about whether sufficient appropriate audit evidence has been obtained to reduce the risks of material noncompliance to an appropriately low level.		
L	31. Summarize internal control related matters and all identified instances of noncompliance related to federal award programs for communication to management and those charged with governance.		
B, H, L B, K, L	32. Prepare a schedule of findings and questioned costs. 33. Discuss the findings, conclusions, and recommendations with client officials and the requirement for the auditor's report to include the officials' views about the findings, conclusions, and recommendations as well as the client's planned corrective actions.		
B, K	34. Obtain and evaluate the corrective action plan and the client's comments about the findings, conclusions, and recommendations and include your evaluation in the auditor's report or modify the report, as appropriate.		
G	35. Obtain written representations from responsible officials with respect to your audit of the federal award programs.		
B, K	36. Draft the reports required for the engagement (e.g., reports required by <i>Government Auditing Standards</i> and the Uniform Guidance).		
*	37. Complete the auditor's portion of the data collection form and coordinate with the client the submission, certification, and signing of the data collection form and reporting package.		
L	38. Consider the need to hold an exit conference with management and the cognizant or oversight agency for audit.		
*	39. Submit audit reports to the auditee and to whomever required or arranged the audit, if different.		



Audit Objectives		N/A Performed by and Date	Workpaper Index
L	<p style="text-align: center;"><b>Audit Procedures for Consideration</b></p> <p>40. Communicate the significant audit findings required under GAAS or <i>Government Auditing Standards</i> to those charged with governance.</p>		
O	<p>41. Perform the following procedures to finalize the audit documentation:</p> <ul style="list-style-type: none"> <li>a. Determine that audit documentation is assembled for retention for at least five years in accordance with firm policy and applicable professional, regulatory, and legal requirements (if not included with the general audit documentation considered at <a href="#">ALG-AP-20</a>).</li> <li>b. Document the report release date and the required documentation completion date at Appendix <a href="#">8A</a>.</li> </ul>		
*	<p><b>Conclusion</b></p> <p>42. We have performed procedures and obtained sufficient appropriate audit evidence to achieve the audit objectives for federal award programs. The procedures performed, evidence obtained, and our conclusions are adequately documented. (If you are unable to conclude on any objective, prepare a memo documenting your reason and the implications for the engagement, including the audit reports.)</p> <p>[ ]</p>		

**COUNTY OF TUSCOLA**

**DEPARTMENT OF BUILDINGS & GROUNDS**

125 W. Lincoln St  
Caro, Michigan 48723-1660  
(989)672-3756

**MICHAEL MILLER**  
Director

**THOMAS McLANE**  
Assistant Director

**TO: INTERESTED CONTRACTORS**

**FROM: MIKE MILLER**

**DATE: April 9, 2024**

**RE: Roof Replacement**

Tuscola County will be accepting bids on the replacement of the Department of Health and Human Services building, located at 1365 Cleaver RD, Caro MI 48723. The following specifications shall be considered in your bid:

Roof system to be used is Duro-Last

1. Remove existing PVC roof membrane, palletize and return to Duro Last for recycling.
2. Install tapered saddles between roof drains to assist with roof drainage
3. Install a ½" HD ISO board over the entire roof area.
4. Install a 50 mil, prefabricated PVC roof system. Roof system shall be mechanically fastened per manufacturers specifications.
5. Flash and seal all roof penetrations per manufacturers specifications.
6. Install (15) two way breather vents.
7. Install walk pads around all RTUs per roof drawing.
8. Install (1) Ladder Anchor at roof perimeter. Owner to determine location.
9. Install new 24 gauge – kynar coated Two Piece Compression metal to roof perimeter. Perimeter metal to be supplied and warrantied by roof manufacturer.
10. Install (4) new overflow scuppers. The scuppers are to have a beauty ring on the outside.
11. Provide complete clean up and removal of all job related debris.
12. Repair any damaged landscaping, sidewalks or parking lot that occurred from construction work.
13. Provide a 20 year No Dollar Limit full system warranty covering material and labor for 20 years and consequential damages for 15 years
14. Provide complete clean up and removal of all job related debris.
15. Repair any damaged landscaping, sidewalks or parking lot that occurred from construction work.
16. Contractor is responsible for any Permits and must follow all Federal, State, and local building codes.
17. Contractor shall provide copies of liability and workers comp insurance.

**There will be a mandatory Pre-bid meeting on April 23, 2024 at 10am. Duro-last rep will be on site to answer questions. The meeting will take place at the Dept of Health and Human Services building rain or shine. If you are interested in bidding the project a company representative must attend.**

**Please do not come to the location before the Pre-bid meeting, and after the meeting please call ahead if you need to come back and view the location.**

Proposals shall be submitted in a **Sealed** envelope to Tuscola County Buildings and Grounds at 125 W. Lincoln St. Caro, Michigan 48723, no later than 4:00 p.m. May 10, 2024.

**Please call 989-672-3756 or 989-672-3716 if you have questions, please do not stop at DHHS before calling to set up an appointment.**

**Disclaimer**

Tuscola County reserves the right at its sole discretion to reject any and all proposals received without penalty and not to enter a contract as a result of this RFP. The County also reserves the right to negotiate separately with any source whatsoever in any manner necessary to attend to the best interests of the County, to waive irregularities in any proposal and to accept a proposal which best meets the needs of the County, irrespective of the bid price."

By submitting a bid, the bidder is acknowledging that there will be no contractual relationship between Tuscola County and the bidder until both parties have formally approved and signed a written contract to be developed by Tuscola County legal counsel.

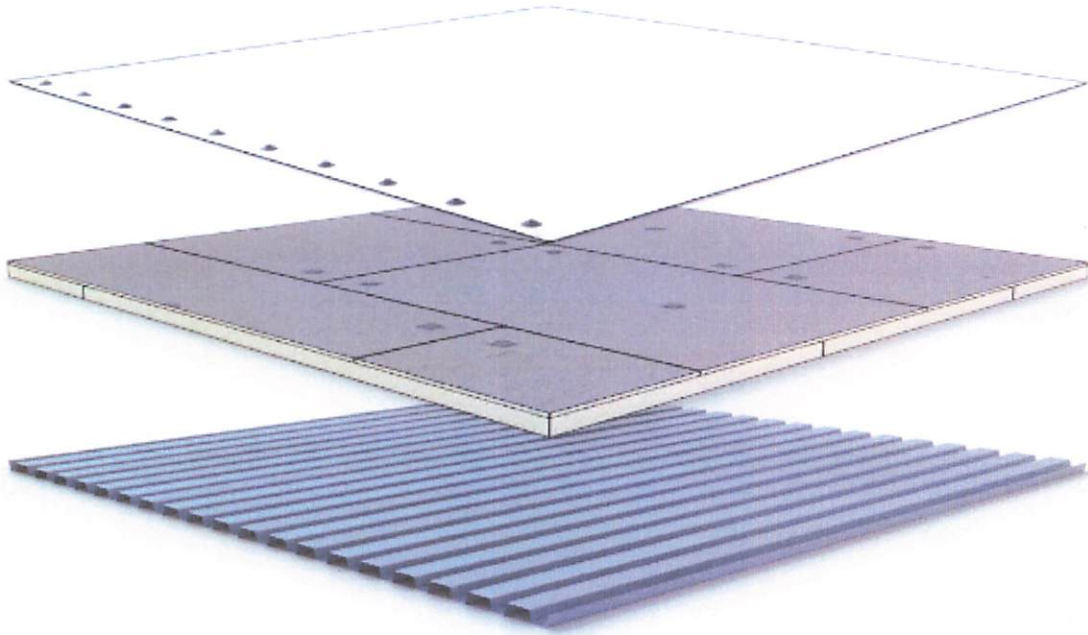
The County reserves the right to make an award without further discussion of any proposal submitted. Therefore, the proposal should be submitted initially on the most favorable terms which the offer can propose. There will be no best and final offer procedure. The County does reserve the right to contact an offer for clarification of its proposal."

3-part Specification

# Tuscola County Human Services Building

ENTIRE BUILDING

1365 Cleaver  
Caro, MI 48723



## **PART 1 GENERAL**

### 1.1 SUMMARY

- A. Membrane Type: Duro-Last 50-mil Membrane (Custom Fab: Regular Rolls)
  - 1. Roll Width: 60" (Installed widths may vary)
  - 2. Membrane Color: White
  - 3. Attachment Type: Mechanically Fastened
  - 4. Fasteners: Duro-Last® HD Screw (#14)
  - 5. Plates: Duro-Last® Cleat Plate™
- B. Insulation Assembly Type: Duro-Guard® ISO HD (Coated Glass Facer)
  - 1. Board Application: Flat Stock

2. Board Style: Assembly Thickness
  3. Board Size: 4' x 8'
  4. Thickness/R-Value: 0.5"
  5. Attachment Type: Mechanically Fastened
  6. Fasteners: Duro-Last® HD Screw (#14)
  7. Plates: Duro-Last® 3-Inch Metal Plate
- C. Deck Type: Steel Deck (22 ga)
  - D. Prefabricated flashings, corners, parapets, stacks, vents, and related details.
  - E. Fasteners, adhesives, and other accessories required for a complete roofing installation.
  - F. Traffic Protection.

## 1.2 REFERENCES

- A. ASTM INTERNATIONAL (ASTM)
  1. (2019) Standard Test Methods for Coated Fabrics (D751)
  2. (2021) Standard Specification for Poly(Vinyl Chloride) Sheet Roofing (D4434/D4434M)
  3. (2022) Standard Specification for Faced Rigid Cellular Polyisocyanurate Thermal Insulation Board (C1289)
  4. (2020) Standard Test Methods for Fire Tests of Roof Coverings (E108)
  5. (2020) Standard Test Methods for Fire Tests of Building Construction and Materials (E119)
- B. UL SOLUTIONS (UL)
  1. (2021) UL Roofing Systems (TGFU.R10128)
- C. AMERICAN SOCIETY OF CIVIL ENGINEERS (ASCE)
  1. (2007) Minimum Design Loads for Buildings And Other Structures (ASCE Standard - ASCE/SEI 7-05)
  2. (2014) Minimum Design Loads for Buildings and Other Structures (ASCE Standard - ASCE/SEI 7-10)
  3. (2017) Minimum Design Loads and Associated Criteria for Buildings and Other Structures (ASCE Standard - ASCE/SEI 7-16)
- D. NATIONAL ROOFING CONTRACTORS ASSOCIATION (NRCA)
  1. (2019) NRCA Roofing Manual - Membrane Systems

## 1.3 SYSTEM DESCRIPTION

- A. General: Provide installed roofing membrane and base flashings that remain watertight; do not permit the passage of water; and resist specified uplift pressures, thermally induced movement, and exposure to weather without failure.
- B. Material Compatibility: Provide roofing materials that are compatible with one another under conditions of service and application required, as demonstrated by roofing membrane manufacturer based on testing and field experience.

C. Physical Properties (must meet or exceed):

1. Roof product must meet the requirements of Type III PVC sheet roofing as defined by ASTM D4434.
2. Thickness: 50 mil, nominal, in accordance with ASTM D751.
3. Thickness over Scrim:  $\geq 28$  mil in accordance with ASTM D7635.
4. Breaking Strength:  $\geq 438$  lbf. (machine direction) and  $\geq 390$  lbf. (cross machine direction) in accordance with ASTM D751 Grab Method.
5. Elongation at Break:  $\geq 31\%$  (machine direction) and  $\geq 31\%$  (cross machine direction) in accordance with ASTM D751 Grab Method.
6. Seam Strength:  $\geq 417$  lbf. in accordance with ASTM D751 Grab Method.
7. Tear Strength:  $\geq 132$  lbf. (machine direction) and  $\geq 163$  lbf. (cross machine direction) in accordance with ASTM D751 Procedure B.
8. Low Temperature Bend: Pass at  $-40$  °F in accordance with ASTM D2136.
9. Heat Aging: Pass after being conditioned for 56 days in oven maintained at  $176$  °F in accordance with ASTM D3045.
10. Accelerated Aging: Pass after 10,000 hours of total test time in accordance with ASTM G155.
11. Dimensional Stability: Change of  $-0.30\%$  (machine direction) and  $-0.45\%$  (cross machine direction) in accordance with ASTM 1204.
12. Water Absorption:  $< 1.7\%$  at  $158$  °F for 168 hours in accordance with ASTM D570.
13. Static Puncture Resistance:  $\geq 56$  lbf. in accordance with ASTM D5602.
14. Dynamic Puncture Resistance:  $\geq 14.7$  ft-lbf. in accordance with ASTM D5635.

D. Cool Roof Rating Council (CRRC) (Membrane must be listed on the CRRC website):

1. Solar Reflectance (Initial):  $\geq 86\%$
2. Solar Reflectance (3-Year Aged):  $\geq 74\%$
3. Thermal Emittance (Initial):  $\geq 89\%$
4. Thermal Emittance (3-Year Aged):  $\geq 89\%$
5. Solar Reflectance Index (SRI) (Initial):  $\geq 108\%$
6. Solar Reflectance Index (SRI) (3-Year Aged):  $\geq 91\%$

E. Insulation:

1. General Requirements
  - a. Install using a minimum of two layers.
  - b. Configuration as indicated on the drawings.
2. Duro-Guard® ISO HD (Coated Glass Facer)
  - a. Assembly Thickness: 0.5"

1.4 SUBMITTALS

A. Product data sheets to be used, with the following information included:

1. Preparation instructions and recommendations

2. Storage and handling requirements and recommendations
  3. Installation methods
  4. Maintenance requirements
- B. Sustainability Documentation:
1. NSF/ANSI Standard 347 Certificate
  2. Type III product-specific Environmental Product Declaration
- C. Shop Drawings: Indicate insulation pattern, overall membrane layout, field seam locations, joint or termination detail conditions, and location of fasteners.
- D. Provide verification samples for each product specified (two samples representing each product, color and finish):
1. 4-inch by 6-inch sample of roofing membrane, of color specified.
  2. 4-inch by 6-inch sample of walkway pad.
  3. Termination bar, fascia bar with cover, drip edge, and gravel stop if to be used.
  4. Each fastener type to be used for installing membrane, insulation/recover board, termination bar and edge details.
- E. Installer Certification: Certification from the roofing system manufacturer that Installer is approved, authorized, or licensed by manufacturer to install roofing system.
- F. Manufacturer's warranties.

#### 1.5 QUALITY ASSURANCE

- A. Perform work in accordance with manufacturer's installation instructions.
- B. Manufacturer Qualifications: A manufacturer specializing in the production of PVC membranes systems and utilizing a Quality Control Manual during the production of the membrane roofing system that has been approved by and is inspected by Underwriters Laboratories.
- C. Installer Qualifications: Company specializing in installation of roofing systems similar to those specified in this project and approved by the roofing system manufacturer.
- D. Source Limitations: Obtain components for membrane roofing system from roofing membrane manufacturer.
- E. There shall be no deviations from the roof membrane manufacturer's specifications or the approved shop drawings without the prior written approval of the manufacturer.

#### 1.6 REGULATORY REQUIREMENTS

- A. Conform to applicable code for roof assembly fire hazard, wind uplift, and cool roof requirements.
- B. Fire Hazard Requirements: Provide membrane roofing materials with the following fire-test-response characteristics. Materials shall be identified with appropriate markings of applicable testing and inspecting agency.
  1. Class A
  2. Fire-test-response standard: Comply with ASTM E108 for application and roof slopes indicated.

3. Fire-Resistance Ratings: Comply with ASTM E119 for fire-resistance-rated roof assemblies of which roofing system is a part.
  4. Conform to applicable code for roof assembly fire hazard requirements.
- C. Wind Uplift Requirements: Roofing System Design: Provide a roofing system designed to resist uplift pressures calculated according to the current edition of ASCE/SEI 7, Minimum Design Loads and Associated Criteria for Buildings and Other Structures.

#### 1.7 PRE-INSTALLATION MEETING

- A. Convene meeting not less than one week before starting work of this section.
- B. Review methods and procedures related to roof deck construction and roofing system including, but not limited to, the following:
  1. Meet with Owner, Architect, Owner's insurer if applicable, testing and inspecting agency representative, roofing installer, roofing system manufacturer's representative, deck installer, and installers whose work interfaces with or affects roofing including installers of roof accessories and roof-mounted equipment.
  2. Review and finalize construction schedule and verify availability of materials, installer's personnel, equipment, and facilities needed to make progress and avoid delays.
  3. Examine deck substrate conditions and finishes for compliance with requirements, including flatness and fastening.
  4. Review structural loading limitations of roof deck during and after roofing.
  5. Review base flashings, special roofing details, roof drainage, roof penetrations, equipment curbs, and condition of other construction that will affect roofing system.
  6. Review governing regulations and requirements for insurance and certificates if applicable.
  7. Review temporary protection requirements for roofing system during and after installation.
  8. Review roof observation and repair procedures after roofing installation.
  9. Review existing roof manufacturer's recycling program and return roofing system to the manufacturer for recycling.

#### 1.8 DELIVERY, STORAGE AND HANDLING

- A. Deliver roofing materials to Project site in original containers with seals unbroken and labeled with manufacturer's name, product brand name and type, date of manufacture, and directions for storing and mixing with other components.
- B. Store liquid materials in their original undamaged containers in a clean, dry, protected location and within the temperature range required by roofing system manufacturer. Protect stored liquid material from direct sunlight.
- C. Protect roof insulation materials from physical damage and from deterioration by sunlight, moisture, soiling, and other sources. Store in a dry location. Comply with insulation manufacturer's written instructions for handling, storing, and protecting during installation.



- D. Store roof materials and place equipment in a manner to avoid permanent deflection of deck.
- E. Store and dispose of solvent-based materials, and materials used with solvent-based materials, in accordance with requirements of local authorities having jurisdiction.

#### 1.9 WARRANTY

- A. Contractor's Warranty: The contractor shall warrant the roof application with respect to workmanship and proper application for two (2) years from the effective date of the warranty issued by the manufacturer.
- B. Manufacturer's Warranty: Must be no-dollar limit type and provide for completion of repairs, replacement of membrane or total replacement of the roofing system at the then-current material and labor prices throughout the life of the warranty. In addition the warranty must meet the following criteria:
  - 1. Warranty Period: 20 years from date issued by the manufacturer.
  - 2. Must provide adequate or sufficient drainage.
  - 3. Issued direct from and serviced by the roof membrane manufacturer.
  - 4. Transferable for the full term of the warranty.

### **PART 2 PRODUCTS**

#### 2.1 MANUFACTURER

- A. Manufacturer: Duro-Last Roofing, which is located at: 525 Morley Drive, Saginaw, MI 48601. Telephone: 800-248-0280.
- B. All roofing system components to be provided or approved by Duro-Last Roofing, Inc.
- C. Substitutions: Not permitted.

#### 2.2 ROOFING SYSTEM COMPONENTS

- A. Roofing Membrane:
  - 1. Properties:
    - a. Type: Duro-Last 50-mil Membrane (Custom Fab: Regular Rolls) or DLX roll goods
    - b. Roll Width: 60" (Installed widths may vary)
    - c. Membrane Color: White
    - d. Attachment Type: Mechanically Fastened
    - e. Fasteners: Duro-Last® HD Screw (#14)
    - f. Plates: Duro-Last® Cleat Plate™
  - 2. Features:
    - a. ASTM D4434, Type III
    - b. Fabric-reinforced, PVC, NSF/ANSI 347 Gold or Platinum Certification, and a product-specific third-party verified Environmental Product Declaration.

- c. Minimum recycle content 7% post-industrial and 0% post-consumer.
- d. Recycled at end of life into resilient flooring or concrete expansion joints.

**B. Insulation:**

**1. General Requirements**

- a. Provide preformed roof insulation boards that comply with requirements and referenced standards, as selected from manufacturer's standard sizes.
- b. Provide preformed saddles, crickets, and other insulation shapes where indicated for sloping to drain. Fabricate to slopes indicated.
- c. Provide roof insulation accessories approved by the roof membrane manufacturer and as recommended by insulation manufacturer for the intended use.

**2. Component:**

**a. Properties:**

- 1. Type: Duro-Guard® ISO HD (Coated Glass Facer)
- 2. Board Application: Flat Stock
- 3. Size: 4' x 8'
- 4. Method: Assembly Thickness: 0.5"
- 5. Attachment Type: Mechanically Fastened
- 6. Fasteners: Duro-Last® HD Screw (#14)
- 7. Plates: Duro-Last® 3-Inch Metal Plate

**b. Features:**

- 1. 1/2-inch thick high density polyisocyanurate insulation panel manufactured on-line using premium performance coated glass facers
- 2. Complying with ASTM C1289, Type II, felt or glass-fiber mat facer on both major surfaces
- 3. Provide Duro-Last factory-coated steel fasteners and metal or plastic plates meeting corrosion-resistance provisions in FMG 4470, designed for fastening insulation and/or insulation cover boards in conformance to specified design requirements.

**C. Deck Type:**

**1. Properties:**

- a. Type: Steel Deck (22 ga)

**D. Accessory Materials: Provide accessory materials supplied by or approved for use by Duro-Last Roofing, Inc.:**

- 1. Sheet Flashing: Manufacturer's standard reinforced PVC sheet flashing.
- 2. Secondary Material: Manufactured using standard reinforced PVC membrane.
  - a. Duro-Last® Parapet Flashing
- 3. Prefab Flashings: Manufactured using standard reinforced PVC membrane.
  - a. Duro-Last® Inside and Outside Corners

- b. Duro-Last® Stack Flashing
- c. Duro-Last® Curb Flashing
- 4. Fasteners: Factory-coated steel fasteners meeting corrosion-resistance provisions in FMG 4470, designed for fastening membrane and insulation to substrate. Supplied by Duro-Last Roofing, Inc.
  - a. Duro-Last® HD Screw (#14)
- 5. Plates: Metal or plastic plates meeting corrosion-resistance provisions in FMG 4470, designed for fastening membrane and insulation to substrate. Supplied by Duro-Last Roofing, Inc.
  - a. Duro-Last® Cleat Plate™
  - b. Duro-Last® 3-Inch Metal Plate

## **PART 3 EXECUTION**

### **3.1 EXAMINATION**

- A. Verify that the surfaces and site conditions are ready to receive work.
- B. Verify that the deck is supported and secured.
- C. Verify that the deck is clean and smooth, free of depressions, waves, or projections, and properly sloped to drains, valleys, eaves, scuppers or gutters.
- D. Verify that the deck surfaces are dry and free of standing water, ice or snow.
- E. Verify that all roof openings or penetrations through the roof are solidly set.
- F. If substrate preparation is the responsibility of another contractor, notify Architect of unsatisfactory preparation before proceeding.
- G. Prior to re-covering an existing roofing system, conduct an inspection of the roof system accompanied by a representative of the membrane manufacturer or an authorized contractor.
  - 1. Determine required fastener type, length, and spacing.
  - 2. Verify that moisture content of existing roofing is within acceptable limits.
  - 3. Identify damaged areas requiring repair before installation of new roofing.
  - 4. Conduct core cuts as required to verify information required.

### **3.2 PREPARATION**

- A. Clean surfaces thoroughly prior to installation.
- B. Prepare surfaces using the methods recommended by the manufacturer for achieving the best result for the substrate under the project conditions.
- C. Surfaces shall be clean, smooth, free of fins, sharp edges, loose and foreign material, oil, grease, and bitumen.
- D. Re-Roofing Over Existing Single-Ply System:
  - 1. Remove all loose or high fasteners.

2. Membrane contaminated with bitumen must be immediately cleaned. If cleaning does not remove the bitumen, the contaminated membrane must be replaced, or covered with both a slip sheet and new membrane.
3. Blisters, buckles and other surface irregularities must be repaired or removed. If the damage is extensive, an approved rigid board insulation or a cover board must be installed.
4. When the system is smooth or granular-surfaced, any approved slip sheet, insulation or cover board may be used to provide separation of the roof system and new membrane. Duro-Guard fan folds may be used if the surface is pea gravel or crushed stone which is ¼ to 3/8 inch in size and has been leveled and maintained at 4 psf. For larger rock/gravel, utilize an approved rigid insulation or cover board.
5. If rock/gravel surfacing is removed, an approved fan fold, rigid insulation or cover board must be used. If embedded rock/gravel remains that protrudes out of the deck more than ¼ inch, do not use fan fold board. Instead, use an approved cover board or rigid insulation.
6. When installing polystyrene insulation over coal tar pitch or asphalt-based roof systems, a slip sheet must be used between the insulation and existing roof.

### 3.3 INSTALLATION

#### A. Insulation:

##### 1. General Requirements

- a. Install insulation in accordance with the roof manufacturer's requirements.
- b. Insulation shall be adequately supported to sustain normal foot traffic without damage.
- c. Where field trimmed, insulation shall be fitted tightly around roof protrusions with no gaps greater than ¼ inch.
- d. Tapered insulation boards shall be installed in accordance with the insulation manufacturer's shop drawings.
- e. No more insulation shall be applied than can be covered with the roof membrane by the end of the day or the onset of inclement weather.
- f. If more than one layer of insulation is used, all joints between subsequent layers shall be offset by at least 6 inches.

##### 2. Duro-Guard® ISO HD (Coated Glass Facer)

- a. Use only fasteners, stress plates and fastening patterns accepted for use by the roof manufacturer. Fastening patterns must meet applicable design requirements.
- b. Install fasteners in accordance with the roof manufacturer's requirements. Fasteners that are improperly installed must be replaced or corrected.
- c. Install all layers in parallel courses with end joints staggered 50% and adjacent boards butted together with no gaps greater than ¼ inch.

#### B. Roofing Membrane:

##### 1. General Requirements

- a. Install membrane in accordance with the roof manufacturer's requirements.
  - b. Cut membrane to fit neatly around all penetrations and roof projections.
2. Duro-Last 50-mil Membrane (Custom Fab: Regular Rolls)
  - a. Use only fasteners, stress plates and fastening patterns accepted for use by the roof manufacturer. Fastening patterns must meet applicable design requirements.
  - b. Install fasteners in accordance with the roof manufacturer's requirements. Fasteners that are improperly installed must be replaced or corrected.
  - c. Mechanically fasten membrane to the structural deck utilizing fasteners and fastening patterns in accordance with the roof manufacturer's requirements.
- C. Weld overlapping sheets together using hot air. Minimum weld width is 1-1/2 inches.
- D. Check field welded seams for continuity and integrity and repair all imperfections by the end of each work day.
- E. Flashings: Complete all flashings and terminations as indicated on the drawings and in accordance with the membrane manufacturer's requirements.
  1. Provide securement at all membrane terminations at the perimeter of each roof level, roof section, curb flashing, skylight, expansion joint, interior wall, penthouse, and other similar condition.
    - a. Do not apply flashing over existing thru-wall flashings or weep holes.
    - b. Secure flashing on a vertical surface before the seam between the flashing and the main roof sheet is completed.
    - c. Extend flashing membrane a minimum of 6 inches (152 mm) onto the main roof sheet beyond the mechanical securement.
    - d. Use care to ensure that the flashing does not bridge locations where there is a change in direction (e.g. where the parapet meets the roof deck).
  2. Penetrations:
    - a. Flash all pipes, supports, soil stacks, cold vents, and other penetrations passing through the roofing membrane as indicated on the Drawings and in accordance with the membrane manufacturer's requirements.
    - b. Utilize custom prefabricated flashings supplied by the membrane manufacturer.
    - c. Existing Flashings: Remove when necessary to allow new flashing to terminate directly to the penetration.
  3. Pipe Clusters and Unusual Shapes:
    - a. Clusters of pipes or other penetrations which cannot be sealed with prefabricated membrane flashings shall be sealed by surrounding them with a prefabricated vinyl-coated metal pitch pan and sealant supplied by the membrane manufacturer.
    - b. Vinyl-coated metal pitch pans shall be installed, flashed and filled with sealant in accordance with the membrane manufacturer's requirements.

- c. Pitch pans shall not be used where prefabricated or field fabricated flashings are possible.

F. Roof Drains: Coordinate installation of roof drains and vents.

1. Drain Assemblies with Clamping Rings:

- a. Remove existing roofing system materials from drain bowl and clamping ring.
- b. The membrane must extend beyond the inside of the clamping ring.
- c. Use a manufacturer supplied or approved sealant (1/2 tube minimum) between the membrane and drain bowl assembly.
- d. After the membrane is properly installed onto the bowl and the clamping ring set in place, all bolts securing the ring must be installed to provide constant, even compression on the sealant. If bolts are broken or missing, replacements must be installed.

2. Drain Boots:

- a. Remove existing flashing and asphalt at existing drains in preparation for sealant and membrane.
- b. Use a manufacturer supplied or approved sealant (1/2 tube minimum) to the outside of the drain boot and insert it into the drain.
- c. Fasten membrane around the perimeter of the drain with the same fastening pattern as the field membrane, no less than 1 fastener per drain.
- d. Install a pair of composite drain rings (CDRs) to compress the boot to the pipe. Ensure the CDR openings face in opposite directions.
- e. Secure the manufacturer's drain guard over the opening by heat welding the attachment tabs to the roof membrane.

G. Edge Details:

1. Provide edge details as indicated on the Drawings. Install in accordance with the membrane manufacturer's requirements.
2. Join individual sections in accordance with the membrane manufacturer's requirements.
3. Coordinate installation of metal flashing and counter flashing.
4. Manufactured Roof Specialties: Coordinate installation of copings, counter flashing systems, gutters, downspouts, and roof expansion assemblies.

H. Walkways:

1. Install walkways in accordance with the membrane manufacturer's requirements.
2. Provide walkways where indicated on the Drawings.
3. Install walkway pads at roof hatches, access doors, rooftop ladders and all other traffic concentration points regardless of traffic frequency. Provided in areas receiving regular traffic to service rooftop units or where a passageway over the surface is required.
4. Do not install walkways over flashings or field seams until manufacturer's warranty inspection has been completed.

I. Water Cut-Offs:

1. Provide water cut-offs on a daily basis at the completion of work and at the onset of inclement weather.
2. Provide water cut-offs to ensure that water does not flow beneath the completed sections of the new roofing system.
3. Remove water cut-offs prior to the resumption of work.
4. The integrity of the water cut-off is the sole responsibility of the roofing contractor.
5. Any membrane contaminated by the cut-off material shall be cleaned or removed.

3.4 FIELD QUALITY CONTROL

- A. The membrane manufacturer's representative shall provide a comprehensive final inspection after completion of the roof system. All application errors shall be addressed and final punch list completed.

3.5 PROTECTION

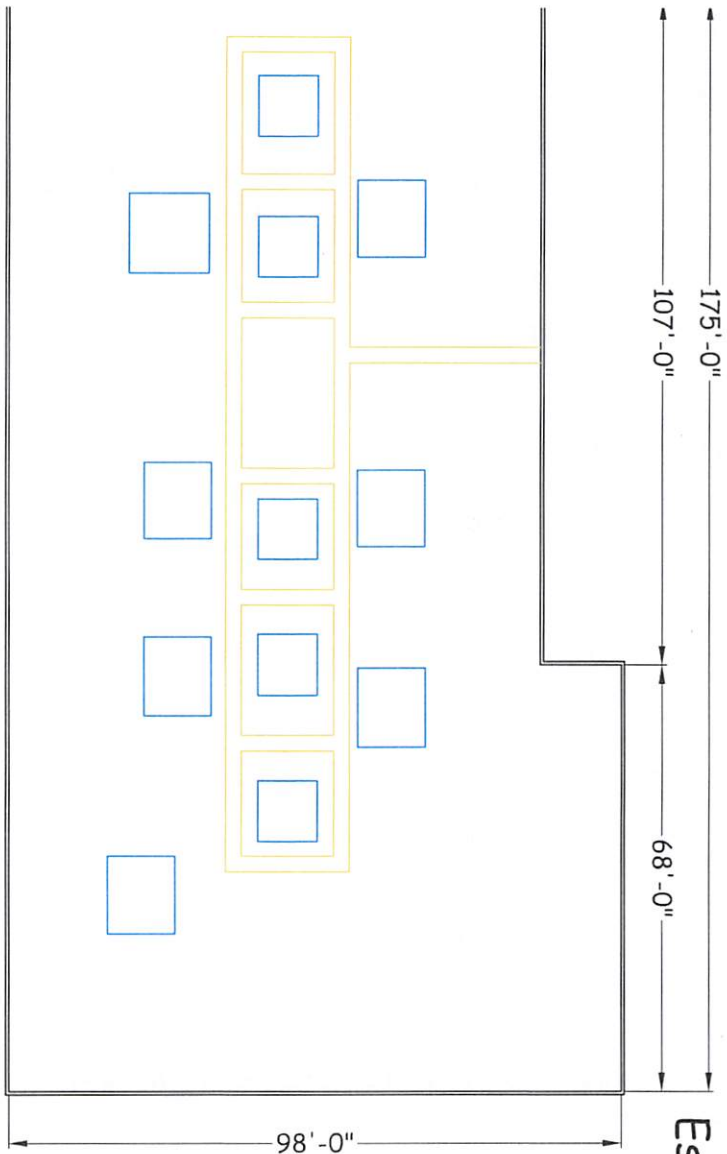
- A. Protect installed roofing products from construction operations until completion of project.
- B. Where traffic is anticipated over completed roofing membrane, protect from damage using durable materials that are compatible with membrane.
- C. Repair or replace damaged products after work is completed.

END OF SECTION

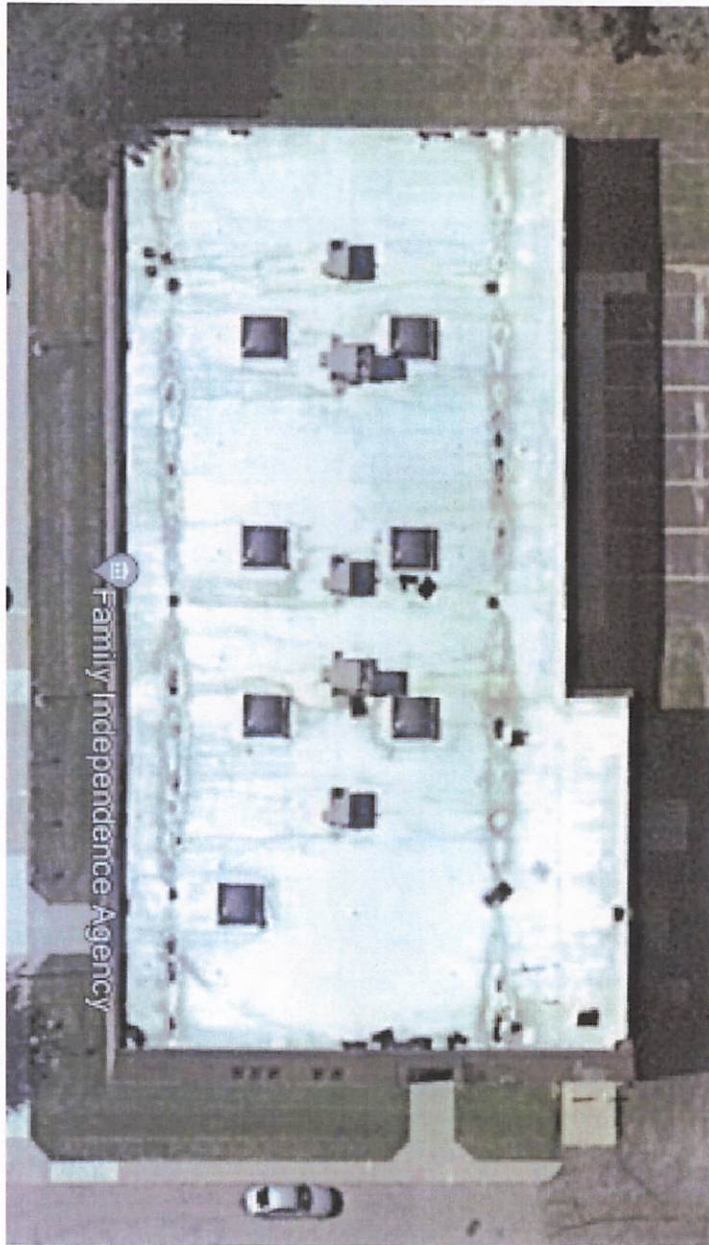
TERMS OF SERVICE

- The Specification Generator is a program (the "Program") that creates a document that can, and in most cases should, be modified by the specifier to meet the requirements of an individual project. Duro-Last is not responsible for the accuracy of any document created in full or in part by this Program.
- Duro-Last is providing this Program to specifiers without charge to aid in their development of roofing project specifications. The user of any specification created with this Program is solely responsible for its content and accuracy with respect to complying with Duro-Last Roofing specifications, project requirements and all applicable regulatory codes. This Program should not be construed to replace any system design provided by a professional architect or engineer, who remains ultimately responsible for the design integrity and safety of all building components including the applicability of all relevant building codes and regulations.
- Duro-Last and its employees and independent sales personnel representing Duro-Last DISCLAIM responsibility for and are not liable for damages (direct or consequential, including but not limited to loss of profits) or damage to buildings or their contents, with respect to the use of this Program and/or any specifications created through its use.

\*



Estimated Walkpad Sq Ft: 1100  
 Estimated Deck Sq Ft: 15759  
 Presentation Drawing Only  
 Orange = Walkpads



<b>Legend</b>	Drawn By: Dave Salo	Tuscola City Human Services		
Factory	Date: 02/12/24	Caro, MI-		
Field	Scale: N.T.S.	Trevor Wagester		
Curb	<p><small>Duro-Last Roofing, Inc. is the supplier of the materials only. The proposed layout is based upon the information provided by the contractor and/or independent sales rep. Verification of local building codes, dimensions and quantities are the sole responsibility of the architect, installing contractor, independent sales rep, or owners representative</small></p>	Date	Revision	By
Stack		00/00/00	-	-
Walkpad		00/00/00	-	-

**DURO-LAST**  
 THE WORLD'S BEST ROOF.  
 525 E Morley Drive  
 Saginaw, MI 48601  
 Fax: 989-758-6359  
 Phone: 800-248-0280  
 engineerin@duro-last.com  
 Project #: 225710



## **Right to Know Hazardous Materials**

The Contractor shall comply with the Michigan Right-to-Know Law (HB 411). Provide the owner with Proof of Compliance including a copy of the Contractor's written plan, a list of all chemicals to be brought on site, Material Safety Data Sheets (MSDS) and a certificate that all employees have been trained.

The contractor shall furnish owner with a copy of contractors safety program.



Tuscola County

Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

**Fwd: [EXTERNAL] Tuscola Offices - Cost to add insulation**

1 message

**Mike Miller** <mmiller@tuscolacounty.org>

Wed, Apr 24, 2024 at 4:14 PM

To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

Here are the estimates.

----- Forwarded message -----

From: **Rick Booms** <rick@boomsinc.com>

Date: Wed, Apr 24, 2024 at 2:10 PM

Subject: [EXTERNAL] Tuscola Offices - Cost to add insulation

To: Mike Miller <mmiller@tuscolacounty.org>, terryg njb-architects.com <terryg@njb-architects.com>

Cc: derek@boomsinc.com <derek@boomsinc.com>, Al Patrick <al@marletteroofing.com>

Mike and Terry, cc: Derek @ Booms and Al @ Marlette

Cost from Marlette Roofing to add insulation to a +/-4,000 SF area.

Option 1:

Marlette Roofing: Deduct 1/2" fanfold insulation DEDUCT <\$1,500.00>

Marlette Roofing: Add 2" of polyiso insulation (R-12) ADD \$6,000.00

10% GC mark up: ADD\$450.00

Total ADD = \$4,950.00

Option 2:

Marlette Roofing: Deduct 1/2" fanfold insulation DEDUCT <\$1,500.00>

Marlette Roofing: Add 4" of poloyiso insulation (R-24) ADD \$12,000.00

10% GC mark up: ADD \$1,050.00

Total ADD = \$11,550.00

\*I apologize for the late notice, but Marlette Roofing is coming tomorrow, and they are unable to delay the installation. They are currently planning to install the 1/2" insulation and the membrane, unless they are told differently.\*

Thank you,

Rick D. Booms

Booms Construction, Inc.

P: 989-269-8562

C: 989-550-7709



Tuscola County

Neil Hammerbacher <nhammerbacher@tuscolacounty.org>

**Fwd: Next BOC meeting**

1 message

**Shelly Lutz** <lutzs@tuscolacounty.org>  
To: Neil Hammerbacher <nhammerbacher@tuscolacounty.org>  
Cc: Robert Baxter <rbaxter@tuscolacounty.org>

Wed, May 8, 2024 at 8:43 AM

Neil,  
Will you please add this request from Undersheriff Baxter to the Agenda? I will prepare a separate motion, and send it to you.  
Thank you!

----- Forwarded message -----  
From: **Robert Baxter** <rbaxter@tuscolacounty.org>  
Date: Wed, May 8, 2024 at 8:39 AM  
Subject: Next BOC meeting  
To: Shelly Lutz <lutzs@tuscolacounty.org>

We have given a conditional job offer to Tricia Sharp to fill a vacant full time Records-Criminal Division position pending a background, physical and drug test. Her anticipated start date will be on or about June 1, 2024. Her starting wage will be at step one at \$18.70 per hour.

**Undersheriff Robert E. Baxter**  
**Tuscola County Sheriff Administration**  
**420 Court St**  
**Caro, MI 48723**  
**989-673-8161 ext 2225**  
**Fax: 989-673-8164**



--

*Shelly A. Lutz*

**Tuscola County**

Human Resource Director

125 W. Lincoln St.

Caro, MI 48723

(989) 672-3705

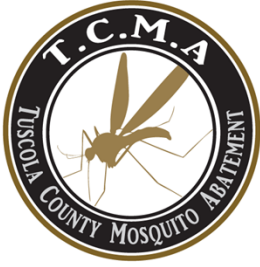
Fax (989)672-4011

[lutzs@tuscolacounty.org](mailto:lutzs@tuscolacounty.org)

**VISIT US ONLINE FOR COUNTY SERVICES @ [WWW.TUSCOLACOUNTY.ORG](http://WWW.TUSCOLACOUNTY.ORG)**

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## TUSCOLA COUNTY MOSQUITO ABATEMENT

1500 Press Drive  
Caro, Michigan 48723-9291  
989-672-3748 Phone ~ 989-672-3724 Fax  
*Larry Zapfe, Director*

---

To: Tuscola Board of Commissioners and  
Neil Hammerbacher-County Controller/Administrator

From: Larry Zapfe, Director

Date: May 13, 2024

Re: Respectfully, request to hire the following seasonal employees to refill two vacant positions for the 2024 mosquito season, pending results of a background check and physical.

1. Tiffany Howard
2. Cortez Williams

Thank you for your time and consideration regarding this request.

Respectfully,  
Larry Zapfe, Director

