

FINANCE COMMITTEE

AGENDA

September 23, 2020, 7:30 AM

Zoom Virtual Meeting Room

Meeting ID: 399-700-0062 / Password: LCBOC

<https://zoom.us/j/3997000062?pwd=SUdLYVFFcmozWnFxbm0vcHRjWkVIZz09>

Pages

1. **CALL MEETING TO ORDER**
2. **ROLL CALL**
3. **APPROVAL OF MINUTES** 4
Meeting minutes dated: September 22, 2020
4. **TABLED ITEMS FROM PREVIOUS MEETINGS**
5. **APPROVAL OF AGENDA**
6. **CALL TO THE PUBLIC**
7. **REPORTS**
8. **RESOLUTIONS FOR CONSIDERATION**
 - 8.1 **Human Resources** 11
Resolution to Modify the Non-Union Employees, Elected Officials, Commissioners, and Judges Benefit Plans for 2021 Fiscal Year
 - 8.2 **Court Central Services** 14
Resolution to Authorize Extension of the Temporary Juvenile Drug Treatment Court Attorney Services Contract made by the 44th Circuit Court & 53rd District-Specialty Courts and Programs until 12/31/2020
 - 8.3 **Court Central Services** 16
Resolution Authorizing a Budget Amendment for State of Michigan Coronavirus Emergency Supplemental Funding

8.4	Court Central Services	17
	Resolution Authorizing an Agreement with D’n’A-Drug and Alcohol Testing Centers to Provide Drug and Alcohol Testing Services	
8.5	Court Central Services	22
	Resolution Authorizing Contracts to Provide Residential Substance Use Treatment Services for Specialty Courts and Programs	
8.6	Health Department	28
	Resolution to Accept Michigan Department of Health and Human Services (MDHHS) Coronavirus Relief Fund (CRF) to Support Livingston County Health Department’s Covid-19 Response	
8.7	Fiscal Services	34
	Resolution Authorizing the Acceptance of the Coronavirus Relief Local Government Grants (CRLGG) Program in Fiscal Year 2020	
8.8	Emergency Management	51
	Resolution Authorizing the Acceptance and Signing of the FY 2021 Emergency Management Performance Grant	
8.9	Planning Department	69
	Resolution Authorizing a Community Development Block Grant (CDBG) CARES Funding Grant with the Michigan Economic Development Corporation (MEDC) to Assist with the Prevention, Mitigation and Response to COVID-19	
8.10	Prosecutor	71
	Resolution Authorizing Crime Victim Rights Grant for Fiscal Year 2021	
8.11	Jail	73
	Resolution Authorizing the Purchase and Upgrade of Camera Equipment for the Jail	
8.12	Jail	79
	Resolution Authorizing a Budget Amendment to the Sheriff Jail 2020 Operating Budget	
8.13	Jail	83
	Resolution Amending Resolution 2020-09-211 Authorizing Additional Fencing at Rear of Jail to Secure Building and Protect Inmates	

9. ANNUAL REPORTS

9.1 Treasurer

Jennifer Nash, County Treasurer

9.2 Information Technology

Kris Tobbe, Department Director

10. CLAIMS

Dated: September 23, 2020

11. PREAUTHORIZED

Dated: September 4 through September 17, 2020

12. CALL TO THE PUBLIC

13. ADJOURNMENT

FINANCE COMMITTEE

MEETING MINUTES

September 9, 2020, 7:30 a.m.

Zoom Virtual Meeting Room

Meeting ID: 399-700-0062 / Password: LCBOC

<https://zoom.us/j/3997000062?pwd=SUdLYVFFcmozWnFxbm0vcHRjWkVIZz09>

Members Present Kate Lawrence, Douglas Helzerman, William Green, Wes Nakagiri, Robert Bezotte, Carol Griffith, Jay Gross, and Gary Childs

1. **CALL MEETING TO ORDER**

The meeting was called to order by Commissioner Lawrence at 7:31 a.m.

2. **ROLL CALL**

Indicated the presence of a quorum.

3. **APPROVAL OF MINUTES**

Meeting Minutes Dated: August 19, 2020

Motion to approve the minutes as presented.

Moved by: D. Helzerman

Seconded by: C. Griffith

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

4. **TABLED ITEMS FROM PREVIOUS MEETINGS**

None.

Motion to bring agenda item 4.1 from the table for discussion.

Moved by: C. Griffith

Seconded by: G. Childs

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

4.1 Jail

Resolution Authorizing Additional Fencing at Rear of Jail to Secure Building and Protect Inmates

Sheriff Murphy presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: G. Childs

Seconded by: R. Bezotte

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

5. APPROVAL OF AGENDA

Motion to approve the Agenda as presented.

Moved by: C. Griffith

Seconded by: J. Gross

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

6. CALL TO THE PUBLIC

None.

7. REPORTS

- Nathan Burd, County Administrator, and Cindy Catanach, Finance Officer, introduced the budget presentations from the Livingston County Courts.

7.1 2020 Budget - Level 2 - Department Requests

- Friend of the Court, Melissa Sharrer, presented slides reviewing the budget as requested.
- Roberta Sacharski, Trial Court Administrator, presented slides reviewing the budget as request by Circuit Court, Juvenile Court & Child Care Fund, Probate, District Court, and Specialty Courts.

8. RESOLUTIONS FOR CONSIDERATION

8.1 Juvenile Court

Resolution Authorizing an Agreement with Multiple Providers to Provide Child Care Funded Treatment Services

Debby Shaw, Juvenile & Probate Court Administrator, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: G. Childs

Seconded by: R. Bezotte

Yes (7): K. Lawrence , D. Helzerman, W. Green , R. Bezotte, C. Griffith, J. Gross,
and G. Childs

No (1): W. Nakagiri

Motion Carried (7 to 1)

8.2 Public Defender

Authorizing Felony Public Defender Contracts for 2021

Karen Groenhout, Public Defender, presented the resolution

Recommend Motion to the Board of Commissioners.

Moved by: C. Griffith

Seconded by: D. Helzerman

Yes (7): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith,
and G. Childs

No (1): J. Gross

Motion Carried (7 to 1)

8.3 Animal Shelter

Resolution Authorizing the Change of Fee Schedule in the Animal Shelter

Christy Peterson, Animal Shelter Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: G. Childs

Seconded by: R. Bezotte

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith,
J. Gross, and G. Childs

Motion Carried (8 to 0)

8.4 Car Pool

Resolution Authorizing FY 2021 Vehicle Replacements Leased through the County's
Partnership with Enterprise Fleet Management

Recommend Motion to the Board of Commissioners.

Moved by: W. Green

Seconded by: D. Helzerman

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

8.5 Facility Services

Resolution Authorizing Resealing the Foundation and Replacing Failed Drain Tiles at the Historical Courthouse

Chris Folts, Facility Services Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: G. Childs

Seconded by: J. Gross

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

8.6 Treasurer

Resolution Authorizing the County Treasurer to Establish Fund 282 CARES Act

Jenny Nash, County Treasurer, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: C. Griffith

Seconded by: W. Green

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

8.7 Veterans' Services

Resolution Authorizing an Agreement with the Michigan Veterans Affairs Agency to Support the Livingston County Veterans Services Office to Enhance and Improve Operations

Mary Durst, Veterans' Services Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: R. Bezotte

Seconded by: W. Green

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross, and G. Childs

Motion Carried (8 to 0)

8.8 Veterans' Services

Resolution Authorizing the Business Property Lease Agreement with Country Corners Shopping Center, L.L.C. for the Livingston County Veteran Services Office to Occupy the North Facing 3,020 sq. ft. of 4050 E. Grand River, Howell, MI 48843

Mary Durst, Veterans' Services Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: R. Bezotte

Seconded by: W. Green

Yes (7): K. Lawrence , D. Helzerman, W. Green , R. Bezotte, C. Griffith, J. Gross, and G. Childs

No (1): W. Nakagiri

Motion Carried (7 to 1)

8.9 Veterans' Services

Resolution Approving John Stewart & Associates, Inc. as Construction Manager for the Build Out of Veteran Services Office at 4050 E. Grand River Ave., Howell, MI 48843

Mary Durst, Veterans' Services Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: D. Helzerman

Seconded by: R. Bezotte

Yes (2): D. Helzerman, and G. Childs

No (6): K. Lawrence , W. Green , W. Nakagiri, R. Bezotte, C. Griffith, and J. Gross

Motion Failed (2 to 6)

8.10 Administration

Resolution Authorizing an Agreement Consenting to the Assignment of the Investment Advisory Agreement with Plante Moran Financial Advisors to CapFinancial Partners

Commissioner Childs exited at 9:25 a.m.

Jennifer Palmbo, Human Resources Director, presented the resolution.

Recommend Motion to the Board of Commissioners.

Moved by: W. Green

Seconded by: K. Lawrence

Yes (7): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith,
and J. Gross

Absent (1): G. Childs

Motion Carried (7 to 0)

8.11 Fiscal Services

Resolution Requesting Reallocation of Pension Assets

Commissioner Childs returned at 9:29 a.m.

Cindy Catanach, Finance Officer, presented the resolutions.

Recommend Motion to the Board of Commissioners.

Moved by: R. Bezotte

Seconded by: W. Green

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith,
J. Gross, and G. Childs

Motion Carried (8 to 0)

9. CLAIMS

Dated: September 9, 2020

Recommend Motion to the Board of Commissioners.

Moved by: C. Griffith

Seconded by: W. Green

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross,
and G. Childs

Motion Carried (8 to 0)

10. PREAUTHORIZED

Dated: August 14 through September 3, 2020

Recommend Motion to the Board of Commissioners.

Moved by: J. Gross

Seconded by: C. Griffith

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross,
and G. Childs

Motion Carried (8 to 0)

11. CALL TO THE PUBLIC

None.

12. CLOSED SESSION

Discuss Written Legal Opinion Pursuant to MCL 15.268(h)

Motion to recess to Closed Session at 9:32 a.m.

Moved by: D. Helzerman

Seconded by: J. Gross

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross,
and G. Childs

Motion Carried (8 to 0)

Motion to return to Open Session at 9:41 a.m.

Moved by: D. Helzerman

Seconded by: G. Childs

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross,
and G. Childs

Motion Carried (8 to 0)

13. ADJOURNMENT

Motion to adjourn the meeting at 9:42 a.m.

Moved by: D. Helzerman

Seconded by: G. Childs

Yes (8): K. Lawrence , D. Helzerman, W. Green , W. Nakagiri, R. Bezotte, C. Griffith, J. Gross,
and G. Childs

Motion Carried (8 to 0)

Natalie Hunt, Recording Secretary

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution to Modify the Non-Union Employees, Elected Officials, Commissioners, and Judges Benefit Plans for 2021 Fiscal Year – Human Resources

WHEREAS, Livingston County has historically taken proactive measures to impact utilization of healthcare services including a wellness program, employee cost sharing at point of service, and low \$2 generic drug costs; and

WHEREAS, in order to continue to have maximum impact on utilization of healthcare services, we will continue to utilize Healthcare Bluebook, an online healthcare pricing tool, and Blue Cross Blue Shield's licensed Michigan telemedicine provider and continue a high deductible health plan coupled with a health savings account; and

WHEREAS, Aon went out to bid for vision coverage and based on the competitive bid process and expanded provider network, Livingston County Administration is recommending contracting with MetLife for employee paid vision coverage offered through the County flexible spending plan; and

WHEREAS, should the IRS employee contribution limits for \$125 flexible spending, dependent care, or health savings accounts increase for 2021 to allow employees to increase their voluntary salary reduction, Livingston County will allow for the maximum contribution allowed under law; and

WHEREAS, effective 1/1/2021 an across the board wage increase of 1.5% has been budgeted for all non-union employees who are not red-circled; and

WHEREAS, the Board of Commissioners took action via Resolutions #2011-12-321, #2012-10-282, #2013-12-353, #2014-10-294, #2015-11-230 #2016-11-192, #2017-11-180, #2018-10-185 and 2019-09-148 to exempt the County from the employee premium sharing contributions required under 2011 PA 152 and all of the six (6) collective bargaining agreements require 10% and 20% employee premium sharing, depending on date of hire.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes the Human Resources Department to make the following modifications to the non-union employees, elected officials, and judges health plan and other benefits for 2021:

1. Benefit changes effectuated by Resolutions #2019-09-148, #2019-08-121, #2018-10-165, #2017-11-180, #2016-11-192, #2015-11-230, #2014-10-294, #2013-12-353, #2012-10-282, #2011-10-276, #2010-10-277, #2009-08-266 and #2009-10-316 shall remain in full force and effect.

2. The wellness program for regular non-union employees, elected officials, and judges approved in Resolution #2012-09-250 shall continue for the 2021 benefit year.

3. The Livingston Flexible Benefits Plan document is hereby amended to allow employees to contribute the maximum salary reduction contributions to their flex spending, including limited purpose flexible spending accounts, dependent care, and health saving accounts.

4. Livingston County continue to offer a high deductible health plan (HDHP) with a health savings account (HSA). The plan shall be offered through Blue Cross/Blue Shield of Michigan with Health Equity as the HSA and Limited Purpose Flexible Spending Account administrator and shall provide the following: \$2,000/\$4,000 deductible, 80%/20% coverage once deductible is reached, 100% preventative coverage, Rx \$10/\$40/\$80, and preventative prescription drug rider. There shall be no employee premium sharing on a per pay basis. The County shall deposit contributions into the HSA account in the following manner: \$500 for single/\$1,000 family coverage effective 1/1/2021. The County will match employee contributions to the HSA account up to an additional \$500 for single/\$1,000 for family.

5. Based on the competitive bid process and expanded provider network, Livingston County shall contract with MetLife for employee paid vision coverage offered through the County flexible spending plan.

BE IT FURTHER RESOLVED that acting pursuant to the authority granted to a County under Section 8 of Act 152 of 2011, the Livingston County Board of Commissioners hereby exempts Livingston County from the requirements of 2011 P.A. 152 for the medical benefit plan coverage year 2021 (January 1, 2021 through December 31, 2021).

BE IT FURTHER RESOLVED that effective January 1, 2021, non-union employees including elected officials, but excluding County Commissioners and judges, shall receive a 1.5% increase in wages. For those employees whose wages have been red-circled, this 1.5% increase may be reduced to prevent them from exceeding the salary range maximum of their assigned pay grade.

BE IT FURTHER RESOLVED that the interpretation and operation of the benefits outlined above are within the sole discretion of the Livingston County Board of Commissioners and the benefits outlined above may be added to, expanded, reduced, deleted, or otherwise modified by the County Board and such modifications shall be solely within the discretion of the Livingston County Board of Commissioners.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Commissioners is authorized to sign any and all documents needed to effectuate these changes, after approval as to form by civil counsel.

BE IT FINALLY RESOLVED that this resolution supersedes all previous resolutions that would apply to the benefits plan for non-union employees, elected officials, and judges.

#

#

#

MOVED:
SECONDED:
CARRIED:

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution to Authorize Extension of the Temporary Juvenile Drug Treatment Court Attorney Services Contract made by the 44th Circuit Court & 53rd District-Specialty Courts and Programs until 12/31/2020

WHEREAS, Livingston County Specialty Courts and Programs had contracted with Rolland Sizemore, via Resolution 2017-01-007, for Attorney Services for participants of Juvenile Drug Treatment Court; and

WHEREAS, Rolland Sizemore tendered his resignation on March 12, 2020 from the Juvenile Drug Treatment Court; and

WHEREAS, A temporary contract was entered into with William Livingston to perform these services until September 30, 2020; and,

WHEREAS, Specialty Courts and Programs requests an additional 3 months to ensure continuity of services as we solicit bids for a contract for attorney services for Juvenile Drug Treatment Court; and

WHEREAS, the monies for this contract is currently appropriated in the 2020/2021 SCAO Juvenile Drug Court Grant; and

WHEREAS, the total monthly contracted amount shall not exceed \$1,000.00 per month.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize the Specialty Courts and Programs to extend the temporary contract with William Livingston for Juvenile Drug Treatment Court Attorney Services until December 31st, 2020 with the total monthly contracted amount not to exceed \$1,000.00 per month.

BE IT FURTHER RESOLVED that the Chairman of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts/agreements, and future amendments for monetary and contract language adjustments related to the above upon review and/or preparation of Civil Counsel.

#

#

#

MOVED:
SECONDED:
CARRIED:



204 S. Highlander Way, Suite 3
Phone (517) 546-1500 Fax (517) 546-3731

Memorandum

To: Livingston County Board of Commissioners

From: Sara Applegate, Court Programs Administrator

Date: September 16, 2020

Re: Resolution to Authorize Extension of the Temporary Juvenile Drug Treatment Court Attorney Services Contract made by the 44th Circuit Court & 53rd District Specialty Courts and Programs until 12/31/2020

The Juvenile Drug Treatment Court Attorney Services contract was awarded to Rolland Sizemore, under Contract No. 433. Rolland Sizemore tendered his resignation from the Juvenile Drug Treatment Court and a temporary contract entered into with William Livingston until September 30th, 2020.

Specialty Courts and Programs would like to request an extension of this contract an additional 3 months to ensure that we have ample time to provide potential vendors the opportunity to bid on these services and to evaluate all received bids. Specialty Courts and Programs request to extend the temporary contract with Mr. Livingston until December 31st 2020. By extending the current contract, this will ensure continuity of services for our program participants while providing the County the opportunity to achieve the best value for this service.

Thank you in advance for your consideration. If you have any questions regarding this matter, please contact me.

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing a Budget Amendment for State of Michigan Coronavirus Emergency Supplemental Funding

WHEREAS, the Livingston County Courts – Central Services applied for the Coronavirus Emergency Supplemental Funding Program fiscal year 2020; and

WHEREAS, Resolution 2020-07-166 was approved by the Board of Commissioners on July 13, 2020, authorizing the Livingston County Courts to apply for and enter into contract with the State of Michigan for fiscal year 2020 Coronavirus Emergency Supplemental Funding; and

WHEREAS, the Livingston County Courts have been selected to receive an award, pending finalization of the Grant Agreement, in the amount of \$197,363.50 for reimbursement funds from the State of Michigan for participation in the 2020 Coronavirus Emergency Supplemental Funding Program.

THEREFORE, BE IT RESOLVED that the Livingston County Board of Commissioners authorizes the acceptance of 2020 Coronavirus Emergency Supplemental Funding Program funds in the amount of \$197,363.50.

BE IT FURTHER RESOLVED that the Chairman of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts/agreements, and future amendments for monetary and contract language adjustments related to the above upon review of Civil Counsel.

BE IT FURTHER RESOLVED that the Chairman of the Livingston County Board of Commissioners authorizes any budget amendment necessary to effectuate this grant award.

#

#

#

MOVED:
SECONDED:
CARRIED:

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing an Agreement with D’n’A-Drug and Alcohol Testing Centers to Provide Drug and Alcohol Testing Services - Court Central Services & Trial Courts

WHEREAS, Livingston County Courts have a need for drug and alcohol testing services; and

WHEREAS, the current contract expires on September 30th, 2020; and,

WHEREAS, in accordance with the County’s Procurement Policy, a formal bid process was performed and the submitted proposals were evaluated; and

WHEREAS, D’n’A, submitted a proposal that will provide the drug and alcohol testing at the attached rates for the period of October 1st, 2020 through September 30th, 2023, with an option for two (2) additional one-year renewal periods; and

WHEREAS, funding for same is available through the Court Central Services’ state and federal grants, the Child Care Fund, and the Court budget.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes entering into an agreement with D’n’A for drug and alcohol testing services at the attached rates for the period of October 1st, 2020 through September 30th, 2023, with up to two (2) additional one-year renewal periods.

BE IT FURTHER RESOLVED that the Chairman of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts/agreements, renewals and future amendments for monetary and contract language adjustments related to the above upon review and/or preparation of Civil Counsel.

#

#

#

MOVED:
SECONDED:
CARRIED:

Answer: See **Attachment C Subcontractor Form** as it relates to subcontractors.

10. To the best of the vendor's knowledge, does an actual potential conflict of interest exist between a County employee and the vendor?

Answer: There is no conflict of interest between any County employee and D'n'A.

11. Please describe the software that would be used to provide and drug and alcohol testing results to the court. Would you provide training to the court staff on how to use your software at no additional cost to the court?

Answer: D'n'A's software was developed by Dynamic Solutions and currently maintained by Design Source Media. In-house or ZOOM training is available to all staff and at no charge. D'n'A currently enters data in the DCCMIS system for the Court as well and will continue to adapt to any requirements or requests that are asked from us.

Attachment B – Pricing Proposal
THESE PRICES ARE FOR PROPOSED FOR BOTH CONTRACTS

Registration Fee	FREE
PBT Test/ Free with any other Test	\$4.00
Instant ETG Test	\$5.00
5 Panel Instant Test - (Predetermined)	\$5.00
3 Panel A La Carte Test Strips (Select 3 Drugs of Choice from 12)	\$5.00
ETG/ETS Lab/Dilution/Confirm	\$14.00
10 Panel Instant Drug Test w/ Adulterants	\$10.00
12 Panel Instant Drug Test	\$11.00
16 Panel Instant Drug Test	\$12.00
12 Panel Drug Test/ETG Lab	\$20.00
13 Panel Drug Test/ETG Lab	\$22.00
14 Panel Drug Test/ETG Lab	\$23.00
Drug Sweat Patches Lab Confirmation	\$85.00
Instant Oral Drug Swab	\$15.00
Confirmation Fees	\$20.00
Instant Kratom Strips	\$6.00
RFP-LC-20-16	

Ketamine	\$15.00
Dextromethorphan	\$15.00
Acid Screen	\$25.00
Instant Nicotine	\$5.00
Hair Testing (Starting at)	\$100.00
Dilution Strips	\$1.00
Mobile Testing - (See Reference Section - Mobile Unit- D'n'A)	

Reference Section

In the Reference Section you will find the following:

1. Certificate of Compliance with Public Act of 517 of 2012	59
2. RFP-LC-20-16 Addendum #1 – Signed and Dated	60-64
3. RFP-LC-20-16 Addendum #2 – Signed and Dated	65
4. RFP-LC-20-16 Addendum #3 – Signed and Dated	66-67
5. W-9	68-73
6. 2020 Annual Report	74-75
7. D'n'A Forms	
a. Acknowledgment of Dilution	76
b. Acknowledgment of Failure to Provide Sample.....	77
c. Admission Report	78
d. COVID-19 Testing Protocols & Procedures	79-81
e. Mobile Unit- D'n'A.....	82
f. Successful Urine Sample Instructions.....	83
8. Invoice Drug Court- July 2020	84
9. Invoice- Adult Drug Court	85
10. Lab Certification	86
11. Chicago Sun Times Article	87
12. Chicago Tribune Article	88
13. Certificate of Insurance.....	89



**Bid Recap
For
Drug and Alcohol Testing Services**

**Lead Public Agency: Livingston County
Solicitation: RFP-LC-20-16**

**RFP Issued & Publicly Posted: 8/5/20
Public Posting: Livingston County Fiscal
Services Website & BidNet
Proposals Received: 1**

RFP Due Date: 8/26/20

Livingston County received one (1) proposal in response to the Request for Proposal (RFP) referenced above. Below is a recap of the bid evaluation.

The RFP was publicly posted on two websites. As a result, the bid documents were downloaded by 24 qualified companies. Even though only one (1) qualified submission was received, the Evaluation Committee believes that the process created a system of free and open competition and should be considered valid.

The response was received from D'n'A Drug and Alcohol Testing Centers, Inc. D'n'A Drug and Alcohol Testing Centers provided their response within the timeframe outlined in the RFP.

The evaluation consisted of a review of the responses to the Request for Proposal Scope of Work, Attachment A - Vendor Questionnaire, and Attachment B - Pricing Proposal. A review of the minimum requirements revealed that the one (1) bidder met the minimum mandatory requirements (Section 1.2), and the bidder confirmed its understanding of the Scope of Services (Section 1.3 and 1.4). The bidder was determined to be responsive and responsible after a review of the answers to the Scope of Work sections and the information provided on the requisite forms.

The Evaluation Review Committee (ERC) consisted of four (4) members. The ERC evaluated the proposal submitted by the vendor using the following scoring criteria; Proposal Responses (up to 30 points), Company Profile (up to 10 points), References (up to 10 points), Vendor Questionnaire (up to 30 points), and Pricing Proposal (up to 20 Points).

The consensus score of the Evaluation Committee was 100 points out of 100. Pricing was determined to be fair and reasonable for the services offered.

Based on the evaluation of the technical and pricing proposal, it is recommended that D'n'A Drug and Alcohol Testing Centers, Inc. be offered a three-year contract, with two (2) one-year renewal options for a total contract period not to exceed five years.



LIVINGSTON COUNTY, MICHIGAN
LIVINGSTON COUNTY COURTS CENTRAL SERVICES

204 S. Highlander Way, Howell, MI 48843
Phone 517-540-7414 Fax 517-546-3731
Web Site: <https://www.livgov.com/>

Memorandum

To: Livingston County Board of Commissioners
From: Sara Applegate, Specialty Courts and Programs Administrator
Date: September 16, 2020
Re: Resolution Authorizing a Contract Award to D'n'A-Drug and Alcohol Testing Center to Provide Drug Testing Services for the Specialty Courts and Programs and Trial Courts

Livingston County Specialty Courts and Trial Courts is requesting the Board of Commissioners' approval to award a contract to D'n'A-Drug and Alcohol Testing Center to provide drug testing services for the Specialty Courts and Programs and Livingston County Trial Courts.

The current contract for drug testing services for the Specialty Courts and Programs and the Trial Courts is set to expire on September 30th, 2020. Per the County Purchasing Policy, a competitive bid process was performed in which the bid was posted on the BidNet Michigan Inter-governmental Trade Network (MITN) and the County Purchasing website. One (1) proposal was received and evaluated.

After careful review of the proposal, the Court recommends an award to D'n'A-Drug and Alcohol Testing Center who has provided exemplary services to both our Specialty Courts and Programs and Trial Courts over the last two years as our contracted vendor. As a result, we are requesting the attached resolution be approved which authorizes a contract with D'n'A-Drug and Alcohol Testing Center to provide drug testing services for the Specialty Courts and Programs and Trial Courts for a period of October 1, 2020 through September 30, 2023, with the options for up to two (2) additional one-year renewal periods.

Thank you for your consideration. If you have any questions regarding this matter, please contact me.

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

RESOLUTION AUTHORIZING CONTRACTS TO PROVIDE RESIDENTIAL SUBSTANCE USE/ CO-OCCURRING TREATMENT SERVICES – Court Central Services / Finance Committee/ Full Board

WHEREAS, Livingston County Courts have a need for Residential Substance Use/Co-occurring Treatment Services; and

WHEREAS, the current contract expires on September 30th, 2020; and

WHEREAS, in accordance with the County's Procurement Policy, a formal bid process was performed and four proposals were received and evaluated to provide residential substance use/co-occurring treatment services to the Specialty Courts and Programs for the period of October 1st, 2020 through September 30th, 2023, with the option of renewal for up to two additional one-year periods; and

WHEREAS, Great Lakes, Inc. and Harbor Hall, Inc. have met the requirements including pricing at a daily rate of \$150 per day for up to 60 days to provide the Specialty Courts and Programs with residential substance use/co-occurring treatment services; and

WHEREAS, through various program funding including State and Federal grants, the Courts will have the flexibility to award non-exclusive contracts to the above vendors based on program requirements and the Court's needs with an anticipated start date of October 1st, 2020; and

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes entering into non-exclusive contracts for residential substance use/co-occurring treatment services with Great Lakes, Inc. and Harbor Hall, Inc., beginning October 1st, 2020 and continue until September 30, 2023, with the ability to renew the contracts at the Court's discretion for up to two additional one-year periods.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Board of Commissioners is authorized to sign the contracts and contract extensions referenced above and any future amendments for monetary and contractual language upon review by Civil Counsel.

#

#

#

MOVED

SECONDED:

CARRIED:



Memorandum

To: Livingston County Board of Commissioners
From: Sara Applegate, Specialty Courts and Programs Administrator
Date: September 16, 2020
Re: Resolution Authorizing Contracts to Provide Residential Substance Use/Co-occurring Treatment Services for Specialty Courts and Programs

Livingston County Specialty Courts is requesting the Board of Commissioners' approval to award contracts to Great Lakes Recovery, Inc. and Harbor Hall, Inc. to provide residential substance use/co-occurring treatment services for the Specialty Courts and Programs for the period of October 1, 2020 through September 30, 2023 with the ability to renew the contracts at the Court's discretion for up to two (2) additional one-year periods.

The current contract for residential substance use/co-occurring treatment services for the Specialty Courts and Programs is set to expire on September 30th, 2020. Per the County Purchasing Policy, a competitive bid process was performed in which the bid was posted on the BidNet Michigan Inter-governmental Trade Network (MITN) and the County Purchasing website. Four (4) proposals were received and evaluated. Out of the four proposals, two (2) of the bids met the needs of the Court

Based on the results of the bid tabulation, the Court's evaluation committee determined the following counter pricing proposal for the three chosen vendors: \$150.00 per day rate not to exceed 60 days without Court approval. This counter offer has been agreed upon by two of the chosen vendors. As a result, the Specialty Court Programs will pay the same price for the same service across both participating vendors.

After careful review of the proposal, the evaluation committee recommends an award to Great Lakes Recovery, Inc., and Harbor Hall, Inc. As a result, we are requesting the attached resolution be approved which authorizes a contract with Great Lakes Recovery, Inc., and Harbor Hall, Inc to provide residential substance use/co-occurring treatment services for the Specialty Courts and Programs for a period of October 1, 2020 through September 30, 2023, with the option for up to two (2) additional one-year renewal periods.

The Specialty Court Programs will fund the services through various programs including, but not limited to Swift & Sure Sanctions Probation Program, Adult Drug Court, Veterans Treatment Court, and Intensive Treatment Mental Health Court.

Thank you for your consideration. If you have any questions regarding this matter, please contact me.



**Bid Recap
For
Residential Substance Use/Co-occurring Treatment Services**

**Lead Public Agency: Livingston County
Solicitation: RFP-LC-20-15**

**RFP Issued & Publicly Posted: 8/3/20
Public Posting: Livingston County Fiscal
Services Website and BidNet
Proposals Received: 4**

RFP Proposals Due Date: 8/24/20

Livingston County received four (4) proposals in response to the Request for Proposal (RFP) referenced above. Below is a recap of the bid evaluation.

Four (4) companies provided a response within the timeframe outlined in the RFP.

- Dawn Farm
- Great Lakes Recovery Centers, Inc.
- Harbor Hall, Inc.
- Hegira Health, Inc.

The evaluation consisted of a review of the responses to the Request for Proposal Scope of Work, Attachment A - Vendor Questionnaire, and Attachment B - Pricing Proposal. A review of the minimum requirements revealed that the four (4) bidders met the minimum mandatory requirements (Section 1.2), and the bidders confirmed their understanding of the Scope of Services (Section 1.3, 1.4, and 1.5). The bidders were determined to be responsive and responsible after a review of the answers to the Scope of Work sections and the information provided on the requisite forms.

The Evaluation Review Committee (ERC) consisted of three (3) members. The ERC evaluated the proposals submitted by each vendor using the following scoring criteria:

- Proposal Responses (up to 30 points)
- Company Profile (up to 10 points)
- References (up to 10 points)
- Vendor Questionnaire (30 points)
- Pricing Proposal (20 Points)

Based on this scoring criteria, the points awarded to each vendor were averaged with the following results:



	Vendors			
	Dawn Farm	Great Lakes Recovery Centers	Harbor Hall	Hegira Health
Proposal Responses	19	30	24.3	28
Company Profile	9.3	10	9.7	9.7
References	9.7	9	10	9.7
Vendor Questionnaire	21	27.7	28.3	28.7
Pricing Proposal	16.7	17.7	15.7	16
Total	75.7	94.4	88	92.1

Thirty-minute interviews were held with each vendor on Thursday, September 3, 2020. Clarifications and negotiations were held with three of the four vendors regarding the rate per day on Wednesday, September 16, 2020.

The final rate per day submitted by the three vendors on September 17, 2020 after negotiated discounts were as follows:

- Great Lakes Recovery Centers, Inc. - \$150.00
- Harbor Hall, Inc. - \$150.00
- Hegira Health, Inc. - \$175.00

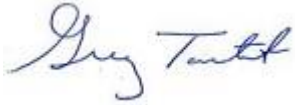
Based on the evaluation of the technical and pricing proposals as well as information obtained during interviews and negotiations, the ERC cannot recommend that Hegira Health be awarded a contract due to its rate per day being too high. However, it is recommending that Great Lakes Recovery Centers and Harbor Hall be offered a three-year contract, with two (2) one-year renewal options for a total contract period not to exceed five years.

Attachment B - Pricing - Final

Vendor Name:	Great Lakes Recovery Centers
---------------------	------------------------------

Residence in Home		Rate/Day	
Daily rate includes at a minimum: <ul style="list-style-type: none">• Room and Board• Group Sessions• Individual Sessions• Recreation Activities• Sober Support Recovery Meetings• Transportation		\$150.00	

Signature: _____



Date: 9-16-20

Attachment B - Pricing - Final

Vendor Name:	Harbor Hall, Inc.
---------------------	-------------------

Residence in Home		Rate/Day	
Daily rate includes at a minimum: <ul style="list-style-type: none">• Room and Board• Group Sessions• Individual Sessions• Recreation Activities• Sober Support Recovery Meetings• Transportation		150.00	

Signature: _____



Date: _____

9/16/2020

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution to Accept Michigan Department of Health and Human Services (MDHHS) Coronavirus Relief Fund (CRF) to Support Livingston County Health Department's Covid-19 Response - Health Department

WHEREAS, MDHHS has received federal funding titled “CRF Contact Tracing”, funding of which is allocated to support LCHD’s staff time for case investigation, contact tracing and violation monitoring for COVID-19; and

WHEREAS, MDHHS has also received federal funding titled “CRF LHD Testing” which primary purpose is to support indoor/outdoor public COVID-19 testing events, and

WHEREAS, Livingston County Health Department is being awarded the following dollar amounts for a special project titled CRF Contact Tracing and CRF LHD Testing:

- CRF Contact Tracing \$210,000 – March 1, 2020 through September 30, 2020
- CRF Contact Tracing \$90,000 - October 1, 2020 through December 30, 2020
- CRF LHD Testing \$150,007 – October 1, 2020 through December 30, 2020

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes acceptance of funding in the amount of \$300,000 from the State of Michigan, as a pass-through agency for federal funding, to conduct case investigation, contact tracing and violation monitoring for COVID-19 for the special project “**CRF Contact Tracing.**”

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorizes acceptance of funding in the amount of \$150,007 from the State of Michigan, as a pass-through agency for federal funding to set up testing sites and administer testing for the COVID-19 for the special project “**CRF LHD Testing.**”

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners authorize any budget amendments to effectuate the above changes for a total amendment not to exceed \$450,007.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners authorizes The Health Officer to electronically sign any future amendments to the Health Department’s Comprehensive Agreement for monetary and contract language adjustments for the above-referenced grants upon review and approval by Civil Counsel.

#

#

#

**MOVED:
SECONDED:
CARRIED:**



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

GRETCHEN WHITMER
GOVERNOR

ROBERT GORDON
DIRECTOR

September 17, 2020

Dianne McCormick, RS, MSA
Health Officer
Livingston County Health Department
2300 East Grand River, Suite #102
Howell, Michigan 48843-7578

Dear Ms. McCormick,

This correspondence will serve as the official Notice of Award for the special project titled **“CRF Contact Tracing”** for both FY 20 and FY 21 Livingston County Health Department is funded in the amount of \$210,000 for the FY20. The project begins March 1, 2020 and will end September 30, 2020. In FY21 your award amount will be \$90,000 and the project will begin October 1, 2020 and end December 30, 2020. Attachment III for FY21 will be sent in a future correspondence.

Allowable expenses include staffing, communications, IT, office supplies, computers, phones, access to people finding software or EMR, and indirect specifically for COVID-19 related work. Any single procurement over \$4,000 should be vetted with MDHHS prior to purchase. The primary purpose of this project is to support staff time for Case Investigation, Contact Tracing, and Violation Monitoring for COVID-19.

Unlike most other projects in the Comprehensive Agreement, this grant will be a monthly reimbursement. For FY 20, there will only be one FSR to report all expenses through September 30th, which is **due by October 5, 2020**. The reporting period for the FSR due October 5th is March 1, 2020 – September 30, 2020. There will be an Obligation Report.

Reporting Period	Report Due Date	Reporting Requirements
N/A	Immediately upon signing the grant agreement	Grant Opening/Closing Certification
March 1, 2020 – September 30, 2020	September 24, 2020	Obligation report
March 1, 2020 – September 30, 2020	October 5, 2020	Final Financial Status Report
		Expenditure Forecast Report
		Expenditure Location Report
		Outcome Metric Report

For FY 21, a Financial Status Report (FSR) must be submitted on a monthly basis no later than 5 days after the close of the calendar month. The monthly FSRs must reflect the total actual

program expenditures, up to the total agreement amount. All reporting requirements will be clearly outlined in the FY21 Attachment III, which will be sent separately. The FSR must be submitted with the Grant Closing Certification, Expenditure Location Report, and Outcome Metric Report by January 31, 2021. Reporting Form Grant Opening Certification and Reporting Form Grant Closing Certification will need to be signed and returned to MDHHS as part of this grant for both fiscal years.

Reporting Period	Report Due Date	Reporting Requirements
October 1, 2020 – October 31, 2020	November 5, 2020	Grant Opening Certification
		Financial Status Report
November 1, 2020 – December 30, 2020	November 5, 2020	Expenditure Forecast Report
November 1, 2020 – November 30, 2020	December 5, 2020	Financial Status Report
October 1, 2020 – December 30, 2020	January 5, 2021	Obligation Report Expenditure Location Report Outcome Metric Report
December 1, 2020 – December 30, 2020	January 30, 2021	Final Financial Status Report
		Grant Closing Certification

Below are the steps to complete an attachment report. Instructions with pictures can be found on page 106 of the grantee manual. The attachment reports will be done the same as the Local Maintenance of Effort (LMOE) reports submitted by the Health Departments already.

Steps to complete an attachment Report:

Navigate to: **Grantee > Reporting > Progress Reports** and click the ‘Go’ button.

1. Select Grant Program using the ‘Lookup’ icon
2. Select the Project using the ‘Lookup’ icon
3. Click ‘Find’
 - a. Screen will display all reports applicable for the Grant Program selected
4. Click on the hyperlink to open the attachment report.
5. Enter the ‘Title’ of the report.
6. Click the ‘Browse’ button, to locate the file from your local system to be attached.
7. Click the ‘Save’ button to save changes.
 - a. Click the ‘Paper Clip’ icon to view the upload
8. Check the ‘Submit’ box and click ‘OK’ at the bottom of the screen

If you have any questions or concerns, please do not hesitate to contact Janine Whitmire at whitmirej@michigan.gov.

Sincerely,

A handwritten signature in blue ink that reads "Laura de la Rambelje". The signature is fluid and cursive, with the first name "Laura" being the most prominent.

Laura de la Rambelje
Director
Division of Local Health Services
Public Health Administration
delarambeljel@michigan.gov
(517) 284-9002

c: Barton Maas

Att: Attachment III – FY20



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

GRETCHEN WHITMER
GOVERNOR

ROBERT GORDON
DIRECTOR

September 17, 2020

Dianne McCormick, RS, MSA
Health Officer
Livingston County Health Department
2300 East Grand River, Suite #102
Howell, Michigan 48843-7578

Dear Ms. McCormick,

This correspondence will serve as the official Notice of Award for the special project titled **“CRF LHD Testing”** for FY 21 Livingston County Health Department is funded in the amount of \$150,007 for FY21. The project will begin October 1, 2020 and end December 30, 2020.

Allowable expenses include staffing, communications, and supplies to support indoor/outdoor public COVID-19 testing events, including PPE, tents, test kits, vehicles or trailers, and indirect costs for COVID-19 related work. Any single procurement over \$4,000 should be vetted with MDHHS prior to purchase. The primary purpose of this project is to support indoor/outdoor public COVID-19 testing events.

Unlike most other projects in the Comprehensive Agreement, this grant will be a monthly reimbursement. For FY 21, a Financial Status Report (FSR) must be submitted on a monthly basis no later than 5 days after the close of the calendar month. The monthly FSRs must reflect the total actual program expenditures, up to the total agreement amount. All reporting requirements will be clearly outlined in Attachment III, which will be sent separately. The FSR must be submitted with the Grant Closing Certification and Expenditure Location Report by January 31, 2021. Reporting Form Grant Opening Certification and Reporting Form Grant Closing Certification will need to be signed and returned to MDHHS as part of this grant.

Reporting Period	Report Due Date	Reporting Requirements
October 1, 2020 – October 31, 2020	November 5, 2020	Grant Opening Certification
		Financial Status Report
November 1, 2020 – December 30, 2020	November 5, 2020	Expenditure Forecast Report
November 1, 2020 – November 30, 2020	December 5, 2020	Financial Status Report
October 1, 2020 – December 30, 2020	January 5, 2021	Obligation Report
		Expenditure Location Report
December 1, 2020 – December 30, 2020	January 30, 2021	Final Financial Status Report
		Grant Closing Certification

Below are the steps to complete an attachment report. Instructions with pictures can be found on page 106 of the grantee manual. The attachment reports will be done the same as the Local Maintenance of Effort (LMOE) reports submitted by the Health Departments already.

Steps to complete an attachment Report:

Navigate to: **Grantee > Reporting > Progress Reports** and click the 'Go' button.

1. Select Grant Program using the 'Lookup' icon
2. Select the Project using the 'Lookup' icon
3. Click 'Find'
 - a. Screen will display all reports applicable for the Grant Program selected
4. Click on the hyperlink to open the attachment report.
5. Enter the 'Title' of the report.
6. Click the 'Browse' button, to locate the file from your local system to be attached.
7. Click the 'Save' button to save changes.
 - a. Click the 'Paper Clip' icon to view the upload
8. Check the 'Submit' box and click 'OK' at the bottom of the screen

If you have any questions or concerns, please do not hesitate to contact Janine Whitmire at whitmirej@michigan.gov.

Sincerely,



Laura de la Rambelje
Director
Division of Local Health Services
Public Health Administration
delarambeljel@michigan.gov
(517) 284-9002

c: Barton Maas

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing the Acceptance of the Coronavirus Relief Local Government Grants (CRLGG) Program in Fiscal Year 2020 – Fiscal Services

WHEREAS, the Coronavirus Relief Local Government Grants Program (CRLGG) was created to provide Coronavirus Relief Funds to qualified local units to spend on eligible expenditures in accordance with the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Public Law 116-136; and

WHEREAS, Qualified units are those local units that would have received an August 2020 State Share Revenue Payment, which the State of Michigan eliminated and the County would have received, under the County Incentive Program (CIP); and

WHEREAS, Livingston County received the awarded in the amount of \$1,182,790 on August 31, 2020 and is required to submit a CRLGG Grant Opening Certification to the State of Michigan by September 23, 2020 in order to formally accept the CRLGG funds received; and

WHEREAS, the grant award is for expenditures incurred March 1, 2020 through December 30, 2020 and must be used on expenditures incurred due to the public health emergency with respect to COVID-19; and

WHEREAS, in accepting the funds Livingston County agrees to provide quarterly Financial Status Reports, Expenditure Forecast Report, and a grant close out for expenses incurred during the grant period.

THEREFORE, BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes the acceptance of the Coronavirus Relief Local Government Grants (CRLGG) Program funds in the amount of \$1,182,790.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners authorizes the County Administrator, as the Chief Administrative Officer of the County, to sign the CRLGG Grant Opening Certification and all financial reports required in acceptance of the 2020 Coronavirus Relief Local Government Grants Program.

BE IT FURTHER RESOLVED that the Board of Commissioners authorizes any budget amendments needed to effectuate the above.

BE IT FURTHER RESOLVED that the Chair of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts, agreements, amendments and support documents related to the 2020 Coronavirus Relief Local Government Grants (CRLGG) Program upon review by Civil Counsel.

#

#

#

**MOVED:
SECONDED:
CARRIED:**



**Coronavirus Relief Local Government Grants
(CRLGG) Program**
Federal Coronavirus Relief Fund (CRF) Funding
2020 Public Act 144

CRLGG & CRF Grant Requirements

Coronavirus Aid, Relief, and Economic Security (CARES) Act,
Public Law 116-136

Acceptance Period: September 9, 2020 – September 23, 2020

**Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Table of Contents**

CRLGG & CRF Grant Requirements Instructions.....	1
Section I. Program Information	2
Section II. Standard Provisions: Program Requirements	4
Section III. Reporting Requirements	7
Section IV. Accounting for Coronavirus Relief Funds	9
Grant Opening Certification	10
Grant Closing Certification	12

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
CRLGG & CRF Grant Requirements Instructions

The purpose of this document is to provide guidance to qualified local units (cities, villages, townships and counties) which received an August 2020, Coronavirus Relief Fund (CRF) payment under the Michigan Department of Treasury's Coronavirus Relief Local Government Grants (CRLGG) program.

This *CRLGG & CRF Grant Requirements* document contains four sections to provide qualified local units the information needed to accept and manage the CRF funding received under the CRLGG program in order to comply with federal and state requirements. Guidance is evolving and the State of Michigan will require compliance with additional guidance as it is published.

Section I includes various program information such as program description and purpose, funding information, CRF funding acceptance period, available program amount, and reporting requirements with specific timelines.

Section II provides program requirements including internal controls and audit requirements that must be adhered to. Additionally, this section contains uniform Coronavirus Relief Fund guidance as the funds utilized from this program are considered federal financial assistance subject to the CRF requirements.

Section III includes the reporting requirements, expenditure categories for reporting and reporting period timelines for this program. For a qualified local unit to retain the CRF funds received under the CRLGG program (issued to the qualified local unit on August 31, 2020), the qualified local unit must review the entire *CRLGG & CRF Grant Requirements* document, and submit all the required reports by the stipulated due dates as outlined in this section.

Section IV includes the detailed accounting instructions.

Questions, contact the Michigan Department of Treasury at: Treas-CARES@michigan.gov or 517-335-0155.

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Program Information

Section I. Program Information

Program Description and Purpose

The CRLGG program was created under 2020 Public Act 144. The program was created to provide Coronavirus Relief Funds (CRF) to qualified local units to spend on eligible expenditures under the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Public Law 116-136.

Qualified Local Units

Qualified local units are those cities, villages, townships, and counties that would have received an August 2020 payment under one of the below programs:

- a. City, Village and Township Revenue Sharing (CVTRS)
- b. County Revenue Sharing (CRS)
- c. County Incentive Program (CIP)

Funding Information

The CRLGG program is funded under the Coronavirus Aid, Relief, and Economic Security (CARES) Act, Public Law 116-136.

Payments were issued to qualified cities, villages, townships, and counties on August 31, 2020.

Any CRLGG funds expended on noneligible CARES Act expenditures, not accepted by the local unit, or not expended by December 30, 2020 shall be returned to the Michigan Department of Treasury by January 30, 2021.

Uniform CRF Expenditure Eligibility

Payments from the Coronavirus Relief Fund may only be used to cover expenditures that:

1. are necessary expenditures incurred due to the public health emergency with respect to Coronavirus Disease (COVID-19);
2. were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government;
3. were incurred during the period that begins on March 1, 2020 and ends on December 30, 2020.

Usage of these funds must comply with the federal requirements of the Coronavirus Relief Fund. For a cost to be considered to have been incurred, performance or delivery must occur during the covered period but payment of funds need not be made during that time (though it is generally expected that this will take place within 90 days of a cost being incurred.)

CRLGG funds cannot be used for research & development related expenditures.

Indirect costs are not eligible for the CRLGG program.

Available Program Amount

- \$150,000,000

Michigan Department of Treasury

Coronavirus Relief Local Government Grants (CRLGG) Program

Program Information

CRF Funding Acceptance Period

- September 9, 2020 – September 23, 2020

The *CRLGG Grant Opening Certification*, must be signed by the qualified local unit's chief administrative officer and submitted to the Michigan Department of Treasury by September 23, 2020 in order for a qualified local unit to accept the CRLGG funds received from the Michigan Department of Treasury. CRLGG Grant Opening Certifications can be returned to the Michigan Department of Treasury via email (Treas-CARES@michigan.gov) or fax (517-335-3298).

Method of Submission

- The CRLGG Grant Opening Certification must be submitted to the Michigan Department of Treasury via Email (Treas-CARES@michigan.gov) or fax (517-335-3298) by 11:59 p.m. EST on the last day of the acceptance period.

Period of Performance

- March 1, 2020 – December 30, 2020

Key Dates

- Grant Award Date: August 31, 2020
- Payments to Subrecipients: August 31, 2020
- Acceptance Period: September 9, 2020 – September 23, 2020
- Grant Closure Date: December 30, 2020

Reporting Requirements

1. *Grant Opening Certification* signed by the chief administrative officer of the local unit. Due by September 23, 2020
2. Each qualified local unit must register with the [Federal System for Award Management \(SAM\)](https://www.sam.gov/SAM/) prior to submitting the CRLGG Grant Opening Certification to the Michigan Department of Treasury. The SAM website is: <https://www.sam.gov/SAM/>.
3. Quarterly *Financial Status Reports* for the following reporting periods:
 - July 1, 2020 – September 30, 2020 Due by October 7, 2020
 - October 1, 2020 – December 30, 2020 Due by January 6, 2021
 - March 1, 2020 – December 30, 2020 Due January 30, 2021
4. *Expenditure Forecast Report* for the following reporting period:
 - March 1, 2020 – December 30, 2020 Due by November 15, 2020
5. *Grant Closing Certification* Due by January 30, 2021

The Michigan Department of Treasury may request a local unit to submit additional detailed backup to support the use of the CRF funds. Please do not submit any detailed backup unless the Michigan Department of Treasury requests submission from the local unit.

Contact Information

Treasury CARES Grant Programs Hotline
517-335-0155

Email Address
Treas-CARES@michigan.gov

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Standard Provisions: Program Requirements

Section II. Standard Provisions: Program Requirements

Funds were awarded to the State of Michigan as Federal Financial Assistance from the U.S. Department of Treasury. The funds were awarded under the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") <https://home.treasury.gov/policy-issues/cares/state-and-local-governments> as the Coronavirus Relief Fund (CRF), which was signed on March 27, 2020.

CFDA #: 21.019

FAIN #: SLT0040

Coronavirus Relief Funds are considered federal financial assistance and have been assigned a Catalog of Federal Domestic Assistance (CFDA) or Assistance Listing Number of 21.019. Fund payments are considered to be federal financial assistance subject to the Single Audit Act (31 U.S.C. Sections 7501 – 7507) and the related provisions of the Uniform Guidance, 2 Code of Federal Regulations (CFR) Section 200.303 regarding internal controls, Section 200.330 – 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements. Under the Single Audit Act, local jurisdictions will need to report expenditures under this program using the CFDA number 21.019.

The following Uniform Guidance provisions have been identified as significant and summarized below. For complete requirements, qualified local units must review the Uniform Guidance at https://www.ecfr.gov/cgi-bin/text-idx?SID=6214841a79953f26c5c230d72d6b70a1&tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

Qualified local units, including but not limited to the certifying local official submitting the *Grant Opening Certification*, are required to review the CRF guidance, associated FAQs and other documents at <https://home.treasury.gov/policy-issues/cares/state-and-local-governments> prior to certifying their compliance with the terms and conditions of the grant.

Registration with Federal System for Award Management (SAM)

Each qualified local unit must register with the Federal System for Award Management (SAM) prior to the *CRLGG Grant Opening Certification* being submitted to the Michigan Department of Treasury. The SAM website is: <https://www.sam.gov/SAM>.

Use of Funds

The CARES Act requires that the payments from the Coronavirus Relief Fund only be used to cover expenses that:

1. are necessary expenditures incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19)
2. were not accounted for in the budget most recently approved as of March 27, 2020 (the date of enactment of the CARES Act) for the State or government
3. were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Standard Provisions: Program Requirements

OMB Uniform Guidance for Non-Federal Agencies Receiving these Funds (old title - Responsibilities, Records, Repayments & Future Audits)

The U.S. Department of Treasury has indicated in the Coronavirus Relief Fund Frequency Asked Questions that are accessible at <https://home.treasury.gov/system/files/136/Coronavirus-Relief-Fund-Frequently-Asked-Questions.pdf> that the provisions of the OMB Uniform Guidance, 2 Code of Federal Regulations (CFR) Section 200.303 regarding internal controls, Section 200.330 through 200.332 regarding subrecipient monitoring and management, and subpart F regarding audit requirements are applicable to all CRF subawards at this time. However, guidance is evolving, and jurisdictions will be required to comply with additional guidance as it is published. Effective internal controls must be established and maintained (2 CFR Section 200.303). All CRF Funds received under this program must be accounted for with supporting documentation. Jurisdictions should maintain documentation evidencing that the funds were expended in accordance with federal, state, and local regulations. In accordance with federal Uniform Guidance, funds received under this program shall be included on the jurisdiction's Schedule of Expenditures of Federal Awards (SEFA) and included within the scope of the jurisdiction's Single Audit.

The following is a summary of Uniform Guidance provisions that have been identified as significant. The Uniform Guidance is available in the electronic Code of Federal Regulations. Qualified local units must review the Uniform Guidance at https://www.ecfr.gov/cgi-bin/text-idx?SID=6214841a79953f26c5c230d72d6b70a1&tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl.

2 CFR 200.303 Internal Controls

The non-Federal entity must:

- 1 Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.
- 2 Comply with Federal statutes, regulations, and the terms and conditions of the Federal awards.
- 3 Evaluate and monitor the non-Federal entity's compliance with statutes, regulations and the terms and conditions of Federal awards.
- 4 Take prompt action when instances of noncompliance are identified including noncompliance identified in audit findings.
- 5 Take reasonable measures to safeguard protected personally identifiable information.

2 CFR 200.330 – 200.332 Subrecipient Monitoring and Management

The Coronavirus Relief Local Government Grants Program subawards are for an individual qualified local unit's direct use for eligible expenditures under the CARES Act. Qualified local units receiving funding under this program shall not use the proceeds to establish subawards to any other entity.

2 CFR 200.501 – Audit Requirements

- (a) *Audit required.* A non-Federal entity that expends \$750,000 or more during the non-Federal entity's fiscal year in Federal awards must have a single or program-specific audit conducted for that year in accordance with the provisions of this part.

2 CFR 200.508 – Auditee Responsibilities

The auditee must:

1. Procure or otherwise arrange for the audit, if required.
2. Prepare appropriate financial statements, including the schedule of expenditures of Federal awards.
3. Promptly follow up and take corrective action on audit findings.
4. Provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the auditor to perform the audit.

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Standard Provisions: Program Requirements

Repayment of Ineligible CRF Expenditures or Under Spending

Any funds received under the authorizing legislation for this program expended by the qualified local unit in a manner that does not adhere to the Coronavirus Aid, Relief, and Economic Security Act, Public Law 116-136 or Uniform Guidance 2 CFR 200, as applicable, shall be returned to the state. If it is determined that a qualified local unit receiving funds under this act expends any funds under this act for a purpose that is not consistent with the requirements of the Coronavirus Aid, Relief, and Economic Security Act, Public Law 116-136, or Uniform Guidance 2 CFR 200, the state budget director is authorized to withhold payment of state funds to the qualified local unit, in part or in whole, payable from any state appropriation.

All subawards are subject to future audits and qualified local units must allow the State of Michigan, any of its duly authorized representatives and/or the State of Michigan's Office of the Auditor General access to the qualified local unit's records and financial statements to ensure compliance with Federal statutes, regulations and the terms and conditions of the grant award.

CRF Record Retention Requirements

Recipients of Coronavirus Relief Fund payments shall maintain and make available to the U.S. Department of Treasury, Office of Inspector General, upon request, all documents and financial records sufficient to establish compliance with subsection 601(d) of the Social Security Act, as amended, (42 U.S.C. 801(d)), which provides:

d) USE OF FUNDS.—A State, Tribal government, and unit of local government shall use the funds provided under a payment made under this section to cover only those costs of the State, Tribal government, or unit of local government that—

- 1. are necessary expenditures incurred due to the public health emergency with respect to COVID-19;*
- 2. were not accounted for in the budget most recently approved as of the date of enactment of this section for the State or government; and*
- 3. were incurred during the period that begins on March 1, 2020, and ends on December 30, 2020.*

Records shall be maintained for a period of five (5) years after final payment is made using Coronavirus Relief Fund monies. These record retention requirements are applicable to prime recipients and their grantees and subgrant recipients, contractors, and other levels of government that received transfers of Coronavirus Relief Fund payments from prime recipients.

Records to support compliance with subsection 601(d) may include, but are not limited to, copies of the following:

1. general ledger and subsidiary ledgers used to account for (a) the receipt of Coronavirus Relief Fund payments and (b) the disbursements from such payments to meet eligible expenditures related to the public health emergency due to COVID-19;
2. budget records for 2019 and 2020;
3. payroll, time records, human resource records to support costs incurred for payroll expenditures related to addressing the public health emergency due to COVID-19;
4. receipts of purchases made related to addressing the public health emergency due to COVID-19;
5. contracts and subcontracts entered into using Coronavirus Relief Fund payments and all documents related to such contracts;
6. grant agreements and grant subaward agreements entered into using Coronavirus Relief Fund payments and all documents related to such awards;
7. all documentation of reports, audits, and other monitoring of contractors, including subcontractors, and grant recipient and subrecipients;
8. all documentation supporting the performance outcomes of contracts, subcontracts, grant awards, and grant recipient subawards;
9. all internal and external email/electronic communications related to use of Coronavirus Relief Fund payments; and
10. all investigative files and inquiry reports involving Coronavirus Relief Fund payments.

Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Reporting Requirements

Section III. Reporting Requirements

Additional information will be communicated to qualified local units (subrecipients) as the reporting requirements are finalized.

Reporting Requirements

The State Budget Director will report on the status of these funds to the Senate and House appropriations committees and the Senate and House fiscal agencies periodically until all funds are exhausted.

For federal reporting, the following represents the expenditure categories and the obligation and expenditure information qualified local units must report:

Expenditure Categories

- a. Administrative Expenses
- b. Budgeted Personnel and Services Diverted to a Substantially Different Use
- c. COVID-19 Testing and Contact Tracing
- d. Economic Support (Other than Small Business, Housing, and Food Assistance)
- e. Expenses Associated with the Issuance of Tax Anticipation Notes
- f. Facilitating Distance Learning
- g. Food Programs
- h. Housing Support
- i. Improve Telework Capabilities of Public Employees
- j. Medical Expenses
- k. Nursing Home Assistance
- l. Payroll for Public Health and Safety Employees.
- m. Personal Protective Equipment
- n. Public Health Expenses
- o. Small Business Assistance
- p. Unemployment Benefits
- q. Workers' Compensation
- r. Items Not Listed Above - to include other eligible expenses that are not captured in the available expenditure categories

Grants Greater Than or Equal to \$50,000

- a. Grantee identifying and demographic information (e.g. DUNS number and location)
- b. Award number
- c. Award date, amount, and description
- d. Award payment method (reimbursable or lump sum payment(s))
- e. Related project name(s)
- f. Period of performance start date
- g. Period of performance end date
- h. Primary place of performance
- i. Quarterly obligation amount
- j. Quarterly expenditure amount
- k. Expenditure categories (listed above)

Subrecipients will be required to periodically report on the use of the CRLGG funding and forecast future grant expenditures throughout this grant program. Below are the reporting dates and requirements for subrecipients. Methods and/or templates for reporting will be provided in the future for reporting the required information.

**Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Reporting Requirements**

Reporting Period	Report Due Date	Reporting Requirements
September 9, 2020 – September 23, 2020	September 23, 2020	Grant Opening Certification
July 1, 2020 – September 30, 2020	October 7, 2020	Financial Status Report
March 1, 2020 – December 30, 2020	November 15, 2020	Expenditure Forecast Report
October 1, 2020 – December 30, 2020	January 6, 2021	Financial Status Report
March 1, 2020 – December 30, 2020	January 30, 2021	Financial Status Report Grant Closing Certification

Grant Opening Certification – Certification signed by the qualified local unit’s chief administrative officer accepting the terms and conditions of the grant, including but not limited to, agreeing to spend the grant funds in accordance with the CARES Act, and submitting all required reports. The certification also includes an area for the qualified local unit to document the program outcome metric(s) as determined by the qualified local unit.

Financial Status Report – a reporting of the expenditures that have been incurred, during the reporting period, which are using the CRLGG funding.

Expenditure Forecast Report – a report providing a projection of the total amount of CRLGG funding that the local unit will expend from March 1, 2020 – December 30, 2020.

Grant Closing Certification – Certification signed by the qualified local unit’s chief administrative officer indicating that all required reporting has been submitted accurately, that all expenditures were spent in accordance with the CARES Act, that the local unit shall maintain documentation for five (5) years, and that any unexpended funds or inappropriately used funds shall be returned to the Michigan Department of Treasury. The certification also includes an area for the qualified local unit to report on the outcome metric(s) that were developed as part of the Grant Opening Certification process.

All funds that have not been incurred by December 30, 2020 must be returned to the State of Michigan by January 30, 2021.

**Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Accounting for Coronavirus Relief Funds**

Section IV. Accounting for Coronavirus Relief Funds

Accounting for CORONAVIRUS RELIEF FUNDS (“CRF Funds”) Received from the State of Michigan

A qualified local unit which follows GASB financial reporting standards and has a fiscal year end **before** the State 2020 Public Act 144 was signed into law (July 31, 2020), please note the following financial related reporting requirements.

Although these CRF funds are granted by an authorizing State of Michigan agency, the CRF funds are **restricted federal funds** (making up a portion of Federal Coronavirus Relief Fund (CRF) (CFDA 21.019) usage authorized by a Public Act signed July 31, 2020 (PA 144).

The period of performance for the expenditure of CRF funds is March 1, 2020 – December 30, 2020. However, if the State’s legislation establishing this funding was not signed into law during a qualified local unit’s 2020 fiscal year, **these revenues should not be recognized in fiscal year 2020 financial reporting or audited financial statements.** *CRF revenues* should be recorded in fiscal year 2021 to the extent that eligible expenditures were incurred in fiscal year 2020 and as additional eligible expenditures are incurred during fiscal year 2021.

Eligible CRF expenditures should be recorded in the fiscal year in which they were incurred (e.g., payroll costs for Public Health employees, Hazard Pay for First Responder employees), either fiscal year 2020 or fiscal year 2021. However, if you are subject to the Single Audit, any fiscal year 2020 ***CRF expenditures*** will be reported on the fiscal year 2021 Schedule of Expenditures of Federal Awards (SEFA) rather than the fiscal year 2020 SEFA; an entity choosing to charge 2020 expenditures to these funds are encouraged to work with their auditor to determine additional reporting implications.

Details regarding eligible expenditures, grant-specific reporting requirements, and other information is included in sections above associated with this specific CRF program appropriated by the State of Michigan.

**Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Grant Opening Certification**

PART 1: LOCAL UNIT INFORMATION			
Local Unit Name		Local Unit County Name	
Local Unit Code	Contact Name	SAM DUNS Number	
Contact E-Mail Address	Contact Title	Contact Telephone Number	Extension
PART 2: OUTCOME METRICS (Enter at least one program outcome metric relating to what the local unit hopes to achieve utilizing the CRLGG funding. Attach additional pages if necessary.)			
PART 3: CERTIFICATION			
<p>I, _____, am the chief administrative officer of _____ (subrecipient's legal name), and I certify that:</p> <ol style="list-style-type: none"> 1. I have the authority on behalf of _____ (subrecipient's legal name) to accept the Coronavirus Relief Local Government Grants (CRLGG) Program payment received from the State of Michigan. The grantee understands that the CRLGG Program is funded by the allocation of funds to the State of Michigan from the Coronavirus Relief Fund as created in the CARES Act. 2. I understand the State of Michigan will rely on this certification as a material representation that _____ (subrecipient's legal name) has accepted the CRLGG Program payment and will expend the funds in accordance with the CARES Act. 3. _____ (subrecipient's legal name), is receiving CRLGG Program funds to be used for eligible expenditures under the CARES Act and will be used only to cover those eligible costs under the CARES Act. 4. All subrecipients receiving funds under the CRLGG Program shall retain documentation of all uses of the funds, including but not limited to invoices and/or receipts, supporting the reports submitted in accordance with this document. Such documentation shall be provided to the State of Michigan upon request and maintained by the grantee for five (5) years. 5. CRLGG Program funds accepted pursuant to this certification cannot be used as a revenue replacement for lower than expected tax or other revenue collections. 			

Local Unit Name	Local Unit Code
-----------------	-----------------

PART 3: CERTIFICATION (continued)

6. CRLGG Program funds accepted pursuant to this certification cannot be used for expenditures for which the subrecipient has received any other federal funds or emergency COVID-19 supplemental funding (whether state, federal, or private in nature) for the same expense. If an expenditure is reimbursed by any other federal funds or emergency COVID-19 funding, the subrecipient will return said funds to the State of Michigan.
7. CRLGG Program funds accepted pursuant to this certification cannot be used to reimburse or subaward another subrecipient or local unit of government.
8. Any CRLGG Program funds not incurred on or before December 30, 2020 must be returned to the Michigan Department of Treasury by January 30, 2021. Repayments must be submitted using the "CRLGG Return of Funds Received Form" (Form 5733).
9. I have read and agree on behalf of _____ (subrecipient's legal name) to comply with all applicable provisions and requirements corresponding to the receipt of funds required in the Coronavirus Aid, Relief, and Economic Securities (CARES) Act, Public Law 116-136 and Uniform Guidance 2 CFR 200.
10. Further, I understand and agree on behalf of _____ (subrecipient's legal name) that any funds received under the CRLGG Program and incurred in any manner that does not comply with the Coronavirus Aid, Relief, and Economic Securities Act, Public Law 116-136 and Uniform Guidance 2 CFR 200, as applicable shall be returned to the State of Michigan. Any funds that are provided by the State of Michigan under the CRLGG Program that are found to be based on inaccurate, nonqualifying, or fraudulent information will be returned to the State of Michigan. Funds provided under the CRLGG Program must adhere to official federal guidance issued or to be issued on what constitutes a necessary expenditure as described in the guidance for the U.S. Treasury Coronavirus Relief Fund at <https://home.treasury.gov/policy-issues/cares/state-and-local-governments>. I reviewed the guidance prior to completing this acceptance certification.
11. The governing body has been notified of the submission of this certification, and are aware of the Federal statutes, regulations and terms and conditions of the grant award.

I certify under the penalties of perjury set forth in Michigan Penal Code, MCL 750.423, that I have read the above certification and my statements contained herein are true and correct to the best of my knowledge.

By: _____

Signature: _____

Title: _____

Date: _____

Subscribed and sworn before me this _____ day of _____, 2020.

Notary Public

My commission expires _____

**Michigan Department of Treasury
Coronavirus Relief Local Government Grants (CRLGG) Program
Grant Closing Certification**

PART 1: LOCAL UNIT INFORMATION			
Local Unit Name		Local Unit County Name	
Local Unit Code	Contact Name	SAM DUNS Number	
Contact E-Mail Address	Contact Title	Contact Telephone Number	Extension
PART 2: OUTCOME METRICS (Enter a brief description of how the local unit achieved the program outcome metric(s) indicated in the Grant Opening Certification. Attach additional pages if necessary.)			
PART 3: CERTIFICATION			
<ol style="list-style-type: none"> 1. I certify that all required Coronavirus Relief Local Government Grants Program reports have been submitted, are accurate, and adheres to all the constraints outlined in this guidance. 2. I understand and agree that any expenditures incurred in any manner that does not adhere to official federal guidance shall be returned to the State of Michigan. 3. I understand that any subrecipient receiving funds under the Coronavirus Relief Local Government Grants Program shall retain documentation supporting the reporting and eligibility of expenditures and obligations contained in the expenditure reports. Such documentation shall be maintained for five (5) years and provided to the state upon request. 			

Local Unit Name	Local Unit Code
-----------------	-----------------

PART 3: CERTIFICATION (continued)

4. All funds that have not been incurred by December 30, 2020 will be or have been returned to that State of Michigan by January 30, 2021.
5. I certify under the penalties of perjury set forth in the Michigan Penal Code, MCL 750.423, that I have read the above certification and my statements contained herein are true and correct to the best of my knowledge.

By: _____

Signature: _____

Title: _____

Date: _____

Subscribed and sworn before me this _____ day of _____.

Notary Public

My commission expires _____

Coronavirus Relief Local Government Grants (CRLGG)
2020 Public Act 144, Section 805
FY 2020

<u>Local Unit</u> <u>Code</u>	<u>Local Unit</u> <u>Name</u>	<u>Local Unit</u> <u>Type</u>	<u>County</u>	<u>August Payment</u> <u>Amount</u>
46-3080	Onsted	Village	Lenawee	\$1,032
47-0000	Livingston	County	Livingston	\$1,182,790
47-1010	Brighton	Township	Livingston	\$16,296
47-1050	Genoa	Township	Livingston	\$18,158
47-1060	Green Oak	Township	Livingston	\$15,964
47-1070	Hamburg	Township	Livingston	\$19,388
47-1090	Hartland	Township	Livingston	\$13,438
47-1120	Marion	Township	Livingston	\$9,160
47-1130	Oceola	Township	Livingston	\$10,938
47-1150	Tyrone	Township	Livingston	\$9,183
47-2010	Brighton	City	Livingston	\$15,777
47-2020	Howell	City	Livingston	\$29,035
47-3010	Fowlerville	Village	Livingston	\$12,443
48-0000	Luce	County	Luce	\$48,818
48-3010	Newberry	Village	Luce	\$16,864
49-0000	Mackinac	County	Mackinac	\$98,830
49-2020	St Ignace	City	Mackinac	\$6,493
50-0000	Macomb	County	Macomb	\$6,251,235
50-1030	Chesterfield	Township	Macomb	\$39,737
50-1040	Clinton	Township	Macomb	\$130,250
50-1050	Harrison	Township	Macomb	\$22,522
50-1080	Macomb	Township	Macomb	\$72,898
50-1110	Shelby	Township	Macomb	\$67,608
50-1120	Washington	Township	Macomb	\$21,340
50-2010	Centerline	City	Macomb	\$67,582
50-2020	Eastpointe	City	Macomb	\$221,852
50-2030	Fraser	City	Macomb	\$49,854
50-2040	Memphis	City	Macomb	\$5,109
50-2050	Mt Clemens	City	Macomb	\$150,436
50-2060	New Baltimore	City	Macomb	\$11,325
50-2070	Richmond	City	Macomb	\$19,470
50-2080	Roseville	City	Macomb	\$235,951
50-2090	St Clair Shores	City	Macomb	\$172,379
50-2100	Sterling Heights	City	Macomb	\$267,256
50-2110	Utica	City	Macomb	\$18,990
50-2120	Warren	City	Macomb	\$724,580
50-3010	Armada	Village	Macomb	\$6,943
50-3030	New Haven	Village	Macomb	\$21,446
50-3040	Romeo	Village	Macomb	\$22,397
51-0000	Manistee	County	Manistee	\$207,376
51-2010	Manistee	City	Manistee	\$45,155
51-3010	Bear Lake	Village	Manistee	\$807

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing the Acceptance and Signing of the FY 2021 Emergency Management Performance Grant- Emergency Management

WHEREAS, funding is available through the FY 21 Emergency Management Performance Grant for the purpose of funding the Livingston County Emergency Management Program; and

WHEREAS, in 2020, Livingston County was granted \$41,548.00 for said Emergency Management Program; and

WHEREAS, Livingston County, upon meeting the stipulations set forth in the FY 21 Emergency Management Performance Grant Work Agreement, would be eligible to receive funding of a similar amount for the period of 10/01/2020 through 09/30/2021; and

WHEREAS, Livingston County would need to agree to the grant agreement terms for the Emergency Management Performance Grant; meet the criteria set forth in that agreement through the efforts of the Livingston County Emergency Manager and the Emergency Management Department; agree to a minimum 50% match share of the assigned grant award to be named for FY 21; and

WHEREAS, the grant work agreement document, signed by the Livingston County Board Chairperson, and accompanying financial, training & exercise, and job description documentation need to be submitted to the Michigan State Police, Emergency Management and Homeland Security Division by the dates of September 30, 2020 for training / exercise documents and October 15, 2020 for the Board of Commissioners approved signed grant agreement for the FY 21 EMPG funding.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorizes entering into an agreement with The Michigan State Police Emergency Management and Hoemland Security Division to approve the FY 21 Emergency Management Performance Grant Agreement documents allowing for the Livingston County Emergency Management Department to be eligible for supplemental funding.

BE IT FURTHER RESOLVED that the Chairman of the Livingston County Board of Commissioners is authorized to sign all forms, applications, assurances, contracts/agreements, renewals and future amendments for monetary and contract language adjustments related to the the FY 21 Emergency Management Performance Grant upon review and or preparation by Civil Counsel.

#

#

#

MOVED:
SECONDED:
CARRIED:



LIVINGSTON COUNTY, MICHIGAN
DEPARTMENT OF EMERGENCY MANAGEMENT

1911 Tooley Rd, Howell, MI 48855
Phone 517-540-7926 Fax 517-546-6788
Web Site: livgov.com

Memorandum

To: Livingston County Board of Commissioners
From: Therese Cremonte, Emergency Manager
Date: 09/04/2020
**Re: Review and Signing of the FY 21 Emergency Management
Performance Grant Agreement**

This resolution is to ask for the review and approval of the FY 21 Emergency Management Performance Grant (EMPG) agreement by the Board of Commissioners.

The EMPG grant is a federal funding source that is passed through the Michigan State Police Emergency Management and Homeland Security Division (MSP EMHSD). Funds are awarded to participating Act 390 Emergency Management Programs that meet the criteria set forth in the grant agreement. The amount varies slightly from year to year based on the total sum awarded to the State of Michigan by the federal government.

The grant agreement outlines specific objectives that local emergency management programs are required to meet to be eligible for the grant funding. The EMPG grant agreement needs to be signed by the Livingston County Board Chair to make the emergency management program eligible to receive funds. The signature is an assurance that the objectives in the grant agreement will be met by the local emergency management program.

If the emergency management program does not meet the criteria or standard set forth in agreement, the funding amount received by the county is subject to reduction.

Further, it should be noted that the funds require a 50% match by the county for the emergency management program. This is to ensure the emergency management program is being supplemented with the EMPG funding, and not supplanted.

It is the recommendation of the Livingston County Emergency Management Program that the FY 21 EMPG agreement document will be reviewed and signed by the Board of Commissioners and the Board Chairperson in order to have it turning into the MSP EMHSD by the submission date of October 15, 2020.

If you have any questions regarding this matter please contact me.

Michigan State Police
Emergency Management and Homeland Security Division
**FY 2021 Emergency Management Performance Grant
Document Submission Checklist**

- ☐ **September 30, 2020** – Annual Training and Exercise Plan Worksheet for 2021-2023
- ☐ **October 15, 2020** – Initial Work Agreement, EMHSD-31 (Emergency Management Performance Grant Work Agreement/Quarterly Report), EMD-17 (Summary Request for Emergency Management Assistance Expenses), and Current Job Description.
- ☐ **January 10, 2021** – EMHSD-31 (Emergency Management Performance Grant Work Agreement/Quarterly Report) and EMD-065 (Quarterly Training and Exercise Report)
- ☐ **January 20, 2021** – EMD-007 – EMPG Quarterly Expenses Report.
- ☐ **April 10, 2021** - EMHSD-31 (Emergency Management Performance Grant Work Agreement/Quarterly Report) and EMD-065 (Quarterly Training and Exercise Report).
- ☐ **April 20, 2021** - EMD-007 – EMPG Quarterly Expenses Report.
- ☐ **July 10, 2021** - EMHSD-31 (Emergency Management Performance Grant Work Agreement/Quarterly Report) and EMD-065 (Quarterly Training and Exercise Report).
- ☐ **July 20, 2021** - EMD-007 – EMPG Quarterly Expenses Report.
- ☐ **September 30, 2021** – Annual Training and Exercises Plan Worksheet for 2021-2023.
- ☐ **October 10, 2021** - EMHSD-31 (Emergency Management Performance Grant Work Agreement/Quarterly Report) and EMD-065 (Quarterly Training and Exercise Report).
- ☐ **October 20, 2021** - EMD-007 – EMPG Quarterly Expenses Report.

EMHSD-31 Michigan State Police Emergency Management and Homeland Security Division	(Enter Jurisdiction Name) Emergency Management Fiscal Year 2021 Emergency Management Performance Grant (EMPG) Work Agreement/Quarterly Report		<input type="checkbox"/> Initial Work Agreement
<input type="checkbox"/> 1 st Quarter	<input type="checkbox"/> 2 nd Quarter	<input type="checkbox"/> 3 rd Quarter	<input type="checkbox"/> 4 th Quarter
SIGNATURE OF CHIEF ELECTED OFFICIAL	DATE	SIGNATURE OF EMERGENCY MANAGEMENT COORDINATOR	DATE
SIGNATURE OF EMERGENCY MGMT. PROGRAM MANAGER	DATE	SIGNATURE OF DISTRICT COORDINATOR	DATE

Purpose

This survey functions as the 2021 EMPG work agreement/quarterly report. The objectives of this work agreement are based upon standards identified in the Michigan State Police, Emergency Management and Homeland Security Division (MSP/EMHSD) Publication 206 - Local Emergency Management Program Standards Workbook. Activities for each objective have been determined by a group of local and state emergency management subject matter experts who maintain a baseline set of standards for emergency management programs in the state of Michigan. Survey responses will assist in the assessment of emergency management programs, determine how EMPG funds are utilized and help validate the importance of these emergency management activities to all levels of government.

(1) ADMINISTRATION AND FINANCE		
The Emergency Management Coordinator (EMC) shall ensure that the jurisdiction promulgates laws, ordinances, resolutions, policies and procedures to carry out emergency financial and administrative responsibilities. The EMPG funded emergency manager shall provide a copy of their job description(s) that incorporate their Emergency Management (EM) activities. EM activities of the EMC and other response personnel shall be identified in the EM ordinance, resolution, and county plans.		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none">Verify that the jurisdiction submitted the previous quarter's EMPG reports and financial documentation timely, and that current quarterly EMPG reports and financial documentation, with signatures, will be submitted by 1/20/21.	EMPG reports were submitted: Yes/No Financial documents were submitted: Yes/No

	<ul style="list-style-type: none">Submit documents for 2021 EMPG work agreement to EMHSD financial staff by 10/15/20.	Position Description Submitted: Yes/No EMD-17 Form Submitted: Yes/No EMHSD-31 Form Submitted: Yes/No
2 nd	<ul style="list-style-type: none">Verify that the jurisdiction submitted the previous quarter's EMPG reports and financial documentation timely, and that current quarterly EMPG reports and financial documentation, with signatures, will be submitted by 4/20/21.	EMPG reports were submitted: Yes/No Financial documents were submitted: Yes/No
3 rd	<ul style="list-style-type: none">Verify that the jurisdiction submitted the previous quarter's EMPG reports and financial documentation timely, and that current quarterly EMPG reports and financial documentation, with signatures, will be submitted by 7/20/21.	EMPG reports were submitted: Yes/No Financial documents were submitted: Yes/No
4 th	<ul style="list-style-type: none">Verify that the jurisdiction submitted the previous quarter's EMPG reports and financial documentation timely, and that current quarterly EMPG reports and financial documentation, with signatures, will be submitted by 10/20/21.Submit documents for 2022 EMPG work agreement to EMHSD financial staff by 10/1/21.	EMPG reports were submitted: Yes/No Financial documents were submitted: Yes/No Position Description Submitted: Yes/No EMD-17 Form Submitted: Yes/No EMHSD-31 Form Submitted: Yes/No

(2) LAWS AND AUTHORITIES		
The Emergency Management Program (EMP) shall comply with the Michigan Emergency Management Act (P.A. 390 of 1976 as amended) and applicable laws and regulations and have a local Emergency Management (EM) resolution.		
	Planned Activities	Action Taken (Local EMC Status Report)
1 st		

	<ul style="list-style-type: none"> Attend quarterly district EM meetings held between 10/1/20-12/31/20. Report attendance at other EM related meetings held between 10/1/20-12/31/20. 	<p>Quarterly meeting attended: Yes/No</p> <p><i>Meeting Type/Number of Meetings</i></p> <p>ESF #1 - Transportation # _____</p> <p>ESF #2 - Communications # _____</p> <p>ESF #3 - Public Works and Engineering # _____</p> <p>ESF #4 - Firefighting # _____</p> <p>ESF #5 - Information and Planning # _____</p> <p>ESF #6 - Mass Care, Emergency Assistance, Temporary Housing and Human Services # _____</p> <p>ESF #7 - Logistics # _____</p> <p>ESF #8 - Public Health and Medical Services # _____</p> <p>ESF #9 - Search and Rescue # _____</p> <p>ESF #10 - Oil and Hazardous Materials # _____</p> <p>ESF #11 - Agriculture and Natural Resources # _____</p> <p>ESF #12 - Energy # _____</p> <p>ESF #13 - Public Safety and Security # _____</p> <p>ESF #14 (Formerly) - Long Term Recovery # _____</p> <p>ESF #15 - External Affairs # _____</p> <p>Local # _____</p> <p>District # _____</p> <p>Regional # _____</p> <p>State # _____</p> <p>Federal # _____</p>
2 nd	<ul style="list-style-type: none"> Attend quarterly district EM meetings held between 1/1/21-3/31/21. Report attendance at other EM related meetings held between 1/1/21-3/31/21. 	<p>Quarterly meeting attended: Yes/No</p> <p><i>Meeting Type/Number of Meetings</i></p> <p>ESF #1 - Transportation # _____</p> <p>ESF #2 - Communications # _____</p> <p>ESF #3 - Public Works and Engineering # _____</p>

		<p>ESF #4 - Firefighting # _____</p> <p>ESF #5 - Information and Planning # _____</p> <p>ESF #6 - Mass Care, Emergency Assistance, Temporary Housing and Human Services # _____</p> <p>ESF #7 - Logistics # _____</p> <p>ESF #8 - Public Health and Medical Services # _____</p> <p>ESF #9 - Search and Rescue # _____</p> <p>ESF #10 - Oil and Hazardous Materials # _____</p> <p>ESF #11 - Agriculture and Natural Resources # _____</p> <p>ESF #12 - Energy # _____</p> <p>ESF #13 - Public Safety and Security # _____</p> <p>ESF #14 – (Formerly) Long Term Recovery # _____</p> <p>ESF #15 - External Affairs # _____</p> <p>Local # _____</p> <p>District # _____</p> <p>Regional # _____</p> <p>State # _____</p> <p>Federal # _____</p>
3 rd	<ul style="list-style-type: none"> Attend quarterly district EM meetings held between 4/1/21-6/30/21. Report attendance at other EM related meetings held between 4/1/21-6/30/21. 	<p>Quarterly meeting attended: Yes/No</p> <p><i>Meeting Type/Number of Meetings</i></p> <p>ESF #1 - Transportation # _____</p> <p>ESF #2 - Communications # _____</p> <p>ESF #3 - Public Works and Engineering # _____</p> <p>ESF #4 - Firefighting # _____</p> <p>ESF #5 - Information and Planning # _____</p> <p>ESF #6 - Mass Care, Emergency Assistance, Temporary Housing and Human Services # _____</p> <p>ESF #7 - Logistics # _____</p> <p>ESF #8 - Public Health and Medical Services # _____</p>

		ESF #9 - Search and Rescue # _____ ESF #10 - Oil and Hazardous Materials # _____ ESF #11 - Agriculture and Natural Resources # _____ ESF #12 - Energy # _____ ESF #13 - Public Safety and Security # _____ ESF #14 – (Formerly) Long Term Recovery # _____ ESF #15 - External Affairs # _____ Local # _____ District # _____ Regional # _____ State # _____ Federal # _____
4 th	<ul style="list-style-type: none"> Attend quarterly district EM meetings held between 7/1/21-9/30/21. Report attendance at other EM related meetings held between 7/1/21-9/30/21. 	Quarterly meeting attended: Yes/No <i>Meeting Type/Number of Meetings</i> ESF #1 - Transportation # _____ ESF #2 - Communications # _____ ESF #3 - Public Works and Engineering # _____ ESF #4 - Firefighting # _____ ESF #5 - Information and Planning # _____ ESF #6 - Mass Care, Emergency Assistance, Temporary Housing and Human Services # _____ ESF #7 - Logistics # _____ ESF #8 - Public Health and Medical Services # _____ ESF #9 - Search and Rescue # _____ ESF #10 - Oil and Hazardous Materials # _____ ESF #11 - Agriculture and Natural Resources # _____ ESF #12 - Energy # _____ ESF #13 - Public Safety and Security # _____ ESF #14 – (Formerly) Long Term Recovery # _____

		ESF #15 - External Affairs # _____ Local # _____ District # _____ Regional # _____ State # _____ Federal # _____
--	--	---

(3) HAZARD IDENTIFICATION, RISK ASSESSMENT, AND CONSEQUENCE ANALYSIS		
The jurisdiction shall continually identify natural and human-caused hazards that potentially impact the jurisdiction. The jurisdiction shall also assess the risk and vulnerability of people, property, the environment, and its own operations from these hazards. The jurisdiction should also conduct a consequence analysis for significant hazards, to consider their impact on the public, responders, continuity of operations that include the delivery of services; property, facilities, and infrastructure; the environment; the economic condition of the jurisdiction, and public confidence in the jurisdictions governance.		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Document any hazard identification, risk assessment, or consequence analysis activities performed between 10/1/20-12/31/20. Did you utilize the I.P. Gateway tool for any of the performed hazard identification, risk assessment, or consequence analysis activities performed between 10/1/20-12/31/20? 	<i>Type of Risk Assessment/Number Completed:</i> County: # _____ Municipal: # _____ Facilities: # _____ Special Events: # _____ I.P. Gateway tool utilized: Yes/No
2 nd	<ul style="list-style-type: none"> Document any hazard identification, risk assessment, or consequence analysis activities performed between 1/1/21-3/31/21. Did you utilize the I.P. Gateway tool for any of the performed hazard identification, risk assessment, or 	<i>Type of Risk Assessment/Number Completed:</i> County: # _____ Municipal: # _____ Facilities: # _____ Special Events: # _____ I.P. Gateway tool utilized: Yes/No

	consequence analysis activities performed between 1/1/21-3/31/21?	
3 rd	<ul style="list-style-type: none"> Document any hazard identification, risk assessment, or consequence analysis activities performed between 4/1/21-6/30/21. Did you utilize the I.P. Gateway tool for any of the performed hazard identification, risk assessment, or consequence analysis activities performed between 4/1/21-6/30/21? 	<i>Type of Risk Assessment/Number Completed:</i> County: # ____ Municipal: # ____ Facilities: # ____ Special Events: # ____ I.P. Gateway tool utilized: Yes/No
4 th	<ul style="list-style-type: none"> Document any hazard identification, risk assessment, or consequence analysis activities performed between 7/1/21-9/30/21. Did you utilize the I.P. Gateway tool for any of the performed hazard identification, risk assessment, or consequence analysis activities performed between 7/1/21-9/30/21? 	<i>Type of Risk Assessment/Number Completed:</i> County: # ____ Municipal: # ____ Facilities: # ____ Special Events: # ____ I.P. Gateway tool utilized: Yes/No

(4) HAZARD MITIGATION

The Emergency Management Coordinator (EMC) should participate in activities to eliminate hazards or mitigate the effects of hazards that cannot be reasonably prevented. If the jurisdiction intends to receive mitigation funds, then the EMC shall ensure that the jurisdiction's hazard mitigation (HM) plan is developed and updated every five years.

	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Document whether your community has developed a hazard mitigation plan. Confirm the date of the jurisdiction's hazard mitigation plan. Document appropriate steps taken by your jurisdiction to create a new or update an expired plan between 10/1/20-12/31/20. Report how many action items listed in the hazard mitigation plan have been completed between 10/1/20-12/31/20. 	HM plan: Yes/No/Adopted County Plan Plan is expired: Yes/No Expiration Date: ____/____/____ Check appropriate steps <div> <input type="checkbox"/> Assemble a local planning team <input type="checkbox"/> Collect information about local hazard impacts <input type="checkbox"/> Identify vulnerabilities <input type="checkbox"/> Edit the document <input type="checkbox"/> Offer the document for stakeholder and public review <input type="checkbox"/> Meeting(s) to identify or select hazard mitigation actions <input type="checkbox"/> Describe the details of action item implementation <input type="checkbox"/> Official plan adoption by participating jurisdictions </div> Total action items: # ____ Action items completed: # ____
2 nd	<ul style="list-style-type: none"> Report how many action items listed in the hazard mitigation plan have been completed between 1/1/21-3/31/21. 	Total action items: # ____ Action items completed: # ____

	<ul style="list-style-type: none"> Document appropriate steps taken by your jurisdiction to create a new or update an expired plan between 1/1/21-3/31/21. 	<p>Check appropriate steps</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assemble a local planning team <input type="checkbox"/> Collect information about local hazard impacts <input type="checkbox"/> Identify vulnerabilities <input type="checkbox"/> Edit the document <input type="checkbox"/> Offer the document for stakeholder or public review <input type="checkbox"/> Meeting(s) to identify or select hazard mitigation actions <input type="checkbox"/> Describe the details of action item implementation <input type="checkbox"/> Official plan adoption by participating jurisdictions
3 rd	<ul style="list-style-type: none"> Report how many action items listed in the hazard mitigation plan have been completed between 4/1/21-6/30/21. Document appropriate steps taken by your jurisdiction to create a new or update an expired plan between 4/1/21-6/30/21. 	<p>Total action items: # _____ Action items completed: # _____</p> <p>Check appropriate steps</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assemble a local planning team <input type="checkbox"/> Collect information about local hazard impacts <input type="checkbox"/> Identify vulnerabilities <input type="checkbox"/> Edit the document <input type="checkbox"/> Offer the document for stakeholder and public review <input type="checkbox"/> Meeting(s) to identify or select hazard mitigation actions <input type="checkbox"/> Describe the details of action item implementation <input type="checkbox"/> Official plan adoption by participating jurisdictions
4 th	<ul style="list-style-type: none"> Report how many action items listed in the hazard mitigation plan have been completed between 7/1/21-9/30/21. Document appropriate steps taken by your jurisdiction to create a new or update an expired plan between 7/1/21-9/30/21. 	<p>Total action items: # _____ Action items completed: # _____</p> <p>Check appropriate steps</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assemble a local planning team <input type="checkbox"/> Collect information about local hazard impacts

	<ul style="list-style-type: none"> Disseminate EMHSD hazard mitigation information announcements and notices of funding availability for Hazard Mitigation Assistance to all local jurisdictions within your EMP. 	<ul style="list-style-type: none"> <input type="checkbox"/> Identify vulnerabilities <input type="checkbox"/> Edit the document <input type="checkbox"/> Offer the document for stakeholder and public review <input type="checkbox"/> Meeting(s) to identify or select hazard mitigation actions <input type="checkbox"/> Describe the details of action item implementation <input type="checkbox"/> Official plan adoption by participating jurisdictions <p>Information Was Disseminated: Yes/No Does not apply: _____</p>
--	--	--

(5) PREVENTION	
<p>The Emergency Management Program (EMP) has a strategy among disciplines to coordinate prevention activities, to monitor the identified threats and hazards, and adjust the level of prevention activity commensurate with the risk and has procedures for exchanging information between internal and external stakeholders to prevent incidents.</p>	
Planned Activities	Action Taken (Local EM Status Report)
<ul style="list-style-type: none"> Identify prevention activities that the jurisdiction participated in between 10/1/20-9/30/21. 	<p>Check all that apply</p> <ul style="list-style-type: none"> <input type="checkbox"/> Assigning prevention activities to each agency identified in the jurisdiction's basic plan portion of the emergency plan. <input type="checkbox"/> Establishing a jurisdiction-wide prevention activities coordinator to coordinate with all agencies in prevention activities. <input type="checkbox"/> Participating in the Homeland Security Information Network (HSIN). <input type="checkbox"/> Developing a Critical Infrastructure Protection Plan and identifying roles and responsibilities.

	<div><input type="checkbox"/> Utilizing MI CIMS or another monitoring system to identify and coordinate prevention activities within the EOC.</div> <div><input type="checkbox"/> Establishing procedures that coordinate reporting with the Regional MIOC liaison and State MIOC.</div> <div><input type="checkbox"/> Conducting information sharing procedures.</div> <div><input type="checkbox"/> Other: _____</div>
--	--

(6) OPERATIONAL PLANNING

The Emergency Management Coordinator (EMC) shall ensure the jurisdiction is compliant with P.A. 390 of 1976, as amended, by maintaining a current Emergency Operation Plan (EOP) or Emergency Action Guidelines (EAG) that meets the criteria in the MSP/EMHSD Publication (Pub) 201a. The EMC shall verify that each jurisdiction whose population exceeds 10,000 also complies with P.A. 390 of 1976, as amended, by maintaining an emergency support plan. The local emergency manager must verify that the EOP (or EAG), and supplemental emergency support plans are updated every four years. The EMC will ensure that the jurisdiction's current Chief Elected Official (CEO) has signed the updated/revised EOP, EAG, and emergency support plans.

	Planned Activities	Action Taken (Local EM Status Report)
1 st	<div><div>▪ Report the number of Local Planning Team (LPT) meetings that occurred between 10/1/20-12/31/20.</div><div>▪ Host four LEPC meetings by 9/30/2021.</div><div>▪ Confirm the date of the jurisdiction's EOP/EAG and verify if the plan will expire between 10/1/20 - 9/30/21.</div><div>▪ Identify EOP/EAG annexes that were reviewed and/or updated between 10/1/20 - 12/31/20. Ensure that any section/annex updates are still in compliance with Pub 201a.</div></div>	<div>#_____ LPT meetings.</div> <div>Hosted #_____ LEPC meetings.</div> <div>EOP/EAG is current: Yes/No Expiration Date: ____/____/____</div> <div>Reviewed Annexes: # _____ Total Annexes: # _____ Annexes Updated: # _____</div>

	<div><div>▪ Report participation in EM activities with school officials that took place between 10/1/20-12/31/20.</div><div>▪ Verify the status of emergency support plans for jurisdictions with a population of 10,000 or more, identified by MSP/EMHSD between 10/1/20-12/31/20. Ensure that the plan is signed by the current CEO. Emergency Management programs are encouraged to submit new or updated support plans to the District Coordinator, (DC).</div></div>	<div><i>School Activities/Number of Activities:</i> Planning: # _____ Seminars: # _____ Outreach: # _____ Special Events: # _____</div> <div>Total Support Plans: # _____ Current plans: # _____ Does Not Apply: _____</div>
2 nd	<div><div>▪ Report the number of Local Planning Team (LPT) meetings that occurred between 1/1/21-3/31/21.</div><div>▪ Host four LEPC meetings by 9/30/2021.</div><div>▪ Verify that the CEO original signature is current in the EOP/EAG, if new CEO, forward contact information to the DC.</div><div>▪ Identify EOP/EAG annexes that were reviewed and/or updated between 1/1/21 - 3/31/21. Ensure that any section/annex updates are still in compliance with Pub 201a.</div><div>▪ Report participation in EM activities with school officials that took place between 1/1/21-3/31/21.</div><div>▪ Verify the status of emergency support plans for jurisdictions with a population of 10,000 or more, between</div></div>	<div>Attended/Hosted #_____ LPT meetings.</div> <div>Hosted #_____ LEPC meetings.</div> <div>EOP/EAG CEO signature is current: Yes/No Current CEO contact information was sent to DC: Yes/No Does not apply _____</div> <div>Reviewed Annexes: # _____ Total Annexes: # _____ Annexes Updated: # _____</div> <div><i>School Activities/Number of Activities:</i> Planning: # _____ Seminars: # _____ Outreach: # _____ Special Events: # _____</div> <div>Total Support Plans: # _____ Current plans: # _____</div>

	1/1/21-3/31/21. Ensure that the plan is signed by the current CEO. Emergency Management programs are encouraged to submit new or updated support plans to the DC.	Does Not Apply: ____
3 rd	<ul style="list-style-type: none"> Report the number of Local Planning Team (LPT) meetings that occurred between 4/1/21-6/30/21. Host four LEPC meetings by 9/30/2021. Identify EOP/EAG annexes that were reviewed and/or updated between 4/1/21 - 6/30/21. Ensure that any section/annex updates are still in compliance with Pub 201a. Report participation in EM activities with school officials that took place between 4/1/21-6/30/21. Verify the status of emergency support plans for jurisdictions with a population of 10,000 or more, between 4/1/21-6/30/21. Ensure that the plan is signed by the current CEO. Emergency Management programs are encouraged to submit new or updated support plans to the DC. Report the status of SARA Title III plans and report any problem areas. 	<p>#____ LPT meetings.</p> <p>Hosted #____ LEPC meetings.</p> <p>Reviewed Annexes: # ____ Total Annexes: # ____ Annexes Updated: # ____</p> <p><i>School Activities/Number of Activities:</i> Planning: # ____ Seminars: # ____ Outreach: # ____ Special Events: # ____</p> <p>Total Support Plans: # ____ Current plans: # ____ Does Not Apply: ____</p> <p>Total Sites: # ____ Total Plans: # ____ Problem Areas: ____ Does not apply: ____</p>

4 th	<ul style="list-style-type: none"> Report the number of Local Planning Team (LPT) meetings that occurred between 7/1/21-9/30/21. Host four LEPC meetings by 9/30/21. Identify EOP/EAG annexes that were that were reviewed and/or updated between 7/1/21 - 9/30/21. Ensure that any section/annex updates are still in compliance with Pub 201a. Verify the status of emergency support plans for jurisdictions with a population of 10,000 or more, between 7/1/21-9/30/21. Ensure that the plan is signed by the current CEO. Emergency Management programs are encouraged to submit new or updated support plans to the DC. Report participation in EM activities with school officials that took place between 7/1/21-9/30/21 and supply any planning guidance/templates that are available. Verify receipt by 9/15/21 and distribution of scheduled drill days for school buildings operated by the school, school district, intermediate school district, or public academy, for the 2021-2022 school year. 	<p>#____LPT meetings</p> <p>Hosted #____ LEPC meetings.</p> <p>Reviewed Annexes: # ____ Total Annexes: # ____ Annexes Updated: # ____</p> <p>Total Support Plans: # ____ Current plans: # ____ Does Not Apply: ____</p> <p><i>School Activities/Number of Activities:</i> Planning: # ____ Seminars: # ____ Outreach: # ____ Special Events: # ____</p> <p>Drill distribution was received: Yes/No Drill distribution was distributed: Yes/No</p>
-----------------	---	--

(7) INCIDENT MANAGEMENT		
<p>The Emergency Management Program (EMP) shall comply with Homeland Security Presidential Directive/HSGP-5, and Executive Directive 2005-09 by formally adopting the National Incident Management System (NIMS) to provide for efficient and effective emergency response operations amongst multiple agencies and jurisdictions. The program shall establish a means of interfacing on-scene incident management with the jurisdiction's Emergency Operations Center (EOC).</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Update EOC call list, including the CEO, and submit a copy to the DC by 12/31/20. 	EOC call list is updated: Yes/No EOC call list has been sent to the DC: Yes/No
2 nd	<ul style="list-style-type: none"> Update EOC call list and submit a copy to the DC by 3/31/21, only if changes have been made. 	Changes have been made: Yes/No Changes have been sent to the DC: Yes/No
3 rd	<ul style="list-style-type: none"> Update EOC call list and submit a copy to the DC by 6/30/21, only if changes have been made. 	Changes have been made: Yes/No Changes have been sent to the DC: Yes/No
4 th	<ul style="list-style-type: none"> Perform an EOC call-out for a drill or an actual event between 10/1/20 and 9/30/21. Update EOC call list and submit a copy to the DC by 9/30/21, only if changes have been made. Conduct EOC orientation session between 10/1/20 and 9/30/21. Submit the EMHSD-071 NIMS Implementation, Training Progress and Resource Inventory Certification by 9/30/21. 	EOC call-out drill has been performed: Yes/No EOC call-out for an actual event has been performed: Yes/No Changes have been made: Yes/No Changes have been sent to the DC: Yes/No EOC orientation was conducted: Yes/No EMHSD-071 NIMS Implementation, Training Progress and Resource Inventory Certification submitted by 9/30/21: Yes/No

(8) RESOURCE MANAGEMENT, LOGISTICS, AND MUTUAL AID		
<p>The Emergency Management Coordinator (EMC) shall ensure that the jurisdiction is compliant with the NIMS resource management requirements including; identification, location, acquisition, storage, maintenance, distribution, and accounting for services and materials, to address hazards identified in the jurisdiction. The jurisdiction shall use the Michigan Critical Incident Management System (MI CIMS) to manage their NIMS-typed resources. The EMC should also develop Mutual Aid Agreements (MAA) and promote memberships in the Michigan Emergency Management Assistance Compact (MEMAC) to address resource shortfalls and reduce resource gaps in the jurisdiction.</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st		
2 nd		
3 rd		
4 th	<ul style="list-style-type: none"> Report new, updated or current MAA/MOUs within the emergency management program. Report any MEMAC membership additions that occurred between 10/1/20 and 9/30/21. Verify that the jurisdiction's NIMS-typed resources are current in the MI CIMS and complete the resource portion of form EMHSD-071 NIMS Implementation, Training Progress and Resource Inventory Certification by 9/30/21. 	New MAA/MOUs: # _____ Updated MAA/MOUs: # _____ Current MAA/MOUs: # _____ MEMAC Member Name: _____ EMHSD-071 NIMS Implementation, Training Progress and Resource Inventory Certification Report submitted: Yes/No

(9) COMMUNICATIONS AND WARNING	
<p>The Emergency Management Coordinator (EMC) shall ensure that the jurisdiction communicates both internally and externally with all Emergency Management Program (EMP) stakeholders and emergency personnel. The local emergency manager shall disseminate disaster related information, and emergency alerts and warnings to response personnel, EOC staff, state and federal government officials, and the public. The system should be interoperable with other communication systems.</p>	
Planned Activities	Action Taken (Local EM Status Report)
<p>1st</p> <ul style="list-style-type: none"> Identify the primary and secondary public alerting (i.e. Emergency Alert System (EAS) & Wireless Emergency Alerts (WEA), sirens, weather radio, etc.) systems used in the jurisdiction. Identify the primary and secondary public opt-in mass notification systems used in the jurisdiction. Verify if the jurisdiction is Integrated Public Alert & Warning System (IPAWS) compliant. If jurisdiction is not IPAWS compliant, document if your jurisdiction is in the process of becoming IPAWS compliant. If jurisdiction is not working towards IPAWS compliancy; indicate reason. Participate in monthly IPAWS proficiency demonstration with the IPAWS Test Lab between 10/1/20-12-31-20. Participate in district and/or statewide radio testing between 10/1/20-12/31/20 Participate in district and/or statewide MI CIMS drills/exercises between 10/1/20-12/31/20. 	<p>Primary Public Alerting System: _____ Secondary Public Alerting System: _____</p> <p>Primary Mass Notification System: _____ Secondary Mass Notification System: _____</p> <p>Jurisdiction is IPAWS compliant: Yes/No/IPAWS is on a County Level.</p> <p>Jurisdiction is in the process of becoming IPAWS compliant: Yes/No/IPAWS on County level.</p> <p>Reason why jurisdiction is not working towards IPAWs compliancy: _____</p> <p>IPAWS Proficiency Demonstrations Completed: # _____</p> <p><i>Radio Test Type/Number of Radio Tests:</i> District: # _____ State: # _____ Other: # _____</p>

	<ul style="list-style-type: none"> Document the jurisdiction's participation in any additional communication tests between 10/1/20-12/31/20. 	<p><i>MI CIMS Drill Type/Number of MI CIMS Drills/Exercises:</i> District: # _____ State: # _____</p> <p><i>Communication tests Type/Number of Communication tests:</i> Communication tests: _____, # _____</p>
2 nd	<ul style="list-style-type: none"> Participate in monthly IPAWS proficiency demonstration with the IPAWS Test Lab between 1/1/21-3/31/21. Participate in district and/or statewide radio testing between 1/1/21-3/31/21. Participate in district and/or statewide MI CIMS drills/exercises between 1/1/21-3/31/21. Document the jurisdiction's participation in any additional communication tests between 1/1/21-3/31/21. 	<p><i>IPAWS Proficiency Demonstrations Completed:</i> # _____</p> <p><i>Radio Test Type/Number of Radio Tests:</i> District: # _____ State: # _____ Other: # _____</p> <p><i>MI CIMS Drill Type/Number of MI CIMS Drills/Exercises:</i> District: # _____ State: # _____</p> <p><i>Communication tests Type/Number of Communication tests:</i> Communication tests: _____, # _____</p>
3 rd	<ul style="list-style-type: none"> Participate in monthly IPAWS proficiency demonstration with the IPAWS Test Lab between 4/1/21-6/30/21. Participate in district and/or statewide radio testing between 4/1/21-6/30/21. Participate in district and/or statewide MI CIMS drills/exercises between 4/1/21-6/30/21. Document the jurisdiction's participation in any additional communication tests between 4/1/21-6/30/21. 	<p><i>IPAWS Proficiency Demonstrations Completed:</i> # _____</p> <p><i>Radio Test Type/Number of Radio Tests:</i> District: # _____ State: # _____ Other: # _____</p> <p><i>MI CIMS Drill Type/Number of MI CIMS Drills/Exercises:</i> District: # _____ State: # _____</p> <p><i>Communication tests Type/Number of Communication tests:</i> Communication tests: _____, # _____</p>

4 th	<ul style="list-style-type: none"> Participate in monthly IPAWS proficiency demonstration with the IPAWS Test Lab between 7/1/21-9/30/21. Participate in district and/or statewide radio testing between 7/1/21-9/30/21. Participate in district and/or statewide MI CIMS drills/exercises between 7/1/21-9/30/21. Document the jurisdiction's participation in any additional communication tests between 7/1/21-9/30/21. Meet with local EAS/MAB region representatives between 10/1/20-9/30/21. Review and compare your jurisdiction's warning capabilities are compliant with the regional MAB, EAS plan by 9/30/21. 	<p><i>IPAWS Proficiency Demonstrations Completed:</i> # _____</p> <p><i>Radio Test Type/Number of Radio Tests:</i> District: # _____ State: # _____ Other: # _____</p> <p><i>MI CIMS Drill Type/Number of MI CIMS Drills/Exercises:</i> District: # _____ State: # _____</p> <p><i>Communication tests Type/Number of Communication tests:</i> Communication tests: _____, # _____</p> <p>EAS/MAB regional meetings were held – Yes/No</p> <p>Attended: # _____ Regional MAB/EAS Meeting.</p> <p>Capabilities were compared with regional MAB/EAS Plan: Yes/No</p>
-----------------	--	--

(10) OPERATIONS, PROCEDURES, AND FACILITIES		
<p>The Emergency Management Coordinator (EMC) shall develop procedures that reflect operational priorities including life, safety, health, property protection, environmental protection, restoration of essential utilities, and restoration of essential functions and coordination among all levels of government. Procedures shall also be developed to guide situation and Damage Assessment (DA), situation reporting, and incident action planning. The Emergency Management Program (EMP) shall have a primary facility Emergency Operations Center (EOC) capable of coordinating and supporting response and recovery operations. The EOC shall have activation, operation, and deactivation procedures that are updated regularly.</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Verify that the procedures for Requesting a Governor's Emergency or Disaster Declaration and State Assistance are up to date in the jurisdiction's plans or procedures by 12/31/20. 	<p>Procedures are up to date in plans or procedures: Yes/No</p> <p>EOC activation, operation, and deactivation procedures are current: Yes/No</p>

	<ul style="list-style-type: none"> Report updates to EOC activation procedures for the jurisdiction's EOC, provide a copy to the DC by 12/31/20. Report any update working with EMHSD and the Public Service Commission on the statewide energy assurance initiative to develop and maintain local energy assurance plans. 	<p>Procedures have been sent to DC: Yes/No</p> <p>Actions were taken on energy assurance initiative to develop and maintain local energy assurance plans: Yes/No</p>
2 nd	<ul style="list-style-type: none"> Ensure that procedures for declaring a local "State of Emergency" and requesting a Governor's Emergency or disaster declaration, and state assistance are reviewed with the jurisdiction's public officials by 3/31/21. Report any major updates to EOC activation, operation, and deactivation procedures between 1/1/21 and 3/31/21. Report any update working with EMHSD and the Public Service Commission on the statewide energy assurance initiative to develop and maintain local energy assurance plans. 	<p>Procedures have been reviewed with public officials: Yes/No</p> <p>Major updates have been made: Yes/No Major updates have been sent to DC: Yes/No</p> <p>Actions were taken on energy assurance initiative to develop and maintain local energy assurance plans: Yes/No</p>
3 rd	<ul style="list-style-type: none"> Report any major updates to EOC activation, operation, and deactivation procedures between 4/1/21 and 6/30/21. Report any update working with EMHSD and the Public Service Commission on the statewide energy assurance initiative to develop and maintain local energy assurance plans. 	<p>Major updates have been made: Yes/No Major updates have been sent to DC: Yes/No</p> <p>Actions were taken on energy assurance initiative to develop and maintain local energy assurance plans: Yes/No</p>
4 th	<ul style="list-style-type: none"> Report any major updates to EOC activation, operation, and deactivation procedures between 7/1/21 and 9/30/21. Report any update working with EMHSD and the Public Service Commission on the statewide energy assurance initiative to develop and maintain local energy assurance plans. 	<p>Major updates have been made: Yes/No Major updates have been sent to DC: Yes/No</p> <p>Actions were taken on energy assurance initiative to develop and maintain local energy assurance plans: Yes/No</p>

(11) TRAINING		
<p>The Emergency Management Coordinator (EMC) shall have a formal, documented training program composed of training needs, assessment, curriculum, course evaluation, and records of training. Necessary training includes: Professional Development Series (PDS), MI CIMS, Damage Assessment and NIMS training courses. The local emergency manager shall submit the Quarterly Training and Exercise Reporting Worksheet (EMD-65) and promote available Emergency Management (EM) training for all personnel, including EOC staff, specific to their responsibilities.</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Promote emergency management courses between 10/1/20-12/31/20. 	Emergency management course schedule has been promoted: Yes/No
2 nd	<ul style="list-style-type: none"> Promote emergency management courses between 1/1/21-3/31/21. 	Emergency management course schedule has been promoted: Yes/No
3 rd	<ul style="list-style-type: none"> Promote emergency management courses between 4/1/21-6/30/21. 	Emergency management course schedule has been promoted: Yes/No
4 th	<ul style="list-style-type: none"> Promote emergency management courses between 7/1/21-9/30/21. 	Emergency management course schedule has been promoted: Yes/No

(12) EXERCISES, EVALUATIONS, AND CORRECTIVE ACTIONS		
<p>The Emergency Management Program (EMP) shall have a documented exercise program that regularly tests the skills, abilities, and experience of emergency personnel, as well as plans, policies, procedures, equipment, and facilities. Exercises will comply with local, state, and federal requirements, including the Homeland Security Exercise and Evaluation Program (HSEEP). The local emergency manager shall track all exercises on the Quarterly Training and Exercise Reporting Worksheet (EMD-065) including the type, hazards, grant funding, and number of participants, and submit this form.</p> <p>All EMPG funded personnel receiving funding for any portion of their salary, benefits, or other expenditures must participate in no fewer than three exercises in the 12-month fiscal year grant period. Participation includes roles as exercise director, player, evaluator, controller, and assisting as a player in a simulation cell. Observation of an exercise will not count as participation.</p> <p>One of the exercises must be conducted within the funded jurisdiction and test the local program Emergency Operations Plan (EOP). By authority conferred on the director of the department of state police by section 19 of 1976 PA 390, as amended, MCL 30.419) Per R 30.51 (Admin Code) each program shall have "(D) An exercise that tests the emergency operations plan at least once each fiscal year (October 1 to September 30)."</p> <p>At least one After Action Report and Improvement Plan (AAR/IP) for an exercise which tests the local jurisdiction or programs EOP must be submitted to EMHSD each fiscal year via the District Coordinator.</p> <p>Effort shall be made to submit the AAR/IP within 90 days of the exercise conclusion. It is requested that all AAR/IPs be submitted to EMHSD for tracking purposes.</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Submit EMD-065 – Quarter Training and Exercise Report by 1/10/21. 	EMD-065 has been submitted: Yes/No
2 nd	<ul style="list-style-type: none"> Submit EMD-065 – Quarter Training and Exercise Report by 4/10/21. 	EMD-065 has been submitted: Yes/No
3 rd	<ul style="list-style-type: none"> Submit EMD-065 – Quarter Training and Exercise Report by 7/10/21. 	EMD-065 has been submitted: Yes/No

4 th	<ul style="list-style-type: none"> Submit EMD-065 – Quarter Training and Exercise Report by 10/10/21. Develop and submit multi-year training and exercise plan for FY2022 – FY2024 by 9/30/21. 	<p>EMD-065 has been submitted: Yes/No</p> <p>Multi-year training and exercise plan has been submitted: Yes/No</p>
-----------------	--	---

(13) CRISIS COMMUNICATIONS, PUBLIC EDUCATION, AND INFORMATION		
<p>The Emergency Management Program (EMP) provides preparedness information and education to the public concerning threats to life, safety, and property. These activities include information about specific threats, appropriate preparedness measures, actions to mitigate the threats, including protective actions, updating the public website, and promoting hazard awareness weeks and campaigns such as “Do 1 Thing.”</p>		
	Planned Activities	Action Taken (Local EM Status Report)
1 st	<ul style="list-style-type: none"> Document efforts to educate the public about preparedness activities occurring between 10/1/20-12/31/20. Report the data presented and the media by which this was accomplished. Document any Citizen Corps activity that occurred between 10/1/20-12/31/20. 	<p><i>Data Presented/Type of Media:</i> Awareness Weeks: _____, Media: _____ Speaking Engagement: _____, Media: _____ See Something/Say Something: Yes/No: Media: _____ 8 signs of terrorism: Yes/No: Media: _____ Ok2Say: Yes/No, Media: _____ Other: _____, Media: _____</p> <p><i>Citizen Corps Activity Type/Number of Citizen Corps Activities:</i> Training: # _____ Deployment/Activation: # _____</p>
2 nd	<ul style="list-style-type: none"> Document efforts to educate the public about preparedness activities occurring between 1/1/21-3/31/21. Report the data presented and the media by which this was accomplished. Document any Citizen Corps activity that occurred between 1/1/21-3/31/21. 	<p><i>Data Presented/Type of Media:</i> Awareness Weeks: _____, Media: _____ Speaking Engagement: _____, Media: _____ See Something/Say Something: Yes/No, Media: _____ 8 signs of terrorism: Yes/No, Media: _____ Ok2Say: Yes/No, Media: _____ Other: _____, Media: _____</p> <p><i>Citizen Corps Activity Type/Number of Citizen Corps Activities:</i> Training: # _____ Deployment/Activation: # _____</p>

23

		Deployment/Activation: # _____
3 rd	<ul style="list-style-type: none"> Document efforts to educate the public about preparedness activities occurring between 4/1/21-6/30/21. Report the data presented and the media by which this was accomplished. Document any Citizen Corps activity that occurred between 4/1/21-6/30/21. 	<p><i>Data Presented/Type of Media</i> Awareness Weeks: _____, Media: _____ Speaking Engagement: _____, Media: _____ See Something/Say Something: Yes/No, Media: _____ 8 signs of terrorism: Yes/No, Media: _____ Ok2Say: Yes/No, Media: _____ Other: _____, Media: _____</p> <p><i>Citizen Corps Activity Type/Number of Citizen Corps Activities:</i> Training: # _____ Deployment/Activation: # _____</p>
4 th	<ul style="list-style-type: none"> Document efforts to educate the public about preparedness activities occurring between 7/1/21-9/30/21. Report the data presented and the media by which this was accomplished. Document any Citizen Corps activity that occurred between 7/1/21-9/30/21. 	<p><i>Data Presented/Type of Media</i> Awareness Weeks: _____, Media: _____ Speaking Engagement: _____, Media: _____ See Something/Say Something: Yes/No, Media: _____ 8 signs of terrorism: Yes/No, Media: _____ Ok2Say: Yes/No, Media: _____ Other: _____, Media: _____</p> <p><i>Citizen Corps Activity Type/Number of Citizen Corps Activities:</i> Training: # _____ Deployment/Activation: # _____</p>

(14) OTHER - Unscheduled EMERGENCY MANAGEMENT ACTIVITIES

List other emergency management work items not included in the preceding 13 EM Objectives.

	Activities	Action Taken
1 st		
2 nd		
3 rd		
4 th		

CONTACTS FOR ASSISTANCE

The following is a list Subject Matter Experts (SME) to assist with the information required on this report.

	Name of SME	Contact Information	Specialty
	Lt. Jeff Yonker	yonkerj@michigan.gov 517-284-3843 (office), 517-719-9767 (cell)	District 1 Coordinator
	Lt. Timothy Ketvirtis	KetvirtisT@michigan.gov 586-726-6709 (office), 517-202-5597 (cell)	District 2N Coordinator
	Lt. Nate McQueen	McQueenN@michigan.gov 734-287-5044 (office), 248-210-0672 (cell)	District 2S Coordinator
	Lt. Charles Barker	BarkerC@michigan.gov 989-777-0650 (office), 810-223-8466 (cell)	District 3 Coordinator
	Lt. Josh Collins	CollinsJ1@michigan.gov 269-657-6081 (office), 517-202-5545 (cell)	District 5 Coordinator
	Lt. Orville Theaker	TheakerO@michigan.gov 269-953-6099 (cell)	District 6 Coordinator
	Lt. Michael DeCastro	DecastroM@michigan.gov 231-499-8266 (cell)	District 7 Coordinator
	Lt. Steven Derusha	DerushaS1@michigan.gov 906-293-8061 (office Newberry); 906-227-7504 (office Marquette); 517-898-5055 (cell)	District 8 Coordinator
	F/Lt. Gabe Covey	CoveyG@michigan.gov 517-284-3989 (office), 517-927-5362 (cell)	State and Local Support Section Manager
	Penny Burger	BurgerP@michigan.gov 517-898-0551 (cell)	Grants and Financial Management Section Manager
	Amanda VanKoevering	VanKoeveringA@michigan.gov 517-819-7653 (cell)	Financial Analyst
	Kim Richmond	RichmondK@michigan.gov 517-204-0211 (cell)	Grants Unit Manager
	Kristie Helms	HelmsK@michigan.gov 517-648-6352 (cell)	Emergency Management Performance Grant Coordinator
	Matt Schnepf	SchnepfM1@michigan.gov 517-256-1512 (cell)	Recovery Unit Manager
	Mike Sobocinski	SobocinskiM@michigan.gov 517-284-3947 (office)	Hazard Mitigation Planning

	Henrik Hollaender	HollaenderH@michigan.gov 517-284-3970 (office), 517-898-4225 (cell)	Local Planning/NIMS
	Brenna Roos	RoosB@michigan.gov 517-284-3727 (office)	HMEP/LEPC/ SARA Title III
	Brianna Briggs	BriggsB3@michigan.gov 517-230-2949 (cell)	Operations Management Section Manager
	Jaclyn Barcroft	BarcroftJ@michigan.gov 517-230-2279 (cell)	Emergency Operations Unit Manager
	Matt Cook	CookM1@michigan.gov 517-730-1689 (cell)	MI CIMS Coordinator
	Jackie Hampton	HamptonJ@michigan.gov 517-243-0149 (cell)	Training and Exercise Section Manager
	Tonya Nobach	NobachT@michigan.gov 517-284-3956 (office)	Training, Exercise, and Radiological Unit Manager
	Danica Frederick	FrederickD3@michigan.gov 517-285-9714 (cell)	Training Officer
	Shawn Ewing	EwingS2@michigan.gov 517-897-7576 (cell)	Exercise Officer
	Sherrie Loader	LoaderS@michigan.gov 517-284-3656 (office)	Audit
	Dale George	GeorgeD5@michigan.gov 517-284-3962 (office)	Public Information Officer
	Vacant	Vacant	MSP/EMHSD Assistant Commander
	Capt. Kevin Sweeney	SweeneyK@michigan.gov 517-284-3966 (office)	MSP/EMHSD Commander

Michigan State Police,
Emergency Management and Homeland Security Division
FY 2021 Emergency Management Report Schedule

Initial Work Agreement DUE: October 15, 2020

<ul style="list-style-type: none"> Annual Training and Exercise Plan Worksheet for 2021-2023: Submit an electronic copy to the training and exercise staff at msp-em@michigan.gov by September 30, 2020. Please contain the following information in the subject line: "EMD-006 [Jurisdiction Name]". EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report: Submit Original and One (1) Copy to District Coordinator. Must include signatures. EMD-17: Summary Request for Emergency Management Assistance Expenses: Submit to District Coordinator. Must include signatures. Electronic copy is acceptable. Current Job Description: For federally EMPG funded employee on EMD 17. Submit to District Coordinator. Submit Two (2) Copies.
<p>First Quarter Report</p> <ul style="list-style-type: none"> EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report: <u>DUE: 1/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-065 Quarterly Training and Exercise Report: <u>DUE: 1/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-007: EMPG Quarterly Expenses Report: <u>DUE: 1/20/21</u>. Submit on paper EMD 007.
<p>Second Quarter Report</p> <ul style="list-style-type: none"> EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report: <u>DUE: 4/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-065 Quarterly Training and Exercise Report: <u>DUE: 4/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-007: EMPG Quarterly Expenses Report: <u>DUE: 4/20/21</u>. Submit on paper EMD 007.
<p>Third Quarter Report</p> <ul style="list-style-type: none"> EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report: <u>DUE: 7/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-065 Quarterly Training and Exercise Report: <u>DUE: 7/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-007: EMPG Quarterly Expenses Report: <u>DUE: 7/20/21</u>. Submit on paper EMD 007.
<p>Fourth Quarter Report</p> <ul style="list-style-type: none"> EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report: <u>DUE: 10/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-065 Quarterly Training and Exercise Report: <u>DUE: 10/10/21</u>. Submit through MSP/EMHSD electronic survey tool. EMD-007: EMPG Quarterly Expenses Report: <u>DUE: 10/20/21</u>. Submit on paper EMD 007. Annual Training and Exercise Plan Worksheet for 2022-2024: Submit an electronic copy to the training and exercise staff at msp-em@michigan.gov by September 30, 2021. Please contain the following information in the subject line: "EMD-006 [Jurisdiction Name]".
<div>Agenda Page 67 of 83</div> <div>Updated 9/1/20</div>

Michigan State Police,
Emergency Management and Homeland Security Division
FY 2021 Emergency Management Report Schedule

Initial Work Agreement DUE: October 15, 2020

- **Annual Training and Exercise Plan Worksheet for 2021-2023:** Submit an electronic copy to the training and exercise staff at msp-em@michigan.gov by **September 30, 2020**. Please contain the following information in the subject line: "EMD-006 [Jurisdiction Name]".
- **EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report:** Submit Original and One (1) Copy to District Coordinator. Must include signatures.
- **EMD-17: Summary Request for Emergency Management Assistance Expenses:** Submit to District Coordinator. Must include signatures. Electronic copy is acceptable.
- **Current Job Description:** For federally EMPG funded employee on EMD 17. Submit to District Coordinator. Submit Two (2) Copies.

First Quarter Report

- **EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report:** **DUE: 1/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-065 Quarterly Training and Exercise Report:** **DUE: 1/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-007: EMPG Quarterly Expenses Report:** **DUE: 1/20/21.** Submit on paper EMD 007.

Second Quarter Report

- **EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report:** **DUE: 4/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-065 Quarterly Training and Exercise Report:** **DUE: 4/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-007: EMPG Quarterly Expenses Report:** **DUE: 4/20/21.** Submit on paper EMD 007.

Third Quarter Report

- **EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report:** **DUE: 7/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-065 Quarterly Training and Exercise Report:** **DUE: 7/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-007: EMPG Quarterly Expenses Report:** **DUE: 7/20/21.** Submit on paper EMD 007.

Fourth Quarter Report

- **EMHSD-31: Emergency Management Performance Grant Work Agreement/Quarterly Report:** **DUE: 10/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-065 Quarterly Training and Exercise Report:** **DUE: 10/10/21.** Submit through MSP/EMHSD electronic survey tool.
- **EMD-007: EMPG Quarterly Expenses Report:** **DUE: 10/20/21.** Submit on paper EMD 007.
- **Annual Training and Exercise Plan Worksheet for 2022-2024:** Submit an electronic copy to the training and exercise staff at msp-em@michigan.gov by September 30, 2021. Please contain the following information in the subject line: "EMD-006 [Jurisdiction Name]".

Updated 9/1/20

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing a Community Development Block Grant (CDBG) CARES Funding Grant with the Michigan Economic Development Corporation (MEDC) to Assist with the Prevention, Mitigation and Response to COVID-19 - Planning Department

WHEREAS, the Coronavirus Aid, Relief and Economic Security Act (CARES Act), Public Law 116-136, makes available supplemental CDBG and Emergency Solutions Grant funding for grants to prevent, prepare for, and respond to Coronavirus; and

WHEREAS, the Michigan Strategic Fund has invited Counties to accept Community Development Block Grant Program Funds to support CDBG CARES Funding; and

WHEREAS, Livingston County will seek to receive up to \$370,301.71 in CDBG funds to reimburse for unexpected costs associated with COVID-19; and

WHEREAS, the proposed project will benefit all residents of the project area and 34.54% percent of Livingston County are low and moderate income persons as determined by census data provided by the U.S. Department of Housing and Urban Development; and

WHEREAS, Livingston County government, the Units of General Local Government in Livingston County, and the non-profit organizations that Livingston County contracts with, have incurred unplanned COVID-19 expenses that may be eligible for CDBG reimbursement.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners authorizes the County Planning Department to submit grant documents, and if awarded, accept CDBG CARES funding in an amount not to exceed \$370,301.71 through the Michigan Economic Development Corporation for the purpose of reimbursing Livingston County government, the Units of General Local Government in Livingston County, and the non-profit organizations that Livingston County contracts with, for eligible COVID-19 expenses they have incurred.

BE IT FURTHER RESOLVED that the Chairwoman of the Livingston County Board of Commissioners is authorized to sign all forms, assurances, contracts/agreements, renewals and future amendments for monetary and contract language adjustments related to the above upon review and/or preparation of Civil Counsel.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners authorizes any budget amendment to effectuate the above.

#

#

#

MOVED:
SECONDED:
CARRIED:



304 East Grand River Avenue, Howell, MI
Phone (517) 546-7555 Fax (517) 552-2347
Web Site: <https://livgov.com/plan/>

Memorandum

To: Livingston County Board of Commissioners
From: Kathleen Kline-Hudson, Planning Director
Date: 9/16/20
Re: CDBG CARES Funding

The Livingston County Planning Department became aware of COVID-19 funding support available to counties throughout the State of Michigan through Community Development Block Grant (CDBG) CARES Funding administered by the Michigan Economic Development Corporation (MEDC).

The allocation that is available to Livingston County is \$370,301.71. A Letter of Interest had to be signed by the Authorized Elected Official and submitted by August 14, 2020 in order to move forward with the grant process. This allocation is not a grant award until the potential grant offer has been approved by the Michigan Strategic Fund.

This grant will be used to assist with prevention, mitigation and response to COVID-19, specifically for healthcare equipment, public services and salary reimbursement, or other CDBG eligible costs as necessary to respond to COVID-19. The grant will be used to assist Livingston County government, Livingston County local units of government and the non-profits that Livingston County government contracts with, with unplanned COVID-19 costs that were incurred and may be eligible for CDBG reimbursement.

Therefore, Livingston County Planning staff in partnership with our Livingston County economic development partner SPARK would like the authorization to formally apply for a CDBG CARES funding grant.

If you have any questions regarding this matter please contact me.

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing Crime Victim Rights Grant for Fiscal Year 2021 – Prosecutor

WHEREAS, the Michigan Department of Health and Human Services (MDHHS) has been requested to award the Crime Victim Rights Division of the Prosecutor’s Office a Fiscal Year 2021 grant for the period of October 1, 2020 to September 30, 2021 in the amount of \$169,821; and

WHEREAS, MDHHS requires electronic submission of the grant application and award acceptance by the Prosecutor through the EGrAMS online portal.

WHEREAS, the functions performed by the Crime Victim Rights Division of the Prosecutor’s Office are mandated by statute and the grant will fund 100% of the Crime Victim Rights Division of the Prosecutor’s Office.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby approve the Fiscal Year 2021 grant for the Crime Victim Rights Division of the Prosecutor’s Office in an amount not to exceed \$169,821.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize the Prosecutor to electronically sign all forms, assurances, contracts/agreements, and future amendments for monetary and contract language adjustments related to the above with the State of Michigan MDHHS upon review and/or preparation of Civil Counsel.

#

#

#

MOVED:
SECONDED:
CARRIED:



WILLIAM J. VAILLIENCOURT, JR.
PROSECUTING ATTORNEY

LIVINGSTON COUNTY PROSECUTOR'S OFFICE
210 South Highlander Way
Howell, Michigan 48843
(517) 546-1850

To: Board of Commissioners
From: William Vaillencourt
Prosecuting Attorney
Subject: MDHHS Grant for Victim Rights Services
Date: September 17, 2020

The Michigan Department of Health and Human Services provides grant funding to prosecutors across the state to fund the performance of mandated duties under the Crime Victim Rights Act. These duties require providing to crime victims comprehensive notification, information, and assistance addressing victim rights throughout the criminal justice process as established by the William Van Regenmorter Crime Victim Rights Act of 1985 and the Crime Victim Rights Amendment to the Michigan Constitution. The state supports personnel in prosecutor offices whose day-to-day tasks and activities fulfill the Prosecutor's statutory-mandated responsibilities to victims of crime.

The Crime Victim Rights Division of the Prosecutor's Office has requested and is eligible for grant funding in the amount of \$169,821 for FY 2021, which runs from October 1, 2020 through September 30, 2021. The grant will fund 100% of the Crime Victim Rights Division of the Prosecutor's Office. Final approval and awarding of the grant amount is expected and will not exceed the requested amount. Once the amount is approved by the state, which is anticipated to be near the end of September, the grant must be accepted by October 1, 2020.

This is a long-standing grant-funded program and the grant funds provided by the state do not require any matching funds from the County.

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Authorizing the Purchase and Upgrade of Camera Equipment for the Jail

- WHEREAS,** the Livingston County Jail uses a surveillance camera system that monitors various areas of the Jail; and
- WHEREAS,** we are at end of service life on some of the systems that run critical operations in the jail; and
- WHEREAS,** performance issues with our current CCTV system has resulted in occasional outages; and
- WHEREAS,** CCTV system failure caused several cameras in the jail to stop working presenting issues with safety, security, and liability issues; and
- WHEREAS,** Stanley suggested programing changes, but the problems still persisted; and
- WHEREAS,** Stanley highly recommended an upgrade of the server that operates the CCTV system and equally import upgrade the software; and
- WHEREAS,** with a new server and new operating system would allow us to achieve our goal of more reliable performance and allow us to no longer be in an “end of life” product; and
- WHEREAS,** American Video has provided a proposal of \$68,724 for new equipment, software, installation, and maintenance with a one-year on-site warranty; and
- WHEREAS,** the Sheriff Department requests funding to complete this project and requests a transfer of funds from Capital Improvement in the amount of \$ 68,724.

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby approves the transfer of \$68,724 from Capital Improvement for the purchase of new equipment, software, and installation for the jail camera system from American Video at a cost of \$68,724.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize the Treasurer to transfer \$68,724 from Fund 403 Capital Replacement to the Sheriff Jail General Fund.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize any budget amendments needed to effectuate the procurement of the projects as described above.

#

#

#

MOVED:
SECONDED:
CARRIED:



LIVINGSTON COUNTY, MICHIGAN
DEPARTMENT OF LIVINGSTON COUNTY SHERIFF

150 S. Highlander Way, Howell, MI 48843
Phone 517-540-7626 Fax 517-546-1800
Web Site: co.livingston.mi.us

Memorandum

To: Livingston County Board of Commissioners
From: Lt. Tarneseia Pringle
Date: 9/16/2020
Re: Proposal to Upgrade the Jails CCTV System

Attached for your consideration and approval is a resolution authorizing the Sheriff to upgrade the existing CCTV system with Stanley Security and American Video. The current CCTV system is over 5 years old and operating end of life cycles. As of March 2021, the jail current CCTV system will no longer be supported by Gentec due to out of date software. During the last month, we have had performance issues with our CCTV system that has resulted in occasional outages. This is in addition to the other service problems and failures in the CCTV system that have crept into the system over the past couple of years.

The CCTV failures has caused two major issues in the jail. The first issue is that when the CCTV system fails all cameras jail wide goes to blank screens for anywhere from 30 seconds to a few minutes. The second issue when the CCTV system fails several cameras jail wide stops recording for days on in. Both of these issues presents safety, security and liability issues.

American Video has been maintaining and repairing our camera system since 2006. American Video Transfer has provided a proposal for \$68,724.00 for new equipment, installation, maintenance with a one-year on-site warranty. The upgrade software necessitates new call up monitors as our existing monitors will no longer work with the new software. This is a sole source vender as all the equipment is owned by Stanley Security and to go out for an RFP would result in a revamping of all our cameras, controls, locks, and video equipment. The new equipment and new operating system would allow us to achieve our goal of more reliable performance and allow us to no longer be in an "end of life" product.

The Sheriff Department originally requested and was approved to have the funding of this project be transferred from Capital Improvement in the amount of \$80,000. The total cost of this project is \$68,724.00.

If you have any questions regarding this matter, please contact me.

Respectfully submitted,

Lt. Tarneseia Pringle

To:	Lt. Tarnesia Pringle
Organization:	Livingston County Jail
Address:	150 S. Highlander Way Howell, MI 48843
Phone:	517-540-7626
Fax or Email:	tpringle@livgov.com

**QUOTATION
#200559-2****Livingston County Jail, MI – Upgrade
Genetec Directory & Clients**

September 15, 2020

Dear Lt. Pringle:

Per your request, we have attached pricing to upgrade the CCTV System as described below.

Genetec Video Management Software Upgrade

We will be upgrading the Genetec Video Management Software from Omnicast 4.8 to Security Center 5.9. This will include upgrading the VMS software on the Directory Server, Archive Server(s), and video client computers. This also includes updating the integration between the Commander Computers and the Genetec Video Management Software for video call-up functionality. *See note below regarding the Video Client Computers being required for video callup functionality.*

Genetec Directory Server

With the increased bandwidth and processing required for the higher resolution cameras, the existing Genetec Directory server will be replaced with a new server to include Windows Server 2016.

Genetec Archive Server

Per Matt Eckman's request, the existing Archive Server with 66TB of RAID5 storage will remain and be reused.

Video Client Computers

Genetec Security Center 5.9 requires Windows 10 for the client software, therefore the existing CCTV Client computers will be required to be replaced with new computers to include Windows10. American Video Transfer, Inc. will be responsible for supplying and installing the new video client computers. The existing monitors shall remain and be reused. Should you desire new monitors, additional costs shall be incurred for this hardware.

Computers to be upgraded by American Video Transfer, Inc.:

1. Video Client Computer 1 – Central Control, Room 707
2. Video Client Computer 2 – Central Control, Room 707
3. Video Client Computer 3 – Central Control, Room 707
4. Video Client Computer 4 – East Pod Control, Room 700
5. Video Client Computer 5 – East Pod Control, Room 700
6. Video Client Computer 6 – Office, Room 696
7. Video Client Computer 7 – Max Control, Room 131
8. Video Client Computer 8 – Intake Control, Room 218
9. Video Client Computer 9 – Intake Control, Room 218

Since the Commander Computers do not have Windows 10 operating system, the callup functionality will be required to move to a separate Genetec Client Computer at each control station location. There will be two (2) panes within the Genetec Client software dedicated to Video Callup and Intercom Follow at each of the six (6) control station locations. There will be a "gray bar" in place of the video callup positions on the touchscreen control stations, as this functionality will be removed. We have provided two (2) 24-Port PoE network switches to accommodate the additional Genetec Client Computers.

Computers to be added by American Video Transfer, Inc. to accommodate new callup functionality:

1. Video Client Computer 10 – Central Control, Room 707
2. Video Client Computer 11 – East Pod Control, Room 700
3. Video Client Computer 12 – Max Control, Room 131
4. Video Client Computer 13 – Max Control, Room 131
5. Video Client Computer 14 – Intake Control, Room 218
6. Video Client Computer 15 – Intake Control, Room 218

Terms and Conditions

GENERAL

Terms are due upon receipt. STANLEY works under the terms of a purchase order only. We will wait to proceed with this change until we receive a Purchase Order or Signed Sales Agreement. STANLEY is not responsible for any work associated with hazardous materials (i.e. asbestos, lead paint, etc) that is associated with the work. This work will be the responsibility of the Owner or General Contractor.

All paperwork to be addressed to: **Stanley Convergent Security Solutions, Inc.** Please scan and email the Purchase Order or Signed Sales Agreement, W-9, and a Tax Exempt Certificate.

WARRANTY

Unless otherwise specified, STANLEY warrants that the engineering and equipment will be free from defects in material and workmanship for a period of twelve (12) months from the date the system is placed into operation. If during this warranty period, any of the equipment or parts are defective or malfunction, they will be repaired or replaced free of charge. Warranty repair and/or service shall be provided in accordance with the terms and conditions set forth in the Agreement between STANLEY and Owner. This warranty does not include acts of God or abuse by the owner.

DISCLAIMER OF ALL OTHER WARRANTIES: EXCEPT FOR THE FOREGOING LIMITED EQUIPMENT WARRANTY DESCRIBED ABOVE, STANLEY MAKES NO OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. IT IS EXPRESSLY AGREED THAT UNDER NO CIRCUMSTANCES SHALL STANLEY BE HELD LIABLE FOR ANY INCIDENTAL, SPECIAL OR CONSEQUENTIAL DAMAGES INCLUDING, BUT NOT LIMITED TO, LOSS OF PROFITS, WHETHER ARISING UNDER ALLEGED BREACH OF AGREEMENT, NEGLIGENCE, STRICT LIABILITY OR ANY OTHER LEGAL OR EQUITABLE THEORY, AND STANLEY'S LIABILITY SHALL BE STRICTLY LIMITED AS STATED ABOVE.

ADDITIONAL CHARGES:

1. All prices quoted do not include sales tax, prevailing wage, or bonds unless specifically written on the face of the proposal.
2. Unless otherwise stated in the proposal, the price quoted is FOB shipping point. All shipments will be UPS ground.
3. Applicable permitting fees will be billed on a pass-through basis.
4. The price quoted assumes installation will be performed during STANLEY's normal working hours and using its own personnel. If Customer requests the installation or any part thereof to be performed outside ordinary business hours or, if the installation must be performed by outside contractors, or STANLEY's wage rates do not apply as a result of prevailing wage requirements, or otherwise, then the installation charge will be adjusted accordingly.
5. Any changes to the system required by any government agency or Authority Having Jurisdiction will be billed to Customer, and are not the responsibility of STANLEY.

INSURANCE:

STANLEY will carry Liability Insurance and Workers Comp. Insurance and will provide Certificates of Insurance to Contractor, with Contractor named as Certificate Holder, prior to the execution of any work. In the event STANLEY is required to indemnify Contractor, Owner or a third party, the indemnification shall be limited to the installation amount.

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions attached hereto are satisfactory and are hereby accepted. STANLEY is authorized to do the work as specified. Payment will be made as outlined above.

Stanley Convergent Security Solutions, Inc.

Written By: Dustin Hackleman

Title: Senior Sales Engineer

Approved and Accepted by Stanley CSS

By: _____

Title: _____

Date: _____

Customer

Approved By: _____

Title: _____

Date: _____

PO#: _____

(if applicable)

This proposal may be withdrawn by us if not accepted within thirty (30) days.

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: September 16, 2020

Resolution Authorizing a Budget Amendment to the Sheriff Jail 2020 Operating Budget - Jail

WHEREAS, in late January 2020, a vehicle driven by a citizen crashed into the south side of the east jail sally port which caused significant structural damage to the building; and

WHEREAS, a claim was submitted to Livingston County's Insurance Carrier, Michigan Municipal Management Authority (MMRMA) and approved in the amount of \$61,648.73; and

WHEREAS, repairs were completed by John Stewart, General Contractors; and

WHEREAS, the insurance reimbursement received and the cost of the repairs are not in the 2020 budget and require a budget amendment so the Sheriff Office is able to pay the General Contractor for the work he completed related to this claim.

THEREFORE BE IT RESOLVED that the Board of Commissioners authorizes a Budget Amendment in the amount of \$61,649 in the Jail 2020 Operating Budget to record the insurance proceeds and corresponding payment of this claim as follows:

10135100 696000 Insurance Recovery	+ \$61,649
10135100 930000 Building Repair & Maintenance	+ \$61,649
#	#

MOVED:
SECONDED:
CARRIED:

John Stewart

GENERAL CONTRACTORS

1645 N. MILFORD RD.
MILFORD, MICH. 48381
PH. (248) 390-5260
Email stewartcontractors@gmail.com

June 30, 2020

Livingston County
Facility Services
420 S. Highlander Way
Howell, Mi. 48843
Attn: Mr. Chris Folts

RE: Repair Jail Transport Building
Insurance Claim (The ASU Group) # 2000376

INVOICE

Repair the exterior walls at the Livingston County Jail, Transportation Area.
Cost to remove damaged panels, remove and replace interior masonry wall.
Repair damaged electrical
Repaint interior section of wall, at new block wall repair
Interior temporary wall and wall shoring
Debris removal
Cleanup

Final agreed upon price with Mr. Bob Winn - ASU Group
Price includes the deductible cost.

Total\$ 61,648.73

John Stewart

0003028283

PAYEE: John Stewart Associates, LLC

CLAIM NUMBER
2000376CHECK DATE
8/6/2020LOSS DATE
1/28/2020AMOUNT
\$55,063.57POLICY NUMBER
M0001289TIN
xxxxx9813INSURED
Livingston CountyCLAIMANT
Livingston CountyADJUSTER
Soncia SalterMAIL TO John Stewart Associates, LLC
ADDRESS: 1648 N. Milford Road
Milford, MI 48381FOR: Vehicle Caused Damage
Building repairs
Vendor: John Stewart

Completed building repairs: \$ 61,648.73

Less previously paid amt: \$ 5,585.16

Less deductible: \$ 1,000.00

Building repairs owed: \$ 55,063.57

Member received \$ 5,585.16 directly.

DID NOT RECEIVED THIS

10135100

930000

PRINTED IN U.S.A.

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

RISK

MICHIGAN MUNICIPAL
RISK MANAGEMENT
AUTHORITY

14001 MERRIMAN • LIVONIA, MI 48154

Comerica Bank
9-9/720

0003028283

DATE
08/06/2020

Claim No. 2000376

AMOUNT
\$55,063.57

FIFTY FIVE THOUSAND SIXTY THREE AND

57/100 DOLLARS

PAY
TO THE
ORDER OF

JOHN STEWART ASSOCIATES, LLC

AUTHORIZED SIGNATURE

THIS RED IMAGE
FADING WITH USE

AUTHORIZED SIGNATURE

⑈0003028283⑈ ⑆072000096⑆ 0000184005172⑈

Jeff Warder

From: Cindy Catanach
Sent: Tuesday, September 15, 2020 12:43 PM
To: Jeff Warder
Cc: Natalie Hunt
Subject: Scanned from a Xerox Multifunction Printer (002).pdf
Attachments: Scanned from a Xerox Multifunction Printer (002).pdf

Hi Undersheriff –

Here is the back up. Simply put you need a budget amendment to pay this claim. It is 100% reimbursed by insurance (MMRMA). The accounts are below. Once this has been approved by the Board a check will need to be processed by you all to pay the balance. We can talk about that when this is completed after Full Board on 9/28/20.

10135100 696000 – Insurance Reimb	\$61,649.00
10135100 930000 – Building Repair and Maint	\$61,649.00

Thanks Jeff

RESOLUTION

NO: [Title]

LIVINGSTON COUNTY

DATE: Click or tap to enter a date.

Resolution Amending Resolution 2020-09-211 Authorizing Additional Fencing at Rear of Jail to Secure Building and Protect Inmates - Sheriff / Jail

WHEREAS, additional fencing and security was identified as being needed behind the Jail and was originally in the approved FY 2019 Sheriff's Budget; and

WHEREAS the project was delayed until FY 2020 due to a larger renovation project and with a recent incident at the jail, the COVID-19 pandemic and civil unrest it is more imperative than ever to secure the rear entrance to the Jail and the Sheriff's Office building; and

WHEREAS we have obtained quotes from local vendors, Justice Fence Co (\$24,235) and American Video Transfer (\$10,050) to complete this project which is an expansion of our existing fencing including underground boring and electrical work; and

WHEREAS, funds are allocated as part of the \$1 million capital replacement funds for renovations in the Sheriff budget; and

THEREFORE BE IT RESOLVED that the Livingston County Board of Commissioners hereby authorize the expansion of the fencing and securing of the Jail and Sheriff's Office as part of the CIP Sheriff's Office renovation project.

BE IT FURTHER RESOLVED that the Livingston County Board of Commissioners hereby authorize the issuance of purchase orders to Justice Fence Co. in the amount of \$24,235 and American Video Transfer in the amount of \$10,050 and/or others, as needed for the expansion of the fencing and securing of the Jail and Sheriff's Office Building.

~~**BE IT FURTHER RESOLVED** that the Board authorize the Treasurer to transfer the necessary funds from contingency to General Fund Sheriff Jail for this project.~~

BE IT FURTHER RESOLVED that the Board of Commissioners hereby authorize the Treasurer to transfer \$34,285 from Fund 403 Capital Replacement to the Sheriff Jail General Fund.

BE IT FUTHER RESOLVED that the Board of Commissioners hereby authorize any budget amendments needed to effectuate the procurement of the projects as described above.

#

#

#

MOVED:
SECONDED:
CARRIED: