

County Health and Human Services Board

Michigan Department of Health and Human Services

Background

County MDHHS boards consist of three members, two appointed by the county board of commissioners and a third appointed by the Director of the MDHHS to three-year terms. The members select the DHHS Board Chairperson at the first meeting after the appointment of a new member and can be either a County appointment member or State appointment member. Board members must reside in the county in which (s)he is applying and must not hold an elective office, including precinct delegate.

The board as part of the county MDHHS office, collaborates with the state MDHHS to address the needs of the people of the county, focusing on removing social disabilities and barriers and restoring individuals to self-support, and to normal conditions of life.

Per the Social Welfare Act, Act 280 of 1939, Section 400.45, as amended, the powers and duties of the county DHHS Board shall include but not be limited to:

- Supervision and responsibility for administration of the county infirmary and county medical care facility.
- Annual reviews of human service programs operating within the county.
- Development of policy and supervision of the administration of health and human services programs authorized by the board of commissioners or financed solely from county funds.
- Development and administration of employment programs and work training projects complementary to and not in conflict with state programs.
- Review and submit recommendations on service contracts entered into by the county MDHHS and public and private agencies within the county.
- Act as an agent for the county board of commissioners in development of coordinated approaches to delivery of services between the MDHHS and public and private social agencies within the county.
- Represent the county board of commissioners in all negotiations with the county MDHHS.
- Make recommendations to the Michigan County Social Services Association on annual departmental appropriations, priorities for utilization of Title XX funds, eligibility standards for general public relief and burial, employment programs, work training programs and other related issues.
- Review qualifications and interview candidates for county director positions and conduct annual performance review of the county director.

Salary: Salary and necessary travel and other expenses for the Health and Human Services Board Members are set by the county board of commissioners.

Board Member Political Activity

The following are examples of political activities appropriate to be engaged in by a DHHS Board member as an exercise of his/her individual rights and duties. A DHHS Board member may:

- Register and vote.
- Join a political party and attend political rallies.
- Contribute money to a political organization and attend political fund raising functions.
- Express opinions about candidates and issues, except as they conflict with item 4 below.
- Sign nominating petitions for candidates, and originate and circulate such petitions in locations other than the county DHHS office.
- Assist in voter registration drives.

The following are political activities in which a DHHS Board Member may not engage:

- Hold an elective office.
- Become a delegate to a political party convention, a member of a national political party committee, or delegate from Michigan to a national political party convention.
- Serve as an officer of a political party organization or become a member of a political party committee.
- Become a member of a committee to elect a political party candidate. Use his/her position as a member of the board for any political purpose. Levy, collect, or solicit political assessments.
- Solicit, collect, or accept any contribution to a political party or a candidate for public office from any staff person or client of the agency.

Since the DHHS Board has a significant impact on the county DHHS (and county medical care facilities, in counties where they exist), it is in the interest of the agency and the county to assure that each member of the board is legally eligible to serve, so that no doubts exist as to the legality of their official acts.

According to Attorney General Opinions the following prohibitions apply:

- A member of a county DHHS Board is barred from serving as a delegate to a county, state or national political party convention. (Op.Atty.Gen. 1980, No.5693, p.740 and Op.Atty.Gen. 1960, No. 3525, p.77)
- A DHHS Board member is expressly prohibited from becoming a candidate for the office of county commissioner since the political activity involved in running for the partisan office of county commissioner would be inconsistent with the prohibition against

political activity. (Letter from Stanley Steinborn, Chief Assistant Attorney General on May 18, 1990 to Representative Ralph Ostling.)

- The Attorney General has opined that the following individuals may not serve as DHHS Board members without first resigning from their current post: county controllers due to incompatibility of the two office (Op.Atty.Gen.1983, No. 6180, p.175). county board of supervisors (Op.Atty.Gen.1948, No.749, p.658 and Op.Atty.Gen.1981, No.5898, p.178), incumbents of township elective office (Op.Atty.Gen.1966-56, No,2398, p.7830), county road commissioners if it's an elected office (Op.Atty.Gen.1945-46, No.0-2859, p.122), village clerks (Op.Atty.Gen.1939, p.297), county commissioners (Op.Atty.Gen.1981, No.5898, p.178) and elective city commissioners, even if appointed (Op.Atty.Gen.1939-40, p.285).

Department of Health and Human Services Board Functions

When a person accepts appointment to their County Department of Health and Human Services Board, she/he assume responsibilities and duties that are important to the DHHS clients, the county, and the State of Michigan.

In order to become a well-informed member of the board, it is imperative that she/he attend all meetings. A good board member must be interested and willing to devote time and effort to develop knowledge of public welfare.

One of the most important functions of a board member is that of being the representative of the people. Board members are an avenue for public input into Department of Health and Human Services programs. The board is the link between the community, county medical care facilities, the county board of commissioners, and the DHHS.

The county board has oversight responsibilities for the county DHHS and is a policy-making body. Although the director is charged with the responsibility of the actual administration of the agency, the board has the duty to see that it functions properly.

In those counties operating medical care facilities, county infirmaries, and/or child caring institutions, the board is responsible for hiring and evaluating the administrator, and approving the budget, and all policies. The administrators' functions and duties should be in writing.

Board Member Profile

The following outlines criteria for serving as a DHHS Board member. Some conditions are statutorily mandated, while other characteristics are helpful to the process and facilitate a positive appointment.

A DHHS Board member is a representative of the people and as such, it is advantageous to have the board reflect the geographic, racial, cultural and ethnic demographics of the county. Being a board member is a working, not an honorary, position and requires certain commitments. A board member must be interested and willing to devote time and effort to develop knowledge of public welfare since the board supervises the workings of the county agency and is a policy-making body.

In making an appointment, it is important that the Board of Commissioners take the criteria listed below into consideration.

The statutorily mandated conditions for serving as a DHHS Board member according to the Social Welfare Act, Act 280 of 1939, as amended, are as follows:

- The individual must be a resident of the county and may not hold an elective office during his/her tenure as board member (Section 400.46(1)).
- Two members shall be appointed by the county board of commissioners, and one member by the governor and/or the director of the Department of Health and Human Services (Section 400.46(1)).
- The individual must be able to service a minimum three-year term. If a board member's term expires before another person is duly appointed then the serving board member continues in office until a successor is appointed and takes the oath of office (Section 400.46(1)).
- The board shall hold a minimum of 12 meetings per year with an interval of not more than five weeks between any two meetings. If a person fails to attend three consecutive, regularly scheduled meetings without reasonable cause, that person may be removed from membership on the board (Section 400.46(2&4)).
- During the term of office, a DHHS Board member shall not "Participate in any form of political activity other than may be appropriate to the exercise of the individual's rights, duties and privileges" or use his/her "Official position for any political purpose" (Section 400.90).

The Board and Community Relations

Every community has a need to carefully study and plan for human services needed by all its citizens and to provide for coordination among human service agencies.

The 'Welfare Act' in Section 400.54 entreats the board to "place emphasis upon the prevention of social disabilities, the removal of causes of such disabilities, and the restoration of individuals to self-support" and "financial and social independence." One way to help families is to cooperate with existing agencies so that the total needs of families are met. While in many instances, department staff maintains such cooperative relationships, the individual who actually performs such liaisons may well be a board member. Board members are encouraged

to join other significant community groups, or even to serve on other agency boards or advisory panels to enhance liaisons.

Board members can help avoid small misunderstandings that grow into major irritants between agencies and community groups on an informal level and through community associations by describing the day-to-day 'good things' that happen to people in DHHS programs. This, of course, requires observing strict rules on confidentiality regarding the identity of individual clients, but can provide the broader community with concrete examples of why support for DHHS programs is needed.

Since some members of the DHHS Board are appointed by county commissioners, they can have a strong impact on the nature of services available through local offices. Through understanding the operations of the county DHHS office and other community agencies, board members can present an accurate appraisal of community services needs to commissioners. It is this kind of advice from respected citizens, which supports the county director in efforts to administer a sound program. Some county boards periodically have special orientation programs for county commissioners, which involve the county director, staff and clients. Still others have developed volunteer programs as an adjunct to the department's services. All these activities serve to increase public awareness and understanding of the barriers facing welfare clients. Program innovations are a logical planned consequence to community relations.

The county DHHS office may provide emergency care in a facility for homes, dependent or neglected children (MCL 400.18d) and foster home care for children not under the jurisdiction of the juvenile court (400.18c). Upon request of the Probate Court, the county may investigate matters pertaining to dependent, neglected and delinquent children or wayward minors (MCL 400.55h). It may also become involved in developing sound programs and standards for child welfare programs aimed at preventing dependency, neglect and delinquency (MCL 400.55j).

The previously mentioned provisions of the Social Welfare Act permit boards to think creatively about the needs of their communities, and to take concerted action with other community agencies (both public and private) to respond to ever-changing needs. Many boards have responded by creating services which are supported with local funds. These services include homemaker services, various preventive health services, and a variety of work projects, which provide such needs as housing units.

It is apparent that the roots of all democratic processes designed to "promote the general welfare" of our society rest ultimately with local citizens. It is here that program change and innovation begins. It is here that the real world of human need and suffering is confronted. It is here that effective board members really thrive!