

GRANDVUE MEDICAL CARE FACILITY

FREEDOM OF INFORMATION ACT

WRITTEN SUMMARY

Pursuant to Section 4 of the Michigan Freedom of Information Act, MCL 15.234, (the "FOIA" or the "Act") Grandvue Medical Care Facility, (the "facility"), issues this written public summary of the following:

How to Submit Written Requests to Grandvue

Grandvue Medical Care Facility requires individuals or entities to submit FOIA requests in writing. FOIA requests may be mailed to the following address:

FOIA Coordinator
Grandvue Medical Care Facility
1728 S. Peninsula Road
East Jordan, MI 49727

An individual or entity may also make a request in person at the [designate an office of the public body], or email a request to administrator@grandvue.org or fax a request to (231)536-2476.

Please review the following checklist to ensure a timely and accurate response to a request:

- a. Make sure the correspondence is addressed to the "FOIA Coordinator" and includes the proper address and/or fax number.
- b. Clearly state that the request is being made for a public record(s) pursuant to the "Freedom of Information Act" or the "FOIA."
- c. Describe the public record(s) requested in sufficient detail so that it can be more-easily identified and located.
- d. Describe the subject matter of the public record(s) requested and, if possible, the approximate date that the public record(s) was created.
- e. Clearly state the manner in which you prefer the facility to provide the public records, such as: paper copies, non-paper physical media, email, etc. (please note, all requests must be within the technological capabilities of the facility).
- f. You can stipulate that public records be provided on nonpaper, physical media, electronically mailed, or otherwise electronically provided in lieu of paper copies. If the requested public records are available on Grandvue's website and the response includes the website address, then any request for paper format or other form, such as electronic form, may result in additional charges.

How to Understand the Facility's Written Responses

When the FOIA Coordinator receives a written request for a public record, the FOIA Coordinator, or his or her designee, shall, in not more than five (5) business days after the facility receives the request, respond to the request in one of the following ways:

- a. Grant the request.
- b. Issue a written notice to the requestor denying the request.
- c. Grant the request in part and issue a written notice to the requestor denying the request in part.
- d. Issue a written notice extending, for not more than ten (10) business days, the period during which the facility shall respond to the request.

Deposit Requirements

If the estimated cost of responding to a request exceeds \$50.00, the facility may require a good faith deposit of 50% to be submitted before the request is processed. Once the good faith deposit is submitted, the facility will process the request. The balance of the cost of the request must be paid before copies may be picked up, mailed, or delivered. Good faith deposits and fees charged for responding to FOIA requests may be mailed to the following address:

FOIA Coordinator
Grandvue Medical Care Facility
1728 S. Peninsula Road
East Jordan, MI 49727

Fee Calculations

Please review the attached Fee Itemization Form, which provides a line-by-line summary and explanation of the fees that the facility may charge in response to a request, pursuant to Section 4 of the Act (MCL 15.234(1)).

Avenues for Challenge and Appeal

If the requestor believes the fee estimated or charged for the request exceeds the amount permitted under the facility's procedures and guidelines or Section 4 of the Act, the requestor must:

- a. Submit to the Charlevoix County Department of Human Services Board ("Board") a written appeal for a fee reduction that specifically states the word "appeal" and identifies why the requestor believes the required fee exceeds the amount permitted under the facility's procedures and guidelines or Section 4 of the Act. If the requestor disagrees with the Board's final determination, the requestor may, after exhausting internal administrative remedies, commence a civil action in Charlevoix County Circuit Court for a fee reduction. The civil action must be filed within 45 days of the public

body's final determination to deny a request pursuant to Section 10(1)(b) of the Act.

Any written response denying a request for a public record, in whole or in part, is a final determination to deny the request or portion of that request. A requestor may file an appeal with the Board or may seek judicial review of the denial, pursuant to Section 10 of the Act (MCL 15.240). A requestor may receive attorneys' fees and damages pursuant to the Act if the Court determines that the facility has not complied with Section 5 (MCL 15.235) of the Act and orders the disclosure of all or a portion of a public record.

GRANDVUE MEDICAL CARE FACILITY

FREEDOM OF INFORMATION ACT

FEE ITEMIZATION FORM

Pursuant to Section 4 of the Michigan Freedom of Information Act, MCL 15.234 (the "FOIA" or the "Act"), the following costs will be charged for responses to FOIA requests, pursuant to the FOIA Fee Schedule adopted and periodically revised by the Department of Human Services Board of Charlevoix County.ⁱ

Y / N (circle one): A fee for labor cost is being charged because the failure to do so will result in unreasonably high costs to Grandvue Medical Care Facility because of the nature of the request in this particular instance. Specifically, _____

Labor costs shall not be more than the hourly wage of Grandvue's lowest-paid employee capable of performing the labor in the particular instance, regardless of whether that person is available or actually performs the labor. Labor costs will be estimated and charged in 15-minute time increments. All partial time increments will be rounded down. No overtime will be charged unless the person making the request provides written approval. If the number of minutes is less than 15, there will be no charge. If Grandvue charges to cover or partially cover the cost of fringe benefits, it will use a 50-percent multiplier to account for those benefits.ⁱⁱ

1. LABOR COST TO LOCATE ⁱⁱⁱ		
Hourly Wage Charged = \$_____.	It is estimated to take [__] minutes to perform this task ÷ [__] minute increments = ____ increment(s).	Subtotal Cost = \$_____
OT Wages (as Stipulated by the Requestor) = \$_____.		
Charge per increment = \$_____.		
or		
Hourly Wage with Fringe Benefit Cost = \$_____.		
Charge per increment = \$_____.		

2. LABOR COST TO COPY ^{iv}		
Hourly Wage Charged = \$_____.	It is estimated to take [__] minutes to perform this task ÷ [__] minute increments = ____ increment(s).	Subtotal Cost = \$_____
OT Wages (as Stipulated by the Requestor) = \$_____.		
Charge per increment = \$_____.		
or		
Hourly Wage with Fringe Benefit Cost = \$_____.		
Charge per increment = \$_____.		

3. EMPLOYEE LABOR COST TO SEPARATE EXEMPT FROM NON-EXEMPT MATERIAL ^v		
Hourly Wage Charged = \$ _____. Charge per increment = \$ _____.	It is estimated to take [_____] minutes to perform this task ÷ [_____] minute increments = _____ increment(s).	Subtotal Cost = \$ _____
or Hourly Wage with Fringe Benefit Cost = \$ _____. Charge per increment = \$ _____.		

4. CONTRACTED LABOR COST TO SEPARATE EXEMPT FROM NON-EXEMPT MATERIAL ^{vi}		
Name of contracted person or firm = _____		
Hourly Wage Charged = \$ _____. Charge per increment = \$ _____.	It is estimated to take [_____] minutes to perform this task ÷ [_____] minute increments = _____ increment(s).	Subtotal Cost^{vii} = \$ _____
or Hourly Wage with Fringe Benefit Cost = \$ _____. Charge per increment = \$ _____.		

5. COPYING (DUPLICATION OR PRINTING) COST ^{viii}		
Letter (8 1/2 x 11-inch, single- or double-sided): ____ cents per sheet	Number of sheets = _____	Cost = \$ _____
Legal (8 1/2 x 14-inch, single- or double-sided): ____ cents per sheet	Number of sheets = _____	Cost = \$ _____
Other paper sizes (single- or double-sided): ____ cents per sheet	Number of sheets = _____	Cost = \$ _____
Actual and most reasonably economical cost of non-paper physical digital media (or being provided to the requestor in such format as stipulated) = \$ _____ <i>Circle applicable:</i> Disc / Tape / Drive / Other Digital Medium Cost per Item:	Number of items = _____	Cost = \$ _____
Subtotal Cost = \$ _____		

6. MAILING COST ^{ix}		
	Number of envelope(s), package(s), stamp(s), etc.	
Cost of Envelope or Package = \$ _____	_____	Cost = \$ _____
Postage = \$ _____ per stamp.	_____	Cost = \$ _____
Postage = \$ _____ per pound.	_____	Cost = \$ _____
Postage = \$ _____ per package.	_____	Cost = \$ _____
Postal Delivery Confirmation = \$ _____.	_____	Cost = \$ _____
Expedited Shipping or Insurance, if requested = \$ _____.	_____	Cost = \$ _____
Subtotal Cost = \$ _____		

Affidavit of Indigency Submitted? <u>Y</u> / <u>N</u> ^x Qualified Non-Profit Organization per Section 4(2)(f)(2)(b) of the FOIA? <u>Y</u> / <u>N</u>	If Yes, subtract \$20.00	(\$____)
TOTAL ESTIMATED FEE = \$ _____		
If the estimated cost exceeds \$50.00, a good faith deposit of 50% is required before the request will be processed.	50% Deposit = \$ _____.	Date Paid = ____/____/____.
The request will be processed, but the balance of the cost must be paid before copies may be picked up, delivered, or mailed.	Balance Due = \$ _____.	Date Paid = ____/____/____.

ⁱ Grandvue Medical Care Facility may require a one-hundred percent (100%) deposit from a requestor who has not previously paid a fulfilled FOIA request, provided the requirements in Section 5 of the Act are met.

ⁱⁱ Please note, 100% of fringe benefit costs will be added to the applicable labor charge if a requestor is notified in writing that public records are available on Grandvue's website or webpage and the requestor continues to request that Grandvue provide a copy, in any format, of the available public record.

ⁱⁱⁱ This is the cost of labor directly associated with the necessary searching for, locating, and examining public records in conjunction with receiving and fulfilling a granted written request.

^{iv} This is the cost of labor directly associated with duplication of publication, including making paper copies, making digital copies, or transferring digital public records to be given to the requestor on non-paper physical media or through the Internet or other electronic means as stipulated by the requestor.

^v This is the cost of labor of an in-house, Grandvue employee, including necessary review, directly associated with separating and deleting exempt from nonexempt information.

^{vi} As Grandvue does not employ a person in-house who is capable of separating exempt from non-exempt information in this particular instance, as determined by the FOIA Coordinator, this is the cost of labor of a contractor (i.e., outside attorney), including necessary review, directly associated with separating and deleting exempt information from nonexempt information. Grandvue will not charge for labor directly associated with redaction if it knows or has reason to know that it previously redacted the record in question and still has the redacted version in its possession.

^{vii} This amount shall not exceed six (6) times the State minimum hourly wage rate.

^{viii} Copying costs may be charged if a copy of a public record is requested, or for the necessary copying of a record for inspection (i.e., to redact exempt information, to protect old or delicate original public records, or because the original public record is a digital file or database not available for public inspection). No more than the actual cost of a sheet of paper will be charged, up to maximum 10 cents per sheet. Whenever feasible double-sided printing will be utilized.

^{ix} Grandvue will charge the actual cost of mailing, if any, for sending records in a reasonably economical and justifiable manner. Grandvue will not charge more for expedited shipping or insurance unless specifically requested by the requestor. Grandvue may charge for the least expensive form of postal delivery confirmation.

^x Persons establishing indigence (i.e. affidavit that the individual is receiving specific public assistance, or if not stating facts showing an inability to pay) and nonprofit organizations formally designated by the State of Michigan to carry out activities under Developmental Disabilities Assistance and Bill of Rights Act, Public Law 106-402 or the Protection and Advocacy for Individuals with Mental Illness Act, Public Law 99-139, are entitled to a discount. If a requestor is ineligible for the discount, Grandvue shall inform the requestor specifically of the reason for ineligibility in its written response.