

August 1, 2025

MEMORANDUM FOR: Advisory Board of Health and Liz King, Health Officer

St. Clair County Health Department

FROM: Dr. Remington Nevin, Medical Director, St. Clair County Health Department

SUBJECT: Medical Direction for the Consolidation of Clinical Services

This memorandum provides formal notice of medical direction that will be issued beginning effective September 1, 2025, in the form of revised standing orders, nurse practitioner collaborative agreements, modifications to state facility licenses, and private and public insurance billing agreements and registrations, for the purposes of ensuring the appropriate medical standard of care is met at St. Clair County Health Department medical facilities.

These changes are being made after extensive consideration and discussion, including with appropriate state, county, and local officials, consistent with my responsibilities as medical director under Michigan regulations for developing and carrying out medical policies, procedures, and standing orders and for advising the health officer on matters related to medical specialty judgments. MI Admin Code R. 325.13001(d).

This formal notice is intended to permit an orderly consolidation of clinical services to the department's existing Main and Teen Clinic locations in Port Huron, and to facilitate continuity of care for affected patients and to prevent patient abandonment, following earlier informal notice intended to limit the impact of these measures. Affected patients are to be notified in writing, and rescheduled for care at these existing locations, or referred for care through other community health organizations, with exceptions and areas of concern brought to the immediate attention of the medical director.

1. Remote Primary Care Clinics

The St. Clair County Health Department is a public health department. The direct provision of primary care is not a core function of public health. As outlined in the Public Health Code, the core functions of a local health department include surveillance and control of local communicable diseases, regulation and control of local environmental health hazards, and coordination of community-wide health promotion and disease prevention initiatives. MCL 333.2433 and 333.2473. Under Michigan regulations, the qualifying board certification for medical direction of a local health department is public health or preventive medicine, not a primary care specialty such as pediatrics, family medicine, or internal medicine. R. 325.13002(a) and R. 325.13004. A physician board certified in public health and general preventive medicine specializes in promoting health, preventing disease, and managing population health through epidemiology and health policy, consistent with the core functions of public health and local health departments as outlined in Michigan law.



Consistent with such a focus, Michigan law does not direct local health departments to attempt to directly provide for the population's primary care needs. Instead, across the state, such primary care is usually provided by distinct community health organizations, such as federally qualified health centers or private practices, which are specifically intended and better resourced to provide for such care. More unusual still across Michigan is for local health departments to attempt to provide primary care at multiple remote locations within a single county, particularly in the absence of full-time, board certified primary care medical direction, as doing so would be expected to exceed the department's resources for medical oversight. Instead, local health departments are directed to assist as appropriate in the development of health care facilities and agencies and health services delivery system, through its health policy and regulatory authorities. MCL 333.2433 and 333.2473.

The department's current direct primary care model was largely developed and expanded under prior full-time medical direction, consistent with a primary care board certification and focus, and has remained largely unchanged under two years of current part-time medical direction. Revising this model to be aligned with available resources, including the availability of effective medical oversight within the part-time medical direction model adopted by the county focused on public health and preventive medicine, is consistent with the medical director's responsibilities under Michigan regulations for developing and carrying out medical policies, procedures, and standing orders, and is a matter of medical specialty judgment.

To ensure the appropriate medical standard of care is met, existing nurse practitioner-level clinical activities will be consolidated to the Main and Teen Clinic locations. To ensure adequate time for provider training, administration, and absences, a minimum nurse practitioner (or other advanced practice provider) staffing level of 2.5 – 3.0 full time equivalents (FTE) will be maintained across the Main and Teen Clinic locations in order for the latter location to continue to provide primary care services. Consistent with established activities, registered nursing staff may continue to provide nursing care, education, and counselling within the scope of their practice at the Yale, Algonac, Capac, and Marysville schools and at other appropriate locations, subject to general medical direction.

2. Immunizations

Immunizations are prescription drugs which, per Michigan law, must be prescribed under a physician's orders or oversight. Immunizations are preferably administered at a medical office, as recommended to a patient by a trusted healthcare provider, such as a physician, nurse practitioner, or other advanced practice provider familiar with the patient's medical history and personal preferences. Certain immunizations may also be safely and conveniently administered at pharmacies, particularly as recommended by a trusted healthcare provider, or at urgent care clinics or emergency departments in response to acute needs. Local health departments may also provide such services when other preferred methods of immunization are unavailable to a patient. In all cases, including when immunizations are prescribed by a local health department's medical director, the decision of a patient to receive an immunization must be free of coercion, and based on full and informed consent. The administration of the immunization must also meet all regulatory and legal requirements, be supported by adequate staff and emergency medical equipment, and otherwise meet the medical standard of care. When immunizations are administered outside of established healthcare facilities, particularly without appropriate medical oversight, there is an increased risk of these conditions not being met.

To ensure the appropriate medical standard of care is met, the department's immunization standing orders will be updated to clarify that these orders apply only within established health department facilities at which the medical director or a delegated nurse practitioner (or other advanced practice provider) provide care. Any administration of immunizations at external locations or events, including any emergency or mass administration, will be by exception and by written authorization of the medical director.

3. Diagnostic Testing

The administration of a diagnostic test, such as from specimen collection, for the purposes of establishing a diagnosis, constitutes the practice of medicine, which must occur under a physician's orders or oversight. Physicians who order tests accept responsibility for the care and subsequent management of tested patients to the medical standard of care, including ensuring appropriate follow up. When diagnostic testing is conducted outside of established healthcare facilities, particularly without appropriate medical oversight, there is an increased risk of these conditions not being met.

To ensure the appropriate medical standard of care is met, the department's diagnostic testing standing orders will be updated to clarify that these orders apply only within established health department facilities at which the medical director or a delegated nurse practitioner (or other advanced practice provider) provide care. Any administration of diagnostic testing at external locations or events, including any emergency or mass testing, will be by exception and by written authorization of the medical director.

4. Prescription Medications

The use of prescription medications, such as prescription antibiotics or antivirals, for treatment of diagnosed conditions, constitutes the practice of medicine, which must occur under a physician's orders or oversight. Physicians who prescribe and dispense medication accept responsibility for subsequent management of patients to the medical standard of care, including addressing the potential for side effects and ensuring efficacy of treatment. The prescription and dispensing of prescription medication must also meet all regulatory and legal requirements. When administered directly, such as through injection or directly observed therapy, such administration must be supported by adequate staff and emergency medical equipment and otherwise meet the standard of care. When prescription medications are used outside of established healthcare facilities, particularly without appropriate medical oversight, there is an increased risk of these conditions not being met.

To ensure the appropriate medical standard of care is met, the department's prescription medication standing orders will be updated to clarify that these orders apply only within established health department facilities at which the medical director or a delegated nurse practitioner (or other advanced practice provider) provide care. Any use of prescription medications at external locations or events, including any emergency or mass use, will be by exception and by written authorization of the medical director.

These changes are necessary to ensure the department can meet the appropriate medical standard of care, while ensuring sufficient board-certified public health and preventive medicine medical resources are available to meet the department's core public health functions. The department is encouraged to liaise with existing community health organizations and private providers to facilitate the transition and expansion of primary care services to meet outstanding areas of community need.

Remington Nevin, MD, MPH, DrPH

Medical Director