# *BP1‑17 LHD Work Plan v2.0 Record of Change*

## Health Officer Initials Form

Health Officers are asked to review the changes to the BP1-17 LHD Work Plan outlined below and initial each item to acknowledge they accept, and commit to, all requirements described and referenced in the revised work plan.

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| **Change** | **Pg #** | **Health Officer Initials** |
| **Added/New** | | |
| Federal disclaimer for publications and conferences | p. 6 |  |
| Activity 17.2 – LHD EM Survey/Domain V | p. 19 |  |
| Activity 17.3 – Local EAG submission | p. 19 |  |
| **Deleted/Rescinded** | | |
| Activity 16: ORR 5-year Strategy | p. 19 |  |
| **Edited/Changed** | | |
| RPOC Contact List – New Regional POC for Region 5 | p. ii |  |
| PHEP Partnership Calls – Call frequency; required participants | p.4 |  |
| Activity 7: Staff Assembly Exercise – required documentation | p. 12 |  |
| Activity 18: Whole Community Inclusion 5-year Work Plans – Updated | p. 20 |  |
| CRI Work Plan – Updated requirements; due dates | p. 21 |  |

Submit this record of change form, initialed by the LHD Health Officer to the [MDHHS-BETP-DEPR-PHEP@michigan.gov](mailto:BETP-DEPR-PHEP@michigan.gov) mailbox no later than the close of business on **September 22, 2017**.