Freedom of Information Act

PROCEDURES FOR REQUESTING PUBLIC RECORDS

A. Form and Content of Requests

1. Requests must be made in accordance with the FOIA. Such requests may be submitted on FOIA request forms provided by the Pike County Health Department. (Appendix E)

2. The Requestor shall provide the following information in a request for public records:
   a. A description of the public records sought, being as specific as possible;
   b. Whether a request is for inspection of public records, copies of public records, or both;

B. Person to Whom Requests are Submitted

1. Requests for public records shall be in writing and submitted via mail, personal delivery, fax, email, or other means available.

2. Requests shall be submitted to the Pike County Health Department at the following address:

   FOIA Officer
   Pike County Health Department
   606 W. Adams Street
   Pittsfield, IL 62363
Anita Andress, RN, BSN, Administrator
Pike County Health Department

Freedom of Information Act Request Form (Appendix E)

I request copies of the following documents (be as specific as possible):

__________________________________________________________________________
__________________________________________________________________________

_____ I want to inspect these records in person  _____ I want to obtain copies of these records

The requested information is _____ is not _____ for commercial purposes. The cost of copying the requested information is $.15 per black and white page (the first 50 copies are free). The actual cost of color or abnormal sizes will be charged. Postage will be extra.

_____ I am willing to pay fees for this request up to a maximum of $_____ . If you estimate that the fees will exceed this limit, please inform me first.

_____ I request a waiver of all fees for this request. Disclosure of the requested information to me is in the public interest because it is likely to contribute significantly to public understanding of the operations or activities of the government and is not primarily in my commercial interest.

Explanation _________________________________________________________________

Please print the following information:

Name ________________________________________________________________

Business Name _________________________________________________________

Address _______________________________________________________________

Home Phone Number ______________________________________________________

Thank you for your consideration of this request. I look forward to hearing from you in writing within 5 working days, as required by the Act.

_______________________________________________________________________

Signature of Applicant                        Date

Date Request Received __________________    Date Request Expires _______________

Approved _______    Denied _______    by Pike County Health Department Administrator

_______________________________________________________________________

Signature of Administrator                        Date

Reason for Denial ____________________________

PCHD: 1/10
Appendix A

FOIA Officer(s)

The FOIA Officers for the Pike County Health Department are:

1. Anita Andress, RN, BSN, Administrator
2. Mary Moss, MS, RD, LDN
Appendix B

Description of Pike County Health Department

The Pike County Health Department was established by referendum and organized under the laws of the State of Illinois, chapter 410 for the purpose of providing its residents with the following services and programs at some point:

1. Administration and Organizational Support
2. Vital Records
3. Food Sanitation
4. Potable Water Supply
5. Private Sewage Disposal
6. Nuisance Control
7. Tanning
8. Maternal Child Health
9. Family Planning
10. Communicable Disease Control / Immunizations
11. Chronic Disease
12. Oral Health / Dental Services
13. Nutrition Services
14. Vision and Hearing
15. Health Promotion
16. Tobacco Cessation
17. Diabetes
18. Home Health: Home Health / Home Nursing / Home Services
Appendix D

Operating Budget, Employees, Board of Health, and Advisory Committee Members

The Pike County Health Department has certain functional divisions which are shown on its organizational chart which is available upon request. (Appendix C) The amount of the operation budget for the last fiscal year is available annually in the Annual Report published 90 days after the end of the fiscal year. This report is available upon request. The fiscal year runs from December 1 through November 30. The Pike County Health Department’s office is located at 606 W. Adams Street, Pittsfield, Illinois 62363. The Pike County Health Department currently employs approximately 22 full and 10 part-time employees.

The Pike County Health Department is governed by an 11-member Board of Health which has a broad range of powers and duties in accordance with State Statute (Chapter 410). The board members are appointed by the Pike County Board for 3 year terms. A current listing of the Pike County Board of Health members is available upon request.

The Professional Advisory Committee and Environmental Health Advisory Committee operate in an advisory capacity for Pike County Health Department programs. A current listing of advisory committee members is available upon request.
Appendix F

Fee Schedule for Duplication of Public Records

1. Black and White
   a. First 50 pages free on letter or legal size paper
   b. Additional $.15 per page

2. Color or Abnormal Sizes
   a. Actual cost of copying will be charged

3. Recording Medium
   a. Actual cost of purchased recording medium will be charged