



**Board of Health**

**Virtual Meeting**

January 6, 2021 8:30 a.m.

<b>AGENDA</b>		
<b>Apprx. Time</b>	<b>Topic, Lead Person</b>	<b>Expected Outcomes</b>
8:30 (7')	Welcome & Opportunity for Public Comment – President Nanette Shackelford, Chair	<ol style="list-style-type: none"> <li>1. Meeting Call to Order, Open Meeting Statement</li> <li>2. Introductions / Roll Call</li> <li>3. Approve Agenda – <b>Board Action</b></li> <li>4. Board Conflict of Interest Declarations</li> <li>5. Public Comments</li> </ol>
8:34 (1')	November 4, 2020 Board Meeting Minutes – Chair	Approve Minutes of November Meeting – <b>Board Action</b>
8:35 (25')	Introduction of Local Community Leader Guest: Kerry Davidson, RN, Senior Director, GSV in Hastings and Superior; Dorin Viapan, Administrator, Perkins Pavilion Governance Function: <i>Partner Engagement</i>	<ol style="list-style-type: none"> <li>1. Board learns about long-term care facility concerns, initiatives and successes</li> </ol>
9:00 (15')	Finances – K. Derby / M. Bever Administration/Management - <i>PHAB Domain 11, SP Goal 4</i> <ul style="list-style-type: none"> <li>• Financial Report (Current Funding Sources, Outstanding Invoices, Balance Sheets, Profit &amp; Loss, Disbursements) - KD</li> <li>• Line of Credit Update - KD</li> <li>• Grants/Funding/ Contracts/Subawards Status - MB</li> </ul> Governance Function: <i>Resource Stewardship</i>	<ol style="list-style-type: none"> <li>1. Accept Financial Report – <b>Board Action</b></li> <li>2. Awareness of financial health /funding sources/ budgetary needs</li> </ol>
9:15 (10')	Insurance Proposal – K. Derby / M. Bever <ul style="list-style-type: none"> <li>• Insurance Renewal Proposal (Ellerbrock-Norris)</li> </ul> Governance Function: <i>Resource Stewardship</i>	<ol style="list-style-type: none"> <li>1. Approve Insurance Proposal (Property, General Liability, Auto, Crime, Inland Marine, Worker’s Compensation, Medical Professional Liability) – <b>Board Action</b></li> </ol>
9:25 (5')	Health Insurance Resolution – K. Derby / M. Bever	<ol style="list-style-type: none"> <li>1. Board of Health Resolution #2021-1: Health Insurance - <b>Board Action</b></li> </ol>
9:30	<b>Break (10 min)</b>	Refreshment (BYO) / Stretch & Move!
9:40 (15')	Committee Reports: Policy Committee – P. Meyer <ul style="list-style-type: none"> <li>• Policy Committee Minutes 12.09.2020</li> <li>• Employee Policies and Procedures Handbook</li> </ul> Governance Functions: <i>Policy Development; Legal Authority</i>	<ol style="list-style-type: none"> <li>1. Approve Policies &amp; Procedures Handbook – <b>Board Action</b></li> </ol>
9:55 (5')	Bi Monthly Report on 10 Essential Services from Staff Governance Functions: <i>Partner Engagement, Oversight</i>	<ol style="list-style-type: none"> <li>1. Board is able to describe activities of the Department</li> <li>2. Accept Bi-Monthly Report – <b>Board Action</b></li> </ol>
10:00 (5')	Communications from Exec. Director <ul style="list-style-type: none"> <li>• Executive Director’s Report Q and A</li> </ul> Governance Functions: <i>Oversight, Legal Authority</i>	<ol style="list-style-type: none"> <li>1. Latest updates on key issues, personnel, funding opportunities, legislative advocacy, accreditation status, CHIP Implementation, Training and conferences opportunities, etc.</li> </ol>
10:05 (10')	Performance Management – J. Johnson / M. Bever <ul style="list-style-type: none"> <li>• Quality Improvement – Performance Management Plan</li> <li>• Strategic Plan Action Plan 2020-2025</li> <li>• 2019 Draft Annual Report</li> </ul> Governance Functions: <i>Oversight, Continuous Improvement</i>	<ol style="list-style-type: none"> <li>1. QI-PM Plan Goals Progress – <b>Informational</b> (Scheduled for review every 2 years)</li> <li>2. SHDHD Strategic Plan Action Plan Progress – <b>Informational</b></li> <li>3. Board provides input on 2019 Annual Report - <b>Informational</b></li> </ol>
10:15 (10')	Pre-Annual Meeting Business (March 3) – N. Shackelford <ul style="list-style-type: none"> <li>• Activate Nominating and Public Health Awards Committees</li> <li>• Identify Upcoming Board Member and Committee Appointments</li> <li>• Board of Health Physician vacancy</li> </ul> Governance Functions: <i>Legal Authority; Oversight</i>	<ol style="list-style-type: none"> <li>1. Board has information to assure governance structure is fulfilled</li> </ol>
10:25 (5')	Communications from Board Members - Chair <ul style="list-style-type: none"> <li>• Community/County Updates - Board Members</li> </ul> Announcements/Upcoming Events – All (see next page) Governance Function: <i>Partner Engagement</i>	<ol style="list-style-type: none"> <li>1. Board members share their community/county public health activities/issues and community or professional meeting briefs and legislative days</li> <li>2. Board members have information to promote or participate in upcoming events</li> </ol>
10:30	<b>Adjourn</b>	<b>Board Action</b>

*(Next Meeting March 3, 2021, in Adams County) – NOTE this is the Annual Meeting and is usually followed by the Annual Luncheon and Public Health Awards – still TBD this year, due to COVID.*

## SHDHD Calendar

**Board Members - Please consider attending and/or helping us promote these upcoming events and observances:**

1. **Coronavirus Updates:** Check out the daily updates to SHDHD's website: [www.southheartlandhealth.org](http://www.southheartlandhealth.org), for our COVID-19 data dashboard, flyers and brochures, resources, links, tools and tips.
2. **COVID-19 Briefings:** UNMC's Global Center for Health Security Leadership team meets twice a week with local and state public health representatives to review and discuss new COVID-19 developments and challenges. Dr. James Lawler provides a general overview of new data, developments, and updates on a local, state, national, and international level. These updates have been recorded and made available below for informational purposes. <https://www.unmc.edu/healthsecurity/covid-19/biweekly-updates.html>
3. **COVID-19 Pandemic Response:** We can change the trends if we take action. Encourage your boards, worksites, non-profits, civic organizations, retail stores, restaurants, schools, daycares, long-term care facilities, club and activity sponsors, and elected officials – everyone in your 'circles' – to take action to keep their employees, volunteers, members, participants, students, constituents and communities safer from COVID-19.
4. Stay up to date on public health activities - "Like" [South Heartland's Facebook Page](#)
5. **January is Radon Action Month** – test (or retest) your home for radon and promote radon testing and mitigation in your community. Radon is the 2<sup>nd</sup> leading cause of lung cancer. You can't know if you and your loved ones may be exposed to radon unless you test your home. Test kits are available for \$7.00 from SHDHD or from your local extension offices in Clay, Nuckolls and Webster counties.
6. **The 107th Legislature, 1<sup>st</sup> Session will convene January 6, 2021, at 10 a.m.** Check the calendar at [nebraskalegislature.gov](http://nebraskalegislature.gov) to follow legislative activity.
7. **February is Heart Health Month!** The Hastings YMCA's Blood Pressure Self-Monitoring Program is available in Hastings and Superior, through Brodstone Hospital's Cardiac Rehab department! Two SHDHD staff serve as Heart Health Ambassadors for the YMCA's program. SHDHD also promotes another blood pressure self-management program in all four counties, called "Check, Change, Control." Contact Liz Chamberlain for more information about either program - 402-462-6211.
8. **March is Colorectal Cancer Awareness Month!** Do-it-at-home FOBT test kits are available free at the health department, local health fairs, and most pharmacies. Contact Dorrann Hultman, SHDHD's Community Health Services Coordinator for more information: 402-462-6211.
9. **SHDHD Annual Luncheon and Public Health Awards: TBD, based on COVID Pandemic Status (? March 3, 2020, 11:00 am – 1:00 pm?),** following the Board Annual Meeting. **SAVE the DATE** and plan to help us recognize individuals from your counties and communities who are partnering with SHDHD to improve the public's health.
10. **Ongoing – all year 'round:**
  - **Skin Cancer Prevention** – All year 'round! South Heartland has higher skin cancer rates than Nebraska overall. Some people are more at risk for skin cancer – but skin damage from the sun's ultraviolet (UV) rays, in the form of sunburn, increases everyone's risk. Tanning is also a type of skin damage – no tan is a safe tan. Promote sun safety all year round – especially in children, adolescents and young adults. SHDHD partners with Morrison Cancer Center to educate our communities about preventing skin cancer. Contact Dorrann Hultman to schedule a presentation for youth or adults in your community - 402-462-6211.
  - **Diabetes Prevention:** Ongoing: 'Smart Moves' Classes (Evidence-based [Diabetes Prevention Program](#)) – Share the brochure and refer people who might be eligible. SHDHD's program has maintained Recognition status from the CDC! New classes are beginning in January and February – Contact Liz Chamberlain to find out more - 402-462-6211.
  - **Falls Prevention:** Tai Chi and Stepping On classes – find out when the next classes will begin in your county! Contact Liz Chamberlain to find out more - 402-462-6211.

**Open Meeting Compliance:**

- Prior to this meeting a notice was posted in the newspapers in Adams, Clay, Nuckolls, and Webster Counties and that each member of the Board received a copy of the proposed agenda. The agenda for this meeting was kept continuously current and was available for public inspection at the South Heartland District Health Department, 606 N. Minnesota Ave, Suite 2, Hastings, Nebraska. This meeting is being held in open session.
- A copy of the Nebraska Open Meeting Law has been posted in this meeting room and is available for the public’s review.

**South Heartland’s Guiding Principles:**

- We are committed to the principles of public health and strive to be a credible, collaborative and stable resource in our communities.
- We seek to perform our duties in a courteous, efficient and effective manner within the limits of sound fiscal responsibility.
- We work together to create a positive environment, listening carefully and treating everyone with honesty, sensitivity, and respect.

**Board of Health Principles of Good Faith\*:**

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| <ul style="list-style-type: none"> <li>➤ Regularly attend and actively participate in board of health and committee meetings. If unable to attend, be able to provide a valid excuse for absence.</li> <li>➤ Ensure that time at board of health meetings is set aside for updates on public health problems and what the health department is doing, or needs to do, in regard to such challenges.</li> <li>➤ Have a thorough knowledge of the duties and provisions found in the bylaws and charter of the organization.</li> <li>➤ Involve others in health department functions and funding efforts, special events, and activities to promote and support programs and services.</li> <li>➤ Heed corporate affairs and keep informed of the central activities and operations of programs.</li> </ul> | <ul style="list-style-type: none"> <li>➤ Support majority opinions of the board.</li> <li>➤ Advocate for public health by communicating regularly with community leaders and elected officials about perceived needs and possible resources.</li> <li>➤ Ensure minimum statutory or technical requirements are met regarding filing annual report, withholding employee taxes, etc.</li> <li>➤ Record personal conduct and register dissents in the minutes, or by letter.</li> <li>➤ Avoid any semblance of self-dealing or enrichment; discourage any business transactions between directors and the organization.</li> <li>➤ Accept no pecuniary profits except that which is expressly provided in compensation or reimbursement within the bylaws or laws of the city, county, and state.</li> </ul> |
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\*Board of Health Handbook, page 32

## South Heartland District Health Department Strategic Plan 2020 - 2025

The South Heartland Strategic Plan (SP) is created by the Board and staff following completion of a Community Health Assessment and a Community Health Improvement Plan (CHA/CHIP/SP cycle). The 2019 strategic planning process included a review of the department's vision, mission and guiding principles, a visioning process, a SWOT analysis (**S**trengths, **W**eaknesses, **O**pportunities, and **T**hreats) and a discussion of three alternative future scenarios, followed by brainstorming to identify potential strategic actions. The SP is developed to support implementation of the CHIP and is linked to the Quality Improvement-Performance Management Plan and the Workforce Development Plan.

**Vision:** Healthy people in healthy communities

**Mission:** The South Heartland District Health Department is dedicated to preserving and improving the health of residents of Adams, Clay, Nuckolls and Webster counties. We work with local partners to develop and implement a *Community Health Improvement Plan* and to provide other public health services mandated by Nebraska state statutes.

### Guiding Principles:

- ❖ We are committed to the principles of public health and strive to be a credible, collaborative and stable resource in our communities.
- ❖ We seek to perform our duties in a courteous, efficient and effective manner within the limits of sound fiscal responsibility.
- ❖ We work together to create a positive environment, listening carefully and treating everyone with honesty, sensitivity, and respect.

### Goal 1: Obtain and Maintain PHAB Accreditation

#### Goal 2: Secure Financial Stability

#### Goal 3: Prioritize Services and Programs

#### Goal 4: Optimize Human Resources

#### Goal 5: Advocate the "Why" of Public Health

### Goal 1: Obtain and Maintain PHAB Accreditation

- A. Allocate staff and resources to support accreditation activities
- B. Communicate to board and staff the value of accreditation status for supporting strategic plan goals
- C. Communicate to partners, stakeholders and our communities SHDHD's accreditation status and the value of accreditation

### Goal 2: Secure Financial Stability

- A. Explore alternative funding avenues
  - Expand partner and stakeholder involvement
  - Implement fee for services
  - Develop integrated primary care/public health relationships supported with healthcare reimbursement
  - Request city/county support
  - Explore foundation and benefactor opportunities
  - Create a fundraising arm (501c3)
- B. Practice enhanced financial stewardship
  - Develop proactive approaches and policies
  - Conduct regular risk assessment and risk mitigation activities
  - Work with Nebraska DHHS on quality improvement of funding processes for local public health (timeliness/efficiency/appropriateness of solicitation types, reporting and documentation, payment processing, etc.)
  - Adjust internal processes and priorities to accommodate funding fluctuations (QI-PM)

- C. Advocate for state and federal policy change
  - Advocate for foundational public health services funding
  - Support Health Care Cash Fund sustainability initiatives
  - Partner with professional membership organizations on funding advocacy initiatives (Nebraska Association of Local Health Directors, NALHD; Friends of Public Health, and National Association of County and City Health Officials, NACCHO; and others)

**Goal 3: Prioritize Services & Programs**

- A. Provide leadership and serve as backbone organization for implementing the Community Health Improvement Plan (CHIP)
  - Recruit community partners to implement CHIP strategies, provide oversight to CHIP implementation and raise the visibility of the plan in our communities
  - Monitor implementation of the plan and success achieving targeted outcomes, encouraging the use of evidence-based practices and reliable, accurate and timely measures and data (Performance Management System)
- B. Narrow the scope of the department's services and programs
  - Maintain focus on prevention
  - Address health equity and disparities
  - Assure quality and effectiveness of programs (versus quantity of programs) (QI-PM)
- C. Use data effectively
  - Measure progress, prioritize and communicate success and value of programs and services (Performance Management System)
  - Analyze program financial feasibility and sustainability to support decisions to continue current or take on new programs

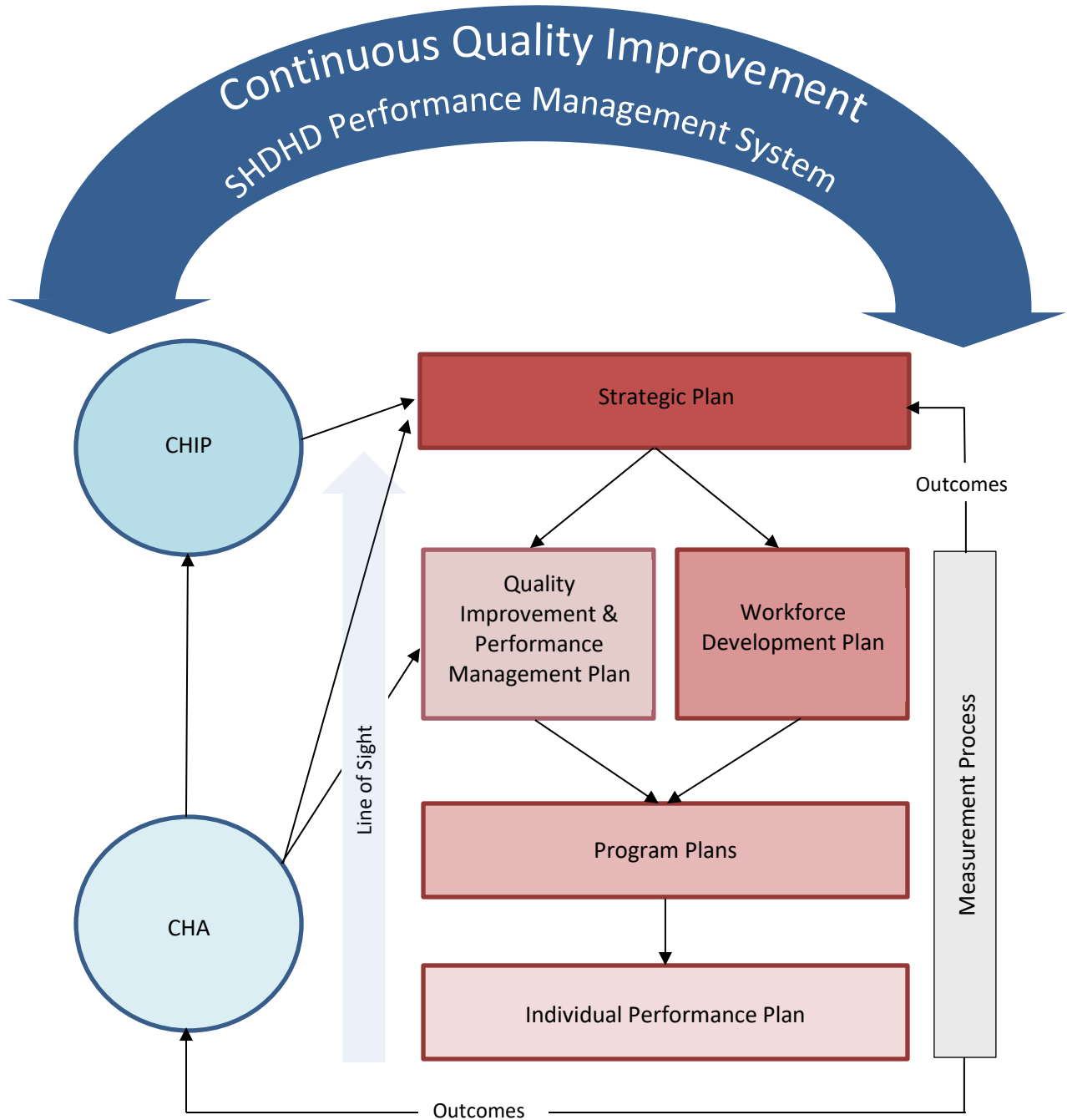
**Goal 4: Optimize Human Resources**

- A. Recruit community partners to implement CHIP strategies, provide oversight to CHIP implementation, and participate in CHIP performance management
- B. Support transitional strategies to move SHDHD toward level 5 of an organization wide culture of QI-PM
- C. Review and revise workforce development plan
  - Identify strategies to enhance Board and staff engagement
  - Identify strategies for recruiting and retaining a competent and diverse staff
  - Evaluate current state of organizational culture and set objectives to move toward desired state of organizational workforce culture
- D. Improve Board and staff knowledge and skills for quality improvement and performance management (QI-PM Goals)

**Goal 5: Advocate the "Why" of Public Health**

- A. Build capacity for advocacy
  - Develop relationships with local, state and federal policymakers
  - Strengthen relationships with and engage partners to advocate on behalf of local public health
  - Provide training in stakeholder analysis and persuasive communication for Board and staff to expand capabilities in effective communication (Workforce Dev Plan)
- B. Communicate the value of public health
  - Share advocacy messages and talking points with Board members to facilitate communication with their constituents and community members
  - Use health literate methods to share data and stories that communicate why we do what we do, our programs and services, our outcomes and successes, and our needs
  - Enhance public relations and visibility, expanding use of social media and other directed communications
  - Assure frequent, regular communication with city/county/state government and other key stakeholders

### SHDHD Performance Management System



## The Governance Functions

NALBOH is the national voice for the boards that govern health departments and shape public health policy. Since its inception, NALBOH has connected with board of health members and elected officials from across the country to inform, guide, and help them fulfill their public health responsibilities in their states and communities. Driven by a mission to strengthen and improve public health governance, NALBOH worked with CDC and other national partners to identify, review, and develop the following model of six functions of public health governance.

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**Policy development:** Lead and contribute to the development of policies that protect, promote, and improve public health while ensuring that the agency and its components remain consistent with the laws and rules (local, state, and federal) to which it is subject. These may include, but are not limited to:

- Developing internal and external policies that support public health agency goals and utilize the best available evidence;
- Adopting and ensuring enforcement of regulations that protect the health of the community;
- Developing and regularly updating vision, mission, goals, measurable outcomes, and values statements;
- Setting short- and long-term priorities and strategic plans;
- Ensuring that necessary policies exist, new policies are proposed/implemented where needed, and existing policies reflect evidence-based public health practices; and
- Evaluating existing policies on a regular basis to ensure that they are based on the best available evidence for public health practice.

**Resource stewardship:** Assure the availability of adequate resources (legal, financial, human, technological, and material) to perform essential public health services. These may include, but are not limited to:

- Ensuring adequate facilities and legal resources;
- Developing agreements to streamline cross-jurisdictional sharing of resources with neighboring governing entities;
- Developing or approving a budget that is aligned with identified agency needs;
- Engaging in sound long-range fiscal planning as part of strategic planning efforts;
- Exercising fiduciary care of the funds entrusted to the agency for its use; and
- Advocating for necessary funding to sustain public health agency activities, when appropriate, from approving/appropriating authorities.

**Legal authority:** Exercise legal authority as applicable by law and understand the roles, responsibilities, obligations, and functions of the governing body, health officer, and agency staff. These may include, but are not limited to:

- Ensuring that the governing body and its agency act ethically within the laws and rules (local, state, and federal) to which it is subject;
- Providing or arranging for the provision of quality core services to the population as mandated by law, through the public health agency or other implementing body; and
- Engaging legal counsel when appropriate.

**Partner engagement:** Build and strengthen community partnerships through education and engagement to ensure the collaboration of all relevant stakeholders in promoting and protecting the community's health. These may include, but are not limited to:

- Representing a broad cross-section of the community;
- Leading and fully participating in open, constructive dialogue with a broad cross-section of members of the community regarding public health issues;
- Serving as a strong link between the public health agency, the community, and other stakeholder organizations; and
- Building linkages between the public and partners that can mitigate negative impacts and emphasize positive impacts of current health trends.

**Continuous improvement:** Routinely evaluate, monitor, and set measurable outcomes for improving community health status and the public health agency's/governing body's own ability to meet its responsibilities. These may include, but are not limited to:

- Assessing the health status of the community and achievement of the public health agency's mission, including setting targets for quality and performance improvement;
- Supporting a culture of quality improvement within the governing body and at the public health agency;
- Holding governing body members and the health director/health officer to high performance standards and evaluating their effectiveness;
- Examining structure, compensation, and core functions and roles of the governing body and the public health agency on a regular basis; and
- Providing orientation and ongoing professional development for governing body members.

**Oversight:** Assume ultimate responsibility for public health performance in the community by providing necessary leadership and guidance in order to support the public health agency in achieving measurable outcomes. These may include, but are not limited to:

- Assuming individual responsibility, as members of the governing body, for actively participating in governing entity activities to fulfill the core functions;
- Evaluating professional competencies and job descriptions of the health director/health officer to ensure that mandates are being met and quality services are being provided for fair compensation;
- Maintaining a good relationship with health director/health officer in a culture of mutual trust to ensure that public health rules are administered/enforced appropriately;
- Hiring and regularly evaluating the performance of the health director; and
- Acting as a go-between for the public health agency and elected officials when appropriate.

All public health governing entities are responsible for some aspects of each function. No one function is more important than another. For more information about the six governance functions, please visit [www.nalboh.org](http://www.nalboh.org).

*Approved by the NALBOH Board of Directors - November 2012*

**N A L B O H**

National Association of Local Boards of Health

[www.nalboh.org](http://www.nalboh.org)