



**Board of Health**

**Clay County:** Activity Building, Clay County Fairgrounds, 701 N. Martin Avenue, Clay Center, Ne  
November 4, 2020 8:30 a.m.

AGENDA		
Apprx. Time	Topic, Lead Person	Expected Outcomes
8:30 (4')	Welcome & Opportunity for Public Comment – President Nanette Shackelford, Chair	1. Meeting Call to Order, Open Meeting Statement 2. Introductions / Roll Call 3. Approve Agenda – <b>Board Action</b> 4. Board Conflict of Interest Declarations 5. Public Comments
8:34 (1')	September 2, 2020 Board Meeting Minutes – Chair	Approve Minutes of September Meeting – <b>Board Action</b>
8:35 (30')	Introduction of Local Community Leaders Guest: Jeff Hofaker, City Administrator, Sutton, NE Guest: Julie Otero, Superintendent, South Central Unified Governance Function: <i>Partner Engagement</i>	1. Board hears from local leaders about public health initiatives, successes and concerns,
9:05 (20')	Coronavirus COVID-19 Situation Update and Mid-Action Review – M. Bever Governance Functions: <i>Policy Development; Legal Authority, Oversight</i>	1. Board is aware of SHDHD's emergency response roles and current status of COVID-19
9:25 (5')	Bi Monthly Report on 10 Essential Services from Staff Governance Functions: <i>Partner Engagement, Oversight</i>	1. Board is able to describe activities of the Department 1. Accept Bi-Monthly Report – <b>Board Action</b>
9:30 (10')	<b>Break (10 min)</b>	1. Stretch & Move!
9:40 (25')	Resolution in Response to COVID-19 Governance Functions: <i>Policy Development; Legal Authority, Oversight</i>	2. <b>Board Action</b>
10:05 (5')	Policy Committee – P. Meyer Policy Committee Minutes • Policy Review Process • New Policy: Travel Expense Reimbursement Policy (Audit Recommendation) Governance Functions: <i>Policy Development</i>	1. Approve Travel Expense Reimbursement Policy – <b>Board Action</b>
10:10 (5')	Finances – K. Derby / M. Bever Administration/Management - <i>PHAB Domain 11, SP Goal 4</i> • Financial Report (Current Funding Sources, Outstanding Invoices, Balance Sheets, Profit & Loss, Disbursements, Line of Credit Update) • Emergency Funds Request Process/Status • Grants/Funding/ Contracts/Subawards Status • Personnel Status Correction Governance Function: <i>Resource Stewardship</i>	1. Accept Financial Report – <b>Board Action</b> 2. Awareness of financial health /funding sources/ budgetary needs 3. Board approves personnel status correction – <b>Board Action</b>
10:15 (5')	Communications from Exec. Director – M. Bever • Executive Director's Report Q and A Governance Functions: <i>Oversight, Legal Authority</i>	1. Latest updates on key issues, personnel/staffing, funding opportunities, legislative advocacy, accreditation status, CHIP implementation, training and conferences opportunities, performance dashboard, ethics committee reports, etc.
10:20 (5')	Communications from Board Members - Chair • SALBOH update – M Hallock/M Bever • Community/County Updates - Board Members Announcements/Upcoming Events – All (see next page) Governance Function: <i>Partner Engagement</i>	1. Board members share their community/county public health activities/issues and community or professional meeting briefs and legislative days 2. Board members have information to promote or participate in upcoming events
10:25 (25')	Executive Session - Chair • COVID and Personnel – Chuck Neumann Governance Functions: <i>Oversight</i>	
10:45	<b>Adjourn</b>	<b>Board Action (Next Meeting – January 6, 2020, Nuckolls County)</b>

## 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. **October is Breast Cancer Awareness Month:** About 1 in 8 women born today in the United States will get breast cancer at some point. The good news is that most women can survive breast cancer if it's found and treated early. A mammogram — the screening test for breast cancer — can help find breast cancer early, when it's easier to treat.
6. **November 11 is Veteran's Day: Help us reach veterans and their family members in your community.** The alarming statistics regarding depression, suicide, and other negative health outcomes among Service Members and Veterans are well known. However, family members— who are often the first responders when Veterans and Service Members are in crisis—deserve and need the attention of the public health system. In Nebraska, recent data show that Veteran spouses and partners have more poor mental health days and are more likely to have been told that they have depression than the population as a whole. Also, Nebraska students with a military connection (through their parent or guardian) are significantly more likely to report that they considered attempting suicide, attempted suicide, and engaged in self-harm. They are also more likely to use alcohol, tobacco, and prescription drugs. [From NALHD's VetSET Flyer]
7. **Ongoing – all year 'round:**
  - **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.
8. **COVID-Safe Holiday Events:** We don't need to cancel holiday events due to COVID, but we should make some adjustments to keep our families and friends safe from COVID during holiday gatherings and activities. The Centers for Disease Control and Prevention (CDC) has tips and ideas on their website: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/holidays.html>.



**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

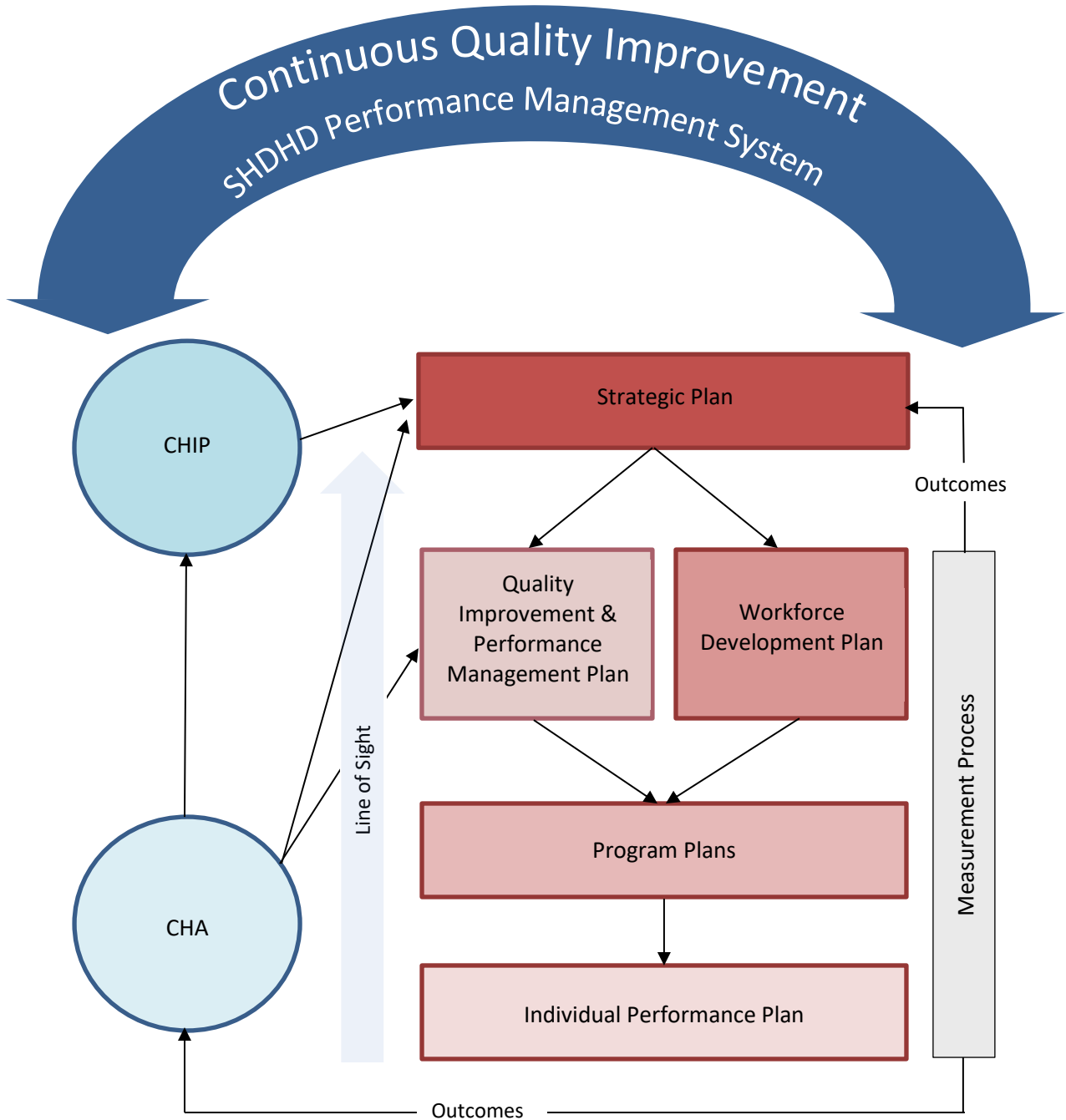
**Goal 4: Optimize Human Resources**

- 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)