



Cerro Gordo County Department of Public Health

Cerro Gordo County Board of Health
Friday, February 19th, 2016
MINUTES

Present: Barbara Kellogg, Vice Chair
Phil Dougherty
Carol Hillebrand

Absent: Dr. Johnson, Chair
Kristy Marquis, Secretary

Staff: Ron Osterholm, Health Director
Brian Hanft, REHS, MPA, Environmental Health Service Manager
Val Conklin, RN, Family and Community Health
Cathy Gomez, MBA, Finance & Administration Service Manager
Karen Crimmings, RN, CIC, Chronic Disease Prevention and Health
Promotion Service Manager
Jodi Willemsen, Acute Infectious Disease, Epidemiology and
Preparedness Service Manager
Kelli Huinker, Health Promotion Manager
Kara Vogelson, MHA, CPH, Organizational Development and Research
Manager
Kara Ruge, BS, Marketing & Public Information Officer
Betty Krones, PREP

Meeting was called to order at 12:37pm.

Service Award: Barb Kellogg presented Betty Krones with a 10 year service award.

Minutes: Minutes were approved for January 27th, 2016 meeting with a motion from Phil and second by Carol, motion passed.

2016 Board of Health Organizational meeting dates:

An email will be sent to all Board members with dates for the remaining months of 2016 to see what will work for everyone.

Old Business:

1. Action Items
 - a. None
2. Discussion Items
 - a. None

New Business:

1. Action Items
 - a. None
2. Discussion Items:
 - a. Board of Health Priority topics and issues for 2016 – The Board of Health members that were present felt the direction the health department was going in relation to the Strategic plan which was developed after last year’s planning session was positive direction. The board shared they feel the department needs to be able to response to “hot topics” as they come up during the year. The members of the board felt the department kept the public informed of these “hot topics” thru our press releases and emails to the board members and staff. There was some concern that water testing might become more of an issue with the increased awareness to lead in water supplies in different states around us. Brian added that lead based paint was probably more of issue around here than our water supplies. A suggestion that providing more support groups or information for other health issues that people face, like thyroid problems, could be helpful. Once people leave a clinical setting is when the questions come up, once they have returned to normal life situations.
 - b. Board of Health Retreat – possible dates in April or May, since there was just a strategic planning session last year the need for a regular retreat may not be necessary.
 - c. Betty Kroner, Personal Responsibility Education Program (PREP) administrator, presented an annual update. The health department is half way thru the 5 year program, which is a 9 month program that runs September thru May of each year. This grant was awarded to us because of the high percentage of pregnancies in young people. Currently there are 23 students participating from the Alternative High School, which is boys and girls, and Wise Guys, which is a male’s only program. These students will complete 20 hours of service learning. The students are making art packets for children who are in the hospital or children who have been removed from their home by the Department of Human Services. The students learned job interviewing skills while working with representatives from Goodwill.
 - d. Board of Health Roles and Responsibilities are established in the Code of Iowa, Chapter 137, Local Board of Health and implemented through the Iowa Administrative Code, Chapter 77, Local Boards of Health and further described in the Iowa State Association of Counties, “Legal Responsibilities of Local Boards of Health” document.. The county board of health is required to set up a contagious disease recording system, provide the state evidence that all children are immunized, provide supplies and services for persons under quarantine, requires every person with a sexually transmitted disease to be examined and treated, present HIV/AIDS information, develop public information regarding HIV/AIDS and work to prevent the spread of HIV. Local boards of health have the following powers and duties; enforce state health laws, make and enforce such reasonable rules and

regulations not inconsistent with law, rules become effective upon approval by the county board of supervisors by a motion or resolution, before approving any rule or regulation the board of health shall hold a public hearing on the proposed rule, provide names of Board of Health members and officers to the state, provide minutes of meeting and reports to the state department, provide population-based and personal health services for promotion and protection of the public health, no person shall be denied necessary services within the limits of available resources, provide environmental health services to protect and improve public health, issue licenses and permits in relations to the construction or operation of nonpublic water supplies or private sewage disposal systems. Local boards of health will consist of five members with one member being a licensed physician. Any vacancy must be filled as soon as possible after the vacancy exists for the unexpired term of the original appointment. A local board of health may, during a public health disaster request additional funds from the State of Iowa. Iowa's fund has a zero balance.

- e. Ron showed the Board of Health Self Evaluation Tool. Any board of health member should be able to answer these questions if we as public health have done our jobs correctly, orientating Board Members.
- f. FY 2016-2017 Mandate and Non Mandated Programs Budgeting process: The board of supervisors set the salary increase for county employees each year. Once this rate is known, salaries and benefits per staff are calculated for the new budget year. Identify required mandated programs per service section and determine personnel and non personnel resource needs cost at the required level of service. Identify non mandated service in order of priority ranking and determine personnel and non personnel resource needs cost to fulfill successful targeted program outcomes. Determine administration personnel cost and operational cost to support the needs of the service sections. Health Director will determine maximum allowable funding resource for program cost as established by the approved tax dollars support and projected revenue sources from grants and service delivery. Service managers will complete the line item budget worksheet for each program using the salary/benefits worksheet, mandated/non mandated programs commitments. Health Director will assess if all identified programs are adequately funded and determine if all costs are within maximum allowable funding resources. If costs exceed maximum allowable funding, the Health Director will execute the following options: lowest priority programs are eliminated or determine whether to use department's special fund to meet shortfall or request additional funding. The Health Department will not implement across the board budget cuts. Health Director asked the Board to review the mandated programs and provide input on priority ranking.

Core Team Dialogue

Katelyn Nicholson was been hired as our new Public Health Dietitian.

There is one positive case of Zika virus in the state.

Core Team was adjourned at 2:05pm.

Health Director/ Board of Health Discussion

Discussed Succession of Command and the Health Director provided a brief overview. Discussed the duration of time it takes for a new Board member to reach a comfort level of understanding. Expand the discussion regarding Board's responsibilities and role.

Health Director was adjourned at 2:15pm.

Board of Health meeting was adjournment at 2:16pm.

No items for discussion

Next Board of Health meeting is March 11th, 2016 at 12:30pm in the Edna McCaulley Conference Room at Public Health.

Respectfully Submitted,



Kristy Marquis
Secretary