

PUBLIC HEALTH ASSOCIATION OF NEBRASKA



Local Health Department Guide to Roles and Responsibilities

NEBRASKA PARTNERSHIP OF
LOCAL HEALTH DIRECTORS SECTION

NEBRASKA BOARDS OF HEALTH SECTION

September 2003



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Guide to
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INTRODUCTION

Shakespeare wrote, "Above all else, to thy own self be true." As a local health director and Board of Health member, a person is charged with totally honest presentation to his/her community of the important role that public health has to play.

AUTHORITY OF PUBLIC HEALTH IN NEBRASKA

In Nebraska, the Authority of Public Health can be found in the Nebraska State Statutes – Article 16, Section 71-1601 through 71-1636.

STATE APPROVED LOCAL FULL-TIME PUBLIC HEALTH SERVICE.

The Board of Health is responsible for hiring the Local Health Director.

LAW 71-1626. A county, district, or city-county health department shall mean a state-approved local full-time public health service (1) utilizing local, state, federal, and other funds or any combination thereof, (2) employing qualified public health medical, nursing, environmental health, health education, and other essential personnel who work under the direction and supervision of a full-time qualified medical director or of a full-time qualified lay administrator, are well-trained in public health work, and are assisted at least part time by at least one medical consultant who shall be a licensed physician, and (3) conducted in conformity with the rules, regulations, and policies of the Department of Health and Human Services, the Department of Health and Human Services Regulation and Licensure, and the Department of Health and Human Services Finance and Support. The medical director or lay administrator shall be called the health director.

WHAT IS A BOARD?

Local Boards of Health are the most powerful part of an organization. They set policies, hire and fire the local health director, review all operational data and they can challenge any organizational activities. Most importantly, they control expenditures.

TYPE OF BOARD

Nebraska has Policy-Making Boards. They are a governing body for organizations; make policy decisions regarding purposes, functions, goals and activities; and select, employ and evaluate the local health director who reports to the board and is responsible to it.

SIX FUNCTIONS OF A BOARD

- 1. Administration:**
The board defines the organization's purpose by establishing a clear statement of mission.
 - Determines policy of the organization.
- 2. Program Planning and Budgeting**
The board defines specific needs to be addressed and target populations to be served.
 - Establishes goals and objectives in order of priority, consistent with the mission.
 - Develops realistic budget to support the program plan.
 - Adapts the program plan and budget annually.
- 3. Evaluation of Organizational Effectiveness**
The board regularly evaluates the accomplishments of the program plan.
 - Assesses the achievement of the overall mission.
 - Evaluates the responsiveness to new situations.
 - Evaluates the degree of effectiveness of volunteer leadership.
- 4. Retention and Evaluation of the Local Health Director**
The board hires the local health director.
 - Establishes compensation and conditions of employment.
 - Evaluates the local health director's performance at least once per year.
- 5. Financial Stewardship**
The board must take a lead in the development of financial resources.
 - Exercises fiduciary care of the funds entrusted to the agency's use (approve budgets, audits, appropriate policies and controls).
 - Engages in sound long range financial planning (tomorrow's money).
- 6. Constituting the Community Connection**
The board represents the public interest.
 - Represents the interests of particular publics.
 - Represents the organization to the community.
 - Affords community sanction to the agency and its programs.

KEY QUESTIONS

1. Does your board devote most of its time to developing and setting policies for your agency? Is your policy manual current?
2. Does your board have working committees to initiate and monitor much of the board's work?
3. Does a current job description exist for your board members?
4. Does your board have a systematic planning process?
5. Is your board knowledgeable about current issues in public health?
6. Does your board have a mission statement?
7. Do your board members understand their responsibility for the finances of your organization?
8. Are your bylaws reviewed regularly and do you operate in accordance with them?
9. Are relationships between board members and staff members characterized by openness, trust and mutual respect?

QUESTIONS A BOARD SHOULD ASK ITSELF

1. WHAT DO WE WANT TO ACCOMPLISH? (Setting policy and establishing goals)
2. WHAT IS THE ROAD MAP TO FOLLOW? (Formulating guidelines, making plans, suggesting alternatives)
3. HOW WILL WE PAY FOR IT? (Getting and spending money)
4. HOW DO WE REACH OUR GOALS? (Establishing priorities, delegating responsibilities)
5. DID WE SUCCEED OR FAIL? (Evaluating)

A LOCAL HEALTH DIRECTOR EXPECTS A BOARD WILL:

1. Counsel and advise using professional expertise and familiarity with the community.
2. Consult with the Local Health Director on issues the Board is considering.
3. Delegate responsibility to the Local Health Director for all administrative functions.
4. Refrain from micromanaging administrative details.
5. Recognize that agency staff is responsible to the Local Health Director.
6. Share all communications with the Local Health Director.
7. Support the Local Health Director and staff in carrying out their professional duties.
8. Support the Local Health Director in all decisions and actions consistent with policies of the Board and the standards of the agency.
9. Hold the Local Health Director accountable for the supervision of the agency.
10. Evaluate and recognize the work of the Local Health Director.

WHO IS RESPONSIBLE? – BOARD OR LOCAL HEALTH DIRECTOR

AREA	BOARD	LOCAL HEALTH DIRECTOR
Long Term Goals (More than 1 yr.)	Approves	Recommends and provides input
Short Term Goals (Less than 1 yr.)	Monitors	Establishes and carries out
Day to Day Operations	No Role	Makes all management decisions
Budget	Approves	Develops and recommends
Capital Purchases	Approves	Prepares requests
Decisions on building, renovations, leasing, expansion	Makes decisions and assumes responsibility	Recommends (could sign contracts if given authority)
Supply Purchases	Establishes policies and budget	Purchases according to policy and maintains adequate audit trail
Major Repairs	Approves	Obtains estimates and prepares recommendations
Minor Repairs	Establishes Policy on Dollar Amount	Authorizes repairs up to prearranged amount
Emergency Repairs	Works with Local Health Director	Notifies chairperson and acts with concurrence from the chair
Cleaning/Maintenance	Oversight only	Sets up schedule
Fees	Adopts Policy	Develops fee schedule
Billing, Credit, Collection	Adopts Policy	Proposes policy and implements
Hiring Staff	No Role (Approves new positions & promotions)	Approves all hiring
Staff Development and Assignment	No Role	Establishes
Firing Staff	No Role	Makes termination decisions
Staff Grievances	No Role	Grievances stop with Local Health Director
Personnel Policies	Adopts Policies	Recommends and administers
Staff Salaries	Allocates Line Item in Budget	Approves salaries with recommendations from supervisory staff
Staff Evaluations	Evaluates Local Health Director only	Evaluates other staff

A BOARD EXPECTS ITS LOCAL HEALTH DIRECTOR WILL:

1. Serve as Local Health Director of the agency.
2. Advise the Board on issues under discussion.
3. Develop and recommend policies for consideration.
4. Effectively implement Board policies.
5. Keep the Board informed fully and accurately on activities of the agency.
6. Make professional recommendations on all problems and issues being considered by the Board.
7. Develop the agency budget with the finance committee and keep the Board advised of budget problems.
8. Recruit and retain the most competent personnel and supervise accordingly.
9. Devote time to professional development for the staff and Local Health Director.

EFFECTIVE BOARD MEMBERS ARE:

Committed: Dedicated to the work of the agency and its vision for the future.

Involved: Attend meetings, works in partnership with staff, lends their skills, expertise and talents through committee participation.

Informed: Educate themselves about policies, procedures, and budgets.

Challenged: Seeks to learn new skills.

Trained: Orientation program provided for new members.

Accountable: Honors commitment.

CHARACTERISTICS OF AN EFFECTIVE BOARD MEMBER

No one dominates the board	Community interest
Work with the local health director	Constantly look for ways to improve
Collective decision-making	Build relationships
Learn job duties	Do all things with integrity
Problem-solving	Be receptive to public input
Develop a unifying purpose	Be careful of bias
Open-minded	Focus on long-range planning
Develop a sense of camaraderie on the board	Make decisions based on facts
Willing to compromise	Pledge to become educated
Accept personal sacrifices	Does not micromanage

QUESTIONS FOR BOARD CANDIDATES

1. What issues are most important to you?
2. Why do you want to serve on this board?
3. How much time and energy can you contribute?
4. What skills do you bring to the board?
5. What are your expectations from board service?
6. Are you willing to attend board training programs and board retreats?
7. What kind of people do you like to work with?
8. What attributes and characteristics do you think are necessary to become an effective board member?

JOB DESCRIPTION FOR BOARD MEMBERS

1. Be aware of the goals of the agency. Know its service objectives.
2. Know the policies, guidelines and rules of the agency for both program and the board.
3. Be regular and punctual at board and committee meetings. If unable to attend, give early notice to the appropriate staff member.
4. Be involved at meetings and ask questions. Discuss and participate in the decision-making. When you are not clear on the facts, ideas, or suggestions, ask for clarification. Be careful not to take too much of the meeting time for items that could be accomplished before or after the meeting.
5. Be informed about the issues in order to discuss them responsibly.
6. Speak out on ideas you do not favor. Silence is often interpreted as consent.
7. Know and understand the roles and responsibilities of the board and staff.
8. Know and maintain the lines of communication between the board and staff.
9. Understand the financial statements presented. As a board member, you are responsible for the financial stability of the agency.
10. Maintain the confidentiality of board members.
11. Participate in recruiting new board members.
12. Support and assist in identifying prospective sources of funding.

AS A BOARD MEMBER YOU SHOULD:

1. **BE INFORMED** – Know what your board is about and what its mission is to your community.
 - a. Become familiar with all of the programs and services provided.
 - b. Spend time with your local health director to learn of their goals and roles.
 - c. Assess the needs of your community.
2. **PROMOTE SERVICES** – Evaluate what is being done to inform the community.
 - a. Create a marketing plan suitable to local health department resources.
 - b. Refer to the 10 essential services.
3. **BE COMMUNITY CONSCIOUS** – Offer programs that are tailored for specific needs that will make the community aware that you are there.
 - a. Establish programs aimed at being accessible to the public.
 - b. Streamline handling of nuisance complaints.

APPENDIX AND REFERENCES

ESSENTIAL PUBLIC HEALTH SERVICES

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal health care workforce.
9. Evaluation effectiveness, accessibility and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.

MODEL BOARD MEMBER JOB DESCRIPTION

TITLE: Member, _____ Board of Health

PURPOSE: To serve the board as a voting member, to develop policies, long-range plans, approve procedures and regulations for the operation of the health district, to monitor finances, programs and performance of the health district.

ATTENDANCE:

- Regularly attend meetings as scheduled
- Attend standing committee meetings if a member
- Participate as an ad hoc committee member, if appointed
- Attend board retreats, in-service workshops and other board development activities
- Attend and participate in special events as needed

OBLIGATIONS:

- Establish policy
- Hire, supervise, and evaluate the local health director.
- Monitor finances
- Maintain and update long-range plans

DUTIES:

- Attend meetings and show commitment to board activities
- Be well-informed on issues and agenda items in advance of meetings
- Contribute skills, knowledge, and experience when appropriate
- Listen respectfully to other points of view
- Participate in organizational decision-making
- Assume leadership roles in all board activities, including fund-raising
- Represent the health district to the public and to private industry
- Educate yourself about the needs of the people served

Board Member Signature

Date

Local Health Director's Signature

Date

MODEL BOARD CANDIDATE INTERVIEW FORM

Please fill in the responses of each board candidate, and then compare his or her qualifications to those we are seeking.

Name of candidate:

Employer:

Position:

Address:

Home Phone: _____ **Business Phone:** _____

Email: _____

QUALIFICATIONS NEEDED:

1. List any past or present involvement with this board.
2. What knowledge do you have about this agency, its history, philosophy, programs, services?
3. What experience have you had on other boards?
4. Would you briefly describe what you believe our mission to be?
5. What is your belief about service to the community?
6. What do you understand the responsibility of a Board of Health member to be?
7. If asked, would you accept appointment to the Board? Why or why not?

Signature of Interviewer

Date

COMMON PUBLIC HEALTH TERMS

Assessment: Regular and systematic collection, assembly, analysis and the availability of community health information.

Assurance: Public health agencies assure that necessary services are provided to achieve community goals and objectives for health people.

Capacity Standards: Statements of what public health agencies must do as part of ongoing daily operations to adequately protect and promote health, prevent disease, injury and premature death.

Chlamydia: A sexually transmitted disease transmitted by a particular microorganism.

Core Functions: The three basic functions of the public health system: assessment, policy development, and assurance.

E-Coli: Common species of bacteria that occasionally results in gastrointestinal disease.

Environmental Health: An organized community effort to minimize the public's exposure to environmental hazards and preventing transmission of the disease or injury agent.

Epidemic: The occurrence in a community or region of disease cases in excess of expectancy.

Epidemiology: The study of disease and injuries in the human population, their distribution and determinants.

Fee-for-service: A charge made for each unit of health service, usually set by the provider. Some service fees may be controlled by the State. Fees for state mandated programs are determined by cost methodology set by the State.

Foodborne Illness: Illness caused by the transfer of disease organisms or toxins from food to humans.

Groundwater: Water beneath the earth's surface between saturated soil and rock that supplies wells and springs.

Health People 2010: A prevention initiative that presents a national strategy for improving the health of America.

Human Immunodeficiency Virus: The retrovirus (and RNA based virus) which causes AIDS.

Incidence: The number of new cases of a specific disease diagnosed or reported during a defined period of time.

Infectious Disease: A disease caused by organisms that cause infection in a human host and may be communicable (contagious) to other persons, animals or through other intermediaries.

Local Board of Health: Governing or advisory bodies who are appointed to protect and improve the health of the community. Appointments are made in accordance with the Nebraska Statutes Article 16, Section 71-1601 through 71-1636.

Managed Care: Health care provided within a system using a defined network of providers.

Medicaid: A program authorized under Title XIX of the Social Security Act to provide medical services to clients who meet eligibility requirements.

Medicare: Federal insurance program covering delivery of medical services to people ages 65 or older.

Morbidity: Incidence of disease or the state of being diseased.

Mortality: Incidence of death or the state of being deceased.

Outcome Standards: Long-term objectives that define optimal, measurable future levels of health status, maximum acceptable levels of disease, injury or dysfunction or prevalence of risk factors.

Particulate Matter: Matter in the form of small liquid or solid particles.

Point Source: Sources of pollution that can be readily identified because of their location of origin.

Policy Development: The process whereby public health agencies evaluate and determine health needs and the best way to address them.

Population-based: Pertaining to the entire population in a particular area.

Prevention: Actions taken to detect and reduce susceptibility or exposure to health problems.

Promotion: Health education and the fostering of health living conditions and lifestyles.

Public Health: Prevention of disease, injury or disability and promotion of good physical and mental health.

Public Health District/Department: Local (county, city combined city-county or multi-county) health agency with oversight and direction from local boards of health who provide health services through out the defined geographic area.

Quality Assurance: Monitoring and maintaining the quality of public health services through licensing and discipline of health professionals, licensing of health facilities and the enforcement of standards and regulations.

Risk Assessment: To identify and measure the presence of causes and risk factors that are thought to have a direct influence on the level of a specific health problem, based on scientific evidence or theory.

Risk Factor: Any personal or societal condition that leads to the possibility of a problem.

Sexually-transmitted Disease: Infectious disease that can be transmitted by sexual contact.

Standards: Accepted measures of comparison having quantitative or qualitative value.

Sudden Infant Death Syndrome (SIDS): Unexplained sudden death of an infant under one-year of age.

Surface Water: Any fresh water located above ground, such as rivers, lakes, and ponds.

Third-party Payment: Payment for health services provided through public or private insurance.



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