

**November 11, 2015 Board of Health Meeting
County Courthouse, Room G-302**

The Board of Health convened in open session at 5:17 pm
The meeting was called to order by Mery Price

**Board Members Present
Quorum is reached**

Mery Price
John Paddock
Gerald Wilkie
Kathy Mitchell
Elizabeth Spencer
Jennifer Eddy
Donald Bodeau-5:20 pm

**Board Members
Absent:**

Blair Johnson

Staff Members Present:

Lieske Giese
Nick Zupan
Gina Holt (recorder)

Additional Staff Members:

Paulette Magur

Public:

Order of Agenda Request to pull items from Consent Agenda

- None

Public Comment:

- None

Consent Agenda

- a. Approval of minutes from October 21, 2015

Motion to approve Consent Agenda: John Paddock

2nd Motion: Kathy Mitchell

Motion Carried: Yes (unanimous vote)

Board member informational items

- a. Review BOH Strategic Plan
 - Have been including BOH strategic plan in with the board packets each month
- b. Overview

Goal today is to share basic information and get feedback from the BOH. The Health Department has been focusing on looking at program and services and measuring them to see how we can get to our mission and vision. The work so far has been focused on what we are currently doing and not necessarily what should we be doing. That is the next step. Topics that will be discussed today:

- What does Performance Management mean for the local Health Department?
- Review of Health Department program prioritization process
- Review of draft Performance Measures

Lieske outlines the contents of packet:

- The Governance Functions: This is just a reminder of the role of the BOH per NALBOH
- High Achieving Governmental Health: Resolve is a national group of key public health figures. The High Achieving Governmental Health Department document sets the stage for the work

that we do in the future. What are the priorities of the future, what is the local governmental niche, and who do we work with?

- Transforming Public Health-is a document that has been seen a number of times, but is still very pertinent
- Foundational local health department capabilities-National description of core services/capabilities of local health departments
- ECCCHD Strategic Plan-as we talk about programs and services and what we are measuring we looked back at the vision and goals of the Strategic Plan
- Public Health Foundation Performance Management Framework – Important resource describing management of organization and not individual employees. It is about having standards, developing measurements for the standards, analyzing data, and then doing quality improvement work to get better in areas where not meeting standards. Having a performance management plan is part of the requirement for accreditation.
- Performance measures are currently required by the county budgeting process. Currently we have listed for the county 19 programs, 158 output/process measures and 88 outcome measures. The ECCCHD has historically used these measures only as a reporting tool for the county – providing mid-year and end-of-year data as required. The volume of measures and lack of use of the measures to evaluate actual performance have been a challenge. We are trying to get down to a manageable amount of measures for county requirements but also to use in operations to make sure that we are on course.
- ECCCHD Program Priorities-The organization has spent time identifying programs and services and compiled 6 “buckets of service” that include 39 programs and 264 services. This process started at the service level and prioritized based on the definitions provided in the rubric. The team thought it was a great starting point to see what influences decisions about what we do as an agency but there are additional edits that are needed to the tool.
 - The higher the score the higher the priority. The average was calculated throughout the program level
 - Within the programs most of the services scored consistently –will continue to work on the document at a program and agency level
 - Using these tools we development a performance management measures
- ECCCHD Draft Performance Measures – using the framework of Effort and Effect Measures the agency has drafted “Headline Performance Measures” for each of the 6 Core Program Areas. Many other measures will be used internally by the health department to monitor program performance but key Performance Measures will be identified to use to report to BOH, County budgeting process, and general public based on this draft. Next step is to finalize these for a January 1 start. Ideally 3-5 measures per program will be used.

c. Board of Health feedback on Performance Measures

Feedback on identified current priority programs:

- Do the buckets represent cross functional work?
- Safe food and water-possibly adding air quality into that bucket. Food, water, and air seem to fit together
- Board members express that the six buckets are a good place to start

What’s missing?

- Building the foundations for tomorrow
 - How do we address priorities in the future?
 - Workforce development
- planning for the future
- Health in all policies

- Connect built environment-work this topic into the existing buckets
- Looking at prioritization matrix to see if there are any ways to define additional measurements such as vulnerable population and population impact

Feedback on what does the future look like

- Healthy Home and Places-Gun violence and solutions to create a safe environment.
- Healthy Homes and Places-Rental registration
- Chronic Disease Prevention-Diabetes
- Chronic Disease Prevention-What is our place as the health department? Is it taking on a leadership role with teaching the community, or is it delivering hands on services? How can we coordinate public health in clinical services?
- Develop framework for broad community collaboration. Should the Health Department take a leadership role in developing the framework in which the community partners can work?
- Health Impact Assessment-How does public health take a leadership role?
- Taking a role in health benefits and access to health services
- Do we single out certain diseases such as Asthma and obesity or keep it broad?
- Oral Health-are we advocating to have the right people to develop the workforce for our community
- Advocacy and Lobbying-is it foundational or part of the health in all policies
- Addressing health disparities

Feedback on proposed measures:

- Is anybody better off is a key question to be asking when looking at outcome measurement
- What is trending-if year over year things stay static or if there have been increased services driven by need
- The outcome can't be swayed by small numbers
- How can you measure the amount of testing done along with the reduction in risk
- How are we utilizing the network of care data when measuring is anyone better off? Comb through network of care data and identify the 4-5 areas of concern and see if the health department is addressing them
- Has the quality of housing improved? If the housing stock is better how can you measure the reason why the outcome is changing?
- If a new problem been uncovered, how do you begin conversations with new groups of people (collaboration)
- How do we measure prevention
- Look at the science behind why it says it is a public health issue-example radon exposure
- Alcohol-compliance checks are a measure of success
- Reducing smoking during pregnancy-being enrolled in first breath is a great tool

Requests from Board members for future agenda items to be given consideration

- a. None

Next scheduled BOH meeting is December 9, 2015 at 5:15 p.m.

Merey Price adjourned the meeting at 7:02 p.m.