Board of Health
March 9, 2015
Health Dept Ed Room
10am-11:30am

Board Present: Robin Cory, Steve Custer, Becky Franks, Tracy Knoedler, Gretchen Rupp, Buck Taylor
Not Present: Jane Mahlow, Joe Skinner, Carson Taylor
Staff Present: Sarah Acker, Matt Kelley, Toni Luckier, Tim Roark, Jill Steeley, Stefanie Tassaro

Meeting called to order at 10am

- **Continued discussion in preparation for the March 24-25 Accreditation Site Visit**

Sarah provided the Board with some information about what to expect from the site visitor meeting.

  - A summary of the site visitors that are from similar sized local health depts.
  - Board to meet with the site visitors at 10am, Mar 25th
    - Board relationship with the health department, the community, and how the board operates

Matt: described **Domain 12 - Governing Entity**, of which he is the domain lead

He discussed that the site visitors want to see there is a give and take between the department and the Board and we are working together (actions of the Board together with the department).

  - How does the department keep the Board apprised and up to date? How does the department update the board on the performance of the department?
  - Document that the health department is monitoring the actions of the board
    - Demonstrated in a log kept of Board actions, senior staff reviews this log, and
    - In a matrix listing ongoing set of meetings where staff is providing feedback to the board

  - Understand mandated responsibilities – what are the department’s job is and the Board’s job.

According to bylaws Matt is secretary of the board

The Board is represented on the LWQD Board; a city commissioner and a county commissioner sit on the Board of Health - examples of collaboration.

**Matt provided the broad picture of the department – what are the stories?**

Robin discussed the editorial policy written and agreed upon - a Board member could write an editorial that would be signed by the entire Board.

Becky asked about the strategic plan – did one expire? Buck remembers a planning session at the chamber that developed into a three-year plan. Before Matt’s time.

Matt described the current strategic plan and how it came to be:

- the community assessment process; PRC survey; community health improvement plan (access, collaboration, healthy behaviors)
- Staff/Board strategic plan

Program annual performance plans are monitored 3-4 times per year towards its goals; QI is used to drive the performance plans;
How do we communicate with the Board? Timely manner? Clear?

And ways we do this, for instance:

Morgan Court presentation to the Board

The work Denise Moldroski is doing in collaboration with DEQ to assess the lagoons, we come to the Board and the Board is involved with the corrective action

The SPARC list to address WWTS of concern and specific examples of success: Hebgen Lake Estates, Korner Klub,

Professional help provided by EHS via educational sessions to the board;

**Conversation about board concerns, questions . . .**

Four Board members will meet with the visitors: Board chair, vice chair and 2 others

Board already thinks in terms of stories,

Matt is not nervous, felt no problem with the board communication – just wants to demonstrate.

The Board commented they always see press releases ahead of time and Becky feels the Board is part of the conversation so nothing surprises.

Buck noted the long history of collaboration by this Board.

Matt asked the Board to think about work at UHC, Ebola and other board member involvement:

- Buck in UHC
- Gretchen & Steve in LWQD
- Robin and Becky in community meetings

Any involvement beyond the health department

This week will figure out who will be part of the site visit meeting.

Steve wants to know the 12 domains. **Matt will send a broad overview** (10 essential services and 2 more)

Wants some idea of what will be asked;

Jill reached out to other counties about **some questions the site visitors asked and will compile and distribute.**

Yellowstone, RiverStone and Missoula health departments are accredited. MT State submitted, and others are moving in the direction.

What does accreditation provide us?

- Eventually help with funding - grants may ask if accredited; or may require for some grants;
- For most part, having a workforce development plan requirement helped us create one.
- Better department for going through it
- Be proud to demonstrate we are meeting the 10 essential services and we are standardized.

Only 50 counties in the nation are accredited. Intent is to have all health departments be accredited, providing same, standardized services. 10 essential services - what does that mean and demonstrate.