



Board of Health Meeting

Tuesday, November 15, 2022, 9:00 a.m.
13307 Miami Lane, Caldwell, ID 83607

Public comments specific to an agenda item for the November 15, 2022 Board of Health meeting can be submitted at: <https://www.surveymonkey.com/r/BoH11152022> or by mail to: SWDH Board of Health, Attn: Administration Office, 13307 Miami Lane, Caldwell, ID, 83607. The period to submit public comments will close at 10:00 a.m. on Monday, November 14, 2022.

***Meeting Format :** In-person attendance at the meeting will be limited. Anyone unable to attend the meeting in-person is invited to view the meeting on their own device through live streaming available on [the SWDH YouTube channel](#).

Agenda

A = Board Action Required

G =Guidance

I = Information item

9:00	A	Call the Meeting to Order	Vice-Chairman Kelly Aberasturi
9:02		Pledge of Allegiance	
9:03		Roll Call	Vice-Chairman Kelly Aberasturi
9:05	A	Request for Additional Agenda items; Approval of Agenda	Vice-Chairman Kelly Aberasturi
9:10		In-Person Public Comment	
9:15	I	Open Discussion	SWDH Board Members
9:20	A	Approval of Minutes – October 25, 2022	Vice-Chairman Kelly Aberasturi
9:25	I	Introduction of New Employees	Division Administrators
9:30	I	October 2022 Expenditure and Revenue Report	Troy Cunningham
9:40	G	Expenditure and Revenue Report Input	Troy Cunningham
9:50	I	Being Responsive to Community Needs	Nikki Zogg
10:05	G	Board of Health Leadership Positions	Vice-Chairman Kelly Aberasturi
10:15	A	Approval of 2023 Board of Health meeting schedule	Nikki Zogg
10:20	A	Approval of Line of Succession Policy	Nikki Zogg
10:30	G	Board of Health Member Orientation Input	Nikki Zogg
10:40	A	Calendar Year 2022 Opioid Settlement Funds Use	Nikki Zogg
10:55	I	Director's Report	Nikki Zogg
		- Youth Crisis Center Location	
11:00		Break	
11:30		Public Health Symposium	

NEXT MEETING: Tuesday, December 20, 2022 – 10:00 a.m. **

****Please note new start time for winter meeting hours.**

Healthier Together

13307 Miami Lane • Caldwell, ID 83607 • (208) 455-5300 • FAX (208) 454-7722



BOARD OF HEALTH MEETING MINUTES

Thursday, October 25, 2022

BOARD MEMBERS:

Payette County Board of Health Representative – vacant
Lyndon Haines, Commissioner, Washington County – present
Keri Smith, Commissioner, Canyon County – present
Kelly Aberasturi, Commissioner, Owyhee County – present
Viki Purdy, Commissioner, Adams County – present
Sam Summers, MD, Physician Representative – not present
Bryan Elliott, Commissioner, Gem County – present

STAFF MEMBERS:

In person: Nikki Zogg, Katrina Williams, Josh Campbell, Colt Dickman, Charlene Cariou, Doug Doney

Via Zoom: Troy Cunningham, Jeff Renn

GUESTS: Bekah Bowman, Betina Yore, Elisa Higbee - Court Appointed Special Advocates; Caroline Bell, Lifeways

CALL THE MEETING TO ORDER

Chairman Bryan Elliott called the meeting to order at 9:05 a.m.

PLEDGE OF ALLEGIANCE

Meeting attendees participated in the pledge of allegiance.

ROLL CALL

Commissioner Aberasturi – present; Dr. Summers – not present; Chairman Elliott – present;
Commissioner Purdy – present; Commissioner Haines – present; Commissioner Smith – present.

REQUEST FOR ADDITIONAL AGENDA ITEMS; APPROVAL OF AGENDA

Chairman Bryan Elliott asked for additional agenda items. Board members had no additional agenda items or changes to the agenda. Nikki asked to add discussion of opioid settlement funds to the Director's Report. Nikki also asked Board members to please plan to disregard the action item listed for the Youth Crisis Center Facility Lease Negotiations. This topic will instead be discussed in the Executive Session as noted on the agenda.

MOTION: Commissioner Haines made a motion to approve the agenda with the requested changes. Commissioner Aberasturi seconded the motion. All in favor; motion passes.

IN-PERSON PUBLIC COMMENT

One member of the public attended. No public comment was made.

OPEN DISCUSSION

Nikki announced that Payette County Commissioner and Board of Health Trustee and Executive Council member Georgia Hanigan has resigned her positions. Board members discussed board vacancies and

how those are filled. Nikki explained that by statute each county recommends an individual to fill their county's slot on the Board. The other five counties then vote to confirm that board member. Board members also discussed how to best fill the Executive Council seat and agreed to wait until the new calendar to appoint a board member for that position.

APPROVAL OF MEETING MINUTES – SEPTEMBER 22, 2022

Board members reviewed meeting minutes from the meeting held September 22, 2022.

MOTION: Commissioner Smith made a motion to approve the September 22, 2022, Board of Health meeting minutes as presented. Commissioner Haines seconded the motion. All in favor; motion passes.

INTRODUCTION OF NEW EMPLOYEES

Division administrators introduced new employees.

SEPTEMBER 2022 EXPENDITURE AND REVENUE REPORT

Troy Cunningham, SWDH Financial Manager, presented the September 2022 Expenditure and Revenue Report. The target at this point in the fiscal year is 25%. Troy spoke with DHW regarding the crisis CFAC funding and was directed to identify COVID-focused options to expend the funds. Funds will not be returned to DHW.

VEHICLE DONATION REQUEST

Caroline Bell, Grant Writer from Lifeways, attended the Board meeting to request that the Board consider donating a fleet vehicle to Western Idaho Community Crisis Center for which SWDH serves as the administrator and Lifeways as the contractor. The vehicle would be used for client transportation purposes. She explained that transportation is difficult particularly in outlying areas such as Washington County, Payette, and Fruitland that do not have bus routes. Ride services that offer planned rides only are not feasible for crisis situations. Data has only been collected since February 2022 but indicates a large dollar amount paid out to medical transport services. This type of transportation is costly and not timely.

Valley Regional Transit (VRT) ride on demand service is utilized, particularly in non-acute crisis situations. The nearest bus stop is approximately five minutes away by walking. Caroline explained that VRT is available only during regular weekday business hours. The crisis center does have access to bus passes. The bus is not feasible for case-specific client needs such as cognitive challenges.

The biggest advantage of the crisis center providing their own transportation is response time. Medical transportation services often take several hours to respond to an individual in crisis. The crisis center has not yet determined the maintenance, insurance, fuel, and driver staffing cost but anticipate a donated vehicle will lead to better response times and less cost.

Nikki and Troy have reviewed the statute surrounding donations and have confirmed that donations to a 501(c)(3) are allowed.

MOTION: Commissioner Haines made a motion to initiate the process to donate an outgoing sport utility vehicle to Western Idaho Community Crisis Center. Commissioner Smith seconded the motion. One opposed; motion passes.

Emily Straubhar will provide further information on the cost benefit analysis of the vehicle donation.

COURT APPOINTED SPECIAL ADVOCATES (CASA) OVERVIEW

Bekah Bowman, Betina Yore, and Elisa Higbee from Court Appointed Special Advocates (CASA) explained the purpose and goals of the program that exists to help serve abused and neglected children who are in foster care due to some sort of trauma. The CASA program is mandated to serve children 12 years and under but is working to be able to provide care for teenagers in foster care as well. Courageous staff and volunteers help interrupt the trauma cycle that is often generational and help identify healthy paths moving forward.

The CASA volunteers work to help children heal and thrive. When volunteers are assigned, they can choose their case(s). Elisa shared a story of a child who came into care with no reunification plan and with a poor prognosis. The volunteer connected with the child's mom and successfully initiated the parenting plan, successful housing options, and connections with services. The end result was reunification with the parent.

Just over 600 children in Southwest Idaho received CASA services in the past year. Grant funding largely supports CASA and the agency continues to work on community collaboration and individual donors. Bekah asked for suggestions for community members or collaborative partners that might be a good fit.

For fiscal year 2023, CASA hopes to ensure all children in care have an advocate. To meet this need, CASA's goal is to recruit 81 volunteers. Average volunteer time is about eight hours a month.

YOUTH BEHAVIORAL HEALTH UPDATE

Savannah Swisher, project manager, has been hired and the advisory committee for the Safe Teen Assessment Center has been identified. The implementation date of November 1 has been changed to December 1. The grant received, totaling approximately \$1.5 million, will be awarded as subgrants to community partners to develop assessment and case management capacity and start operationalizing that work.

Idaho Department of Juvenile Corrections opened the Request for Proposals for the youth behavioral health crisis center and SWDH will be requesting approximately \$1.1 million to pursue opening a youth crisis center.

Nikki also shared that Canyon County Commissioners and the City of Caldwell verbally committed funding toward the youth crisis center, contingent on other funding pieces coming to fruition. The City of Nampa City Council is also interested in committing funds and is considering the request brought to them.

Healthcare systems have been involved in the conversations around the youth crisis center. No specific funding request has been put forward yet. In addition, two architectural firms have volunteered their services to help design any changes to the facility.

Commissioner Purdy asked for clarification on whether SWDH is working toward a Safe Teen Assessment Center or a youth crisis center. Nikki explained that SWDH will be pursuing both. Funding was appropriated by the legislature to stand up the safe teen assessment centers and there are eight

across the state. The main focus is reducing the number of children entering the child welfare and juvenile justice systems.

The youth crisis center model is very similar to the adult crisis center which is designed to be an intervention rather than a prevention. Juveniles in crisis can stay up to 23 hours and 59 minutes and be connected to outpatient services or to an appropriate place of care such as the emergency department or inpatient care facilities.

Nikki clarified that the safe teen assessment center will not be a physical location. The safe teen assessment centers across the country mostly use a physical location for a center. Southwest District Health incorporated the approach of using resources already in place to be able to provide youth across the six-county region the best access to services in lieu of funding an actual center in each of the six counties. A virtual platform will also be leveraged so a youth, parent, or responsible adult could assist with a screening. If the screening indicates a need for resources, the online platform can assist with connection to resources. If a need for assessment is indicated following the screening, then options for that service will also be made available. The assessment is completed by a licensed behavioral health provider.

PARTNERSHIP FOR SUCCESS SUBGRANT

The Partnership for Success (PFS) subgrant supports work SWDH has been completing since 2018 and this is the last fiscal year of the agreement. Office of Drug Policy (ODP) is requiring a document in writing indicating that the Behavioral Health Board (BHB) will be willing to partner with SWDH in order to continue this work. The Behavioral Health Board did provide that letter of support indicating willingness to continue to partner. In July, legal counsel for SWDH and ODP reviewed the revised contract language based on concerns Nikki had regarding naming the BHB as subrecipient and SWDH as the fiduciary agent. Subrecipients are typically responsible for meeting contract requirements, reporting on the deliverables, etc. To date, SWDH has been working as the subrecipient. Nikki's concern is about the changes in roles identified in the new contract despite the understanding that ODP does not expect any role changes to occur. Nikki added that the SWDH staff person responsible for carrying out the PFS work is successfully working with the BHB.

Nikki asked for guidance from Board members on how to proceed. Board members expressed concern about completing the PFS work with a different grant as the remaining grant funds are intended specifically for this purpose and this region.

ODP is amendable to naming both parties as subrecipients but requires the BHB to agree and both parties to sign the new contract by October 31st. Board members discussed the lack of clearly defined roles and responsibilities.

Charlene Cariou, Program Manager, explained that the Partnership for Success grant provides support resources and services for youth focused on prevention of alcohol, stimulant, and marijuana use. The grant provides funds for communities to make substance use activities less desirable. For example, SWDH worked with local law enforcement in Weiser to install a streetlight where high-activity usage had been identified. In addition, the program works with schools to identify high-risk students and connect the students with an in-school prevention program. Education in life skills are also provided.

Board members discussed whether they support the subgrant contract being signed and submitted. Board members directed Nikki to proceed with ensuring SWDH staff are protected and the grant activities continue to be carried out.

MOTION: No motion was made.

SAFE TEEN ADVISORY ASSESSMENT CENTER (STAC) COMMITTEE NOMINATION APPROVAL

Savannah Swisher, Safe Teen Assessment Center (STAC) Project manager, presented a request for ratification of two additional committee members. The assessment center was recently renamed the Youth Resource and Opportunity Collaborative (YROC).

The center's goal is to reduce the number of youth who enter the juvenile justice and child welfare systems. When screenings return as positive, referrals can be provided. Youth using these services can self-identify or be referred by a parent or caregiver. The assessment will be provided by Nampa Family Justice Center or Lifeways. The case management piece would be provided by Boys and Girls Club of Canyon County, Advocates Against Family Violence, Lifeways, WICAP, and Nampa Family Justice Center. Case managers will help the youth and family complete the care plan that is collaboratively developed by the licensed behavioral health provider and family. Depending on the needs, the care plan might include pieces such as counseling, a healthy after school activity, part-time after school employment, etc.

MOTION: Commissioner Haines made a motion to ratify the committee members as presented. Commissioner Smith seconded the motion. All in favor; motion passes.

EXECUTIVE COUNCIL UPDATE

Nikki presented the Executive Council update. Setting of food fees at cost continues to be a current discussion. Executive Council members decided to wait to see how leadership for the 2023 legislature will shake out prior to determining next steps.

YOUTH CRISIS CENTER FACILITY LEASE NEGOTIATIONS

This item will be discussed in Executive Session as noted on the agenda.

DIRECTOR'S REPORT

Public Health Symposium

Southwest District Health will hold its fourth annual Public Health Symposium on November 15, 2022, following the Board of Health meeting. The topics will center around youth behavioral health as well as some environmentally focused topics. Local elected officials and hospital partners from across the six-county region have been invited to attend.

Opioid Settlement

Nikki will add this as an action item at the November meeting and will ask board members to consider putting some of the opioid settlement funds coming to SWDH toward the youth crisis center.

EXECUTIVE SESSION

At 11:35 a.m., Commissioner Elliot made a motion to go into Executive Session pursuant to Idaho Code 74-206(c). Commissioner Smith seconded the motion. Roll was taken. All in favor.

At 12:05 p.m., Board members came out of Executive Session.

No action was taken as a result of the Executive session.

There being no further business, the meeting adjourned at 12: 06 p.m.

Respectfully submitted:

Approved as written:

Nikole Zogg
Secretary to the Board

Bryan Elliott
Chairman

Date: October 25, 2022

DRAFT



SOUTHWEST DISTRICT HEALTH

BUDGET REPORT FOR FY2023

Cash Basis

Oct-22

Target **33.3%**

Fund Balances		
	FY Beginning	Month Ending
General Operating Fund	\$ 113,540	\$ 308,223
Millennium Fund	\$ -	\$ 69,212
LGIP Operating	\$ 4,033,668	\$ 4,081,679
LGIP Vehicle Replacement	\$ 99,899	\$ 100,416
LGIP Capital	\$ 1,299,174	\$ 1,299,174
Total	\$ 5,546,282	\$ 5,858,704

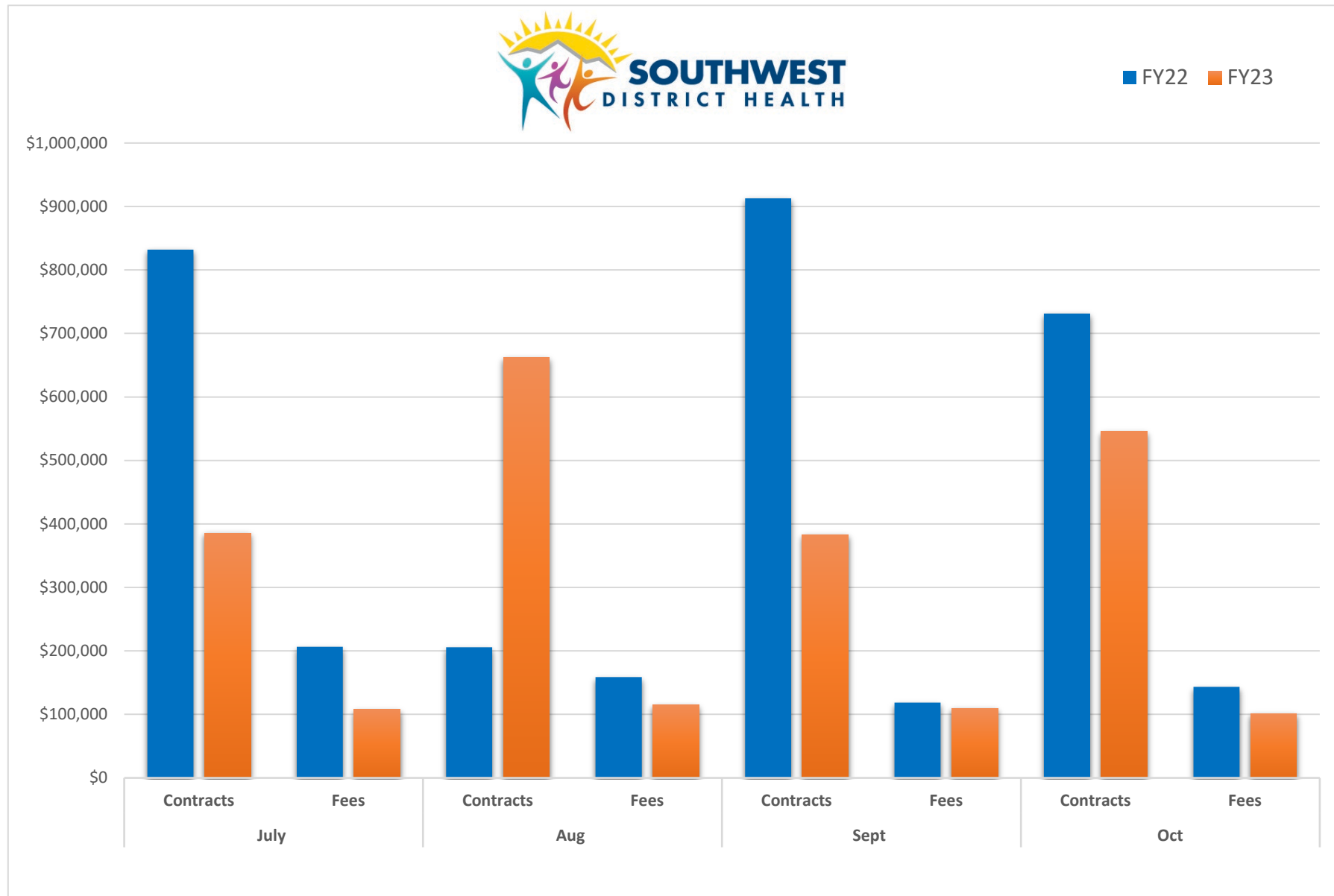
Income Statement Information			
	YTD	This month	
Net Revenue:	\$ 3,208,113	\$ 706,916	
Expenditures:	\$ (3,444,028)	\$ (852,437)	
Net Income:	\$ (235,915)	\$ (145,521)	
<i>Non-Rev Income</i>			
State Transferred Funds:	\$ 766,641	\$ 581,008	
	\$ 530,726	\$ 435,486	

Revenue									
	Admin	Clinic Services	Env & Community Health	General Support	Crisis Center	Total	YTD	Total Budget	Percent Budget to Actual
County Contributions	\$ 49,768	\$ -	\$ -	\$ -	\$ -	\$ 49,768	\$ 753,629	\$ 2,784,813	27%
Fees	\$ -	\$ 30,827	\$ 70,304	\$ 213	\$ -	\$ 101,345	\$ 434,099	\$ 1,879,344	23%
Contracts	\$ -	\$ 112,875	\$ 306,037	\$ -	\$ 126,666	\$ 545,578	\$ 1,976,102	\$ 7,618,832	26%
Sale of Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 20,000	0%
Interest	\$ 9,591	\$ -	\$ -	\$ -	\$ -	\$ 9,591	\$ 28,528	\$ 8,000	357%
Other	\$ -	\$ -	\$ 634	\$ -	\$ -	\$ 634	\$ 15,757	\$ 374,828	4%
Monthly Revenue	\$ 59,359	\$ 143,703	\$ 376,975	\$ 213	\$ 126,666	\$ 706,916	\$ 3,208,113	\$ 12,685,817	25.3%
Year-to-Date Revenue	\$ 782,157	\$ 725,459	\$ 1,425,947	\$ 2,155	\$ 272,396	\$ 3,208,113	DIRECT BUDGET		
Budget	\$ 2,959,730	\$ 2,722,777	\$ 6,125,068	\$ 20,000	\$ 858,242	\$ 12,685,817			
	26.4%	26.6%	23.3%	10.8%	31.7%	25.3%			

Expenditures									
	Admin	Clinic Services	Env & Community Health	General Support	Crisis Center	Total	YTD	Total Budget	Percent Budget to Actual
Personnel	\$ 26,874	\$ 203,010	\$ 290,194	\$ 92,026	\$ 4,282	\$ 616,386	\$ 2,636,680	\$ 9,091,815	29%
Operating	\$ 2,484	\$ 37,062	\$ 27,637	\$ 59,064	\$ 104,454	\$ 230,701	\$ 801,998	\$ 3,104,001	26%
Capital Outlay	\$ -	\$ -	\$ 5,350	\$ -	\$ -	\$ 5,350	\$ 5,350	\$ 410,000	1%
Trustee & Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 80,000	0%
Monthly Expenditures	\$ 29,359	\$ 240,072	\$ 323,181	\$ 151,090	\$ 108,736	\$ 852,437	\$ 3,444,028	\$ 12,685,817	27.1%
Year-to-Date Expenditures	\$ 29,793	\$ 1,075,243	\$ 1,350,772	\$ 672,880	\$ 212,190	\$ 3,340,879	DIRECT BUDGET		
Budget	\$ 579,815	\$ 3,557,175	\$ 5,555,688	\$ 2,152,285	\$ 840,854	\$ 12,685,817			
	5.1%	30.2%	24.3%	31.3%	25.2%	26.3%			

YTD REVENUES with Prior Year Comparison

Oct-22

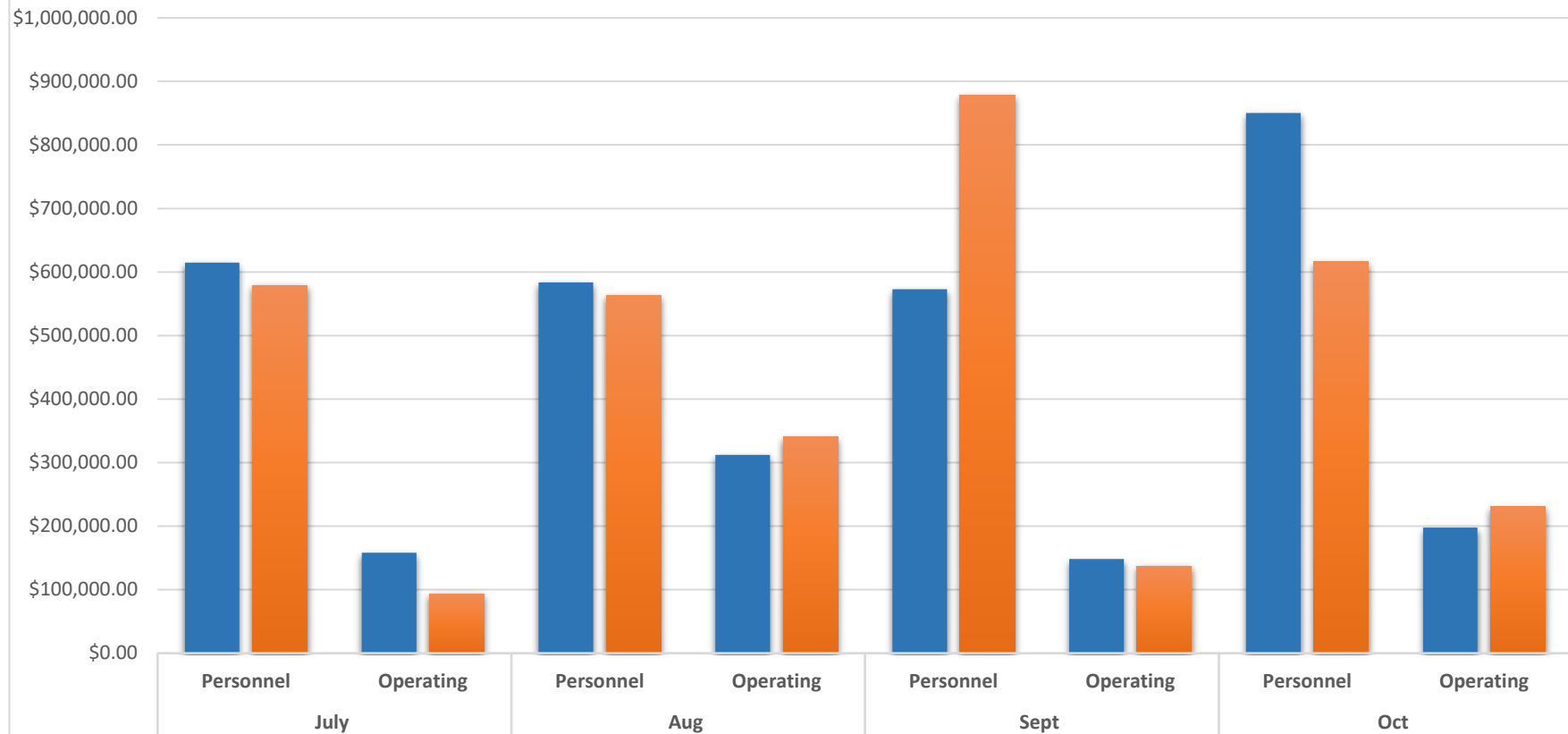


YTD EXPENDITURES with Prior Year Comparison

Oct-22

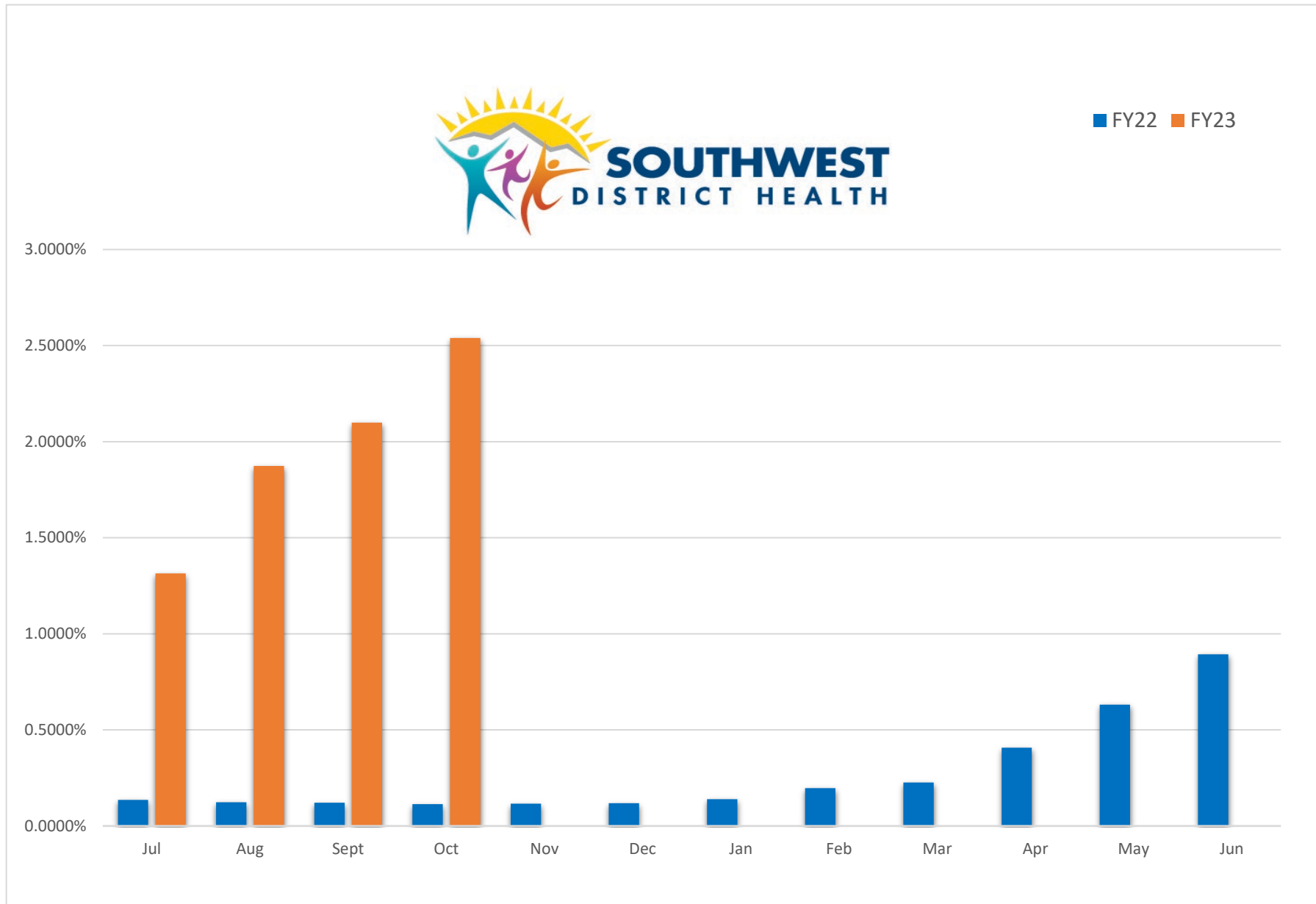


■ FY22 ■ FY23



YTD Investment Yield with Prior Year Comparison

Oct-22





Oct-22

Southwest District Health
Summary of Restricted and Committed Funds - FY 2023

Cash on hand

Restricted Funds - Cash on hand from third party restricted by contract, grant, or donation terms

Note: Restricted fund balances carry from year to year until expended or grant ends

Committed Funds - Cash on hand committed by the Board of Health for a specific purpose

Fund Balances as of last prior month reported

	Restricted Funds	Committed Funds
<u>Fund 0290</u>		
Behavioral Health	\$6,938	
Blue Cross Grant (new FY22)	\$55,261	
Citizen's Review Panel	\$12,412	
City Of Nampa	\$9,000	
Crisis (CFAC)	\$28,571	
IAEYC School Supplies	\$16	
OPIOID Settlement	\$695,212	
Parents As Teachers	\$64,272	
Tobacco Cessation (Was Fund 0499)	\$83,125	
United Way Grant	\$2,333	
Youth Vaping (Personnel)	\$56,573	
Technological Improvements		\$61,762
Employee Development & Engagement		\$44,116
County Collaborations		\$70,000
27th Pay Period		\$242,576
Facility Improvements		\$810,479
	<u>\$1,013,714</u>	<u>\$1,228,933</u>
<u>Fund 0499</u>		
Youth Vaping (Operating)	\$69,212	

Total Restricted/Committed: \$2,311,859



Being Responsive to Community Needs

11.15.22

HEALTHIER TOGETHER

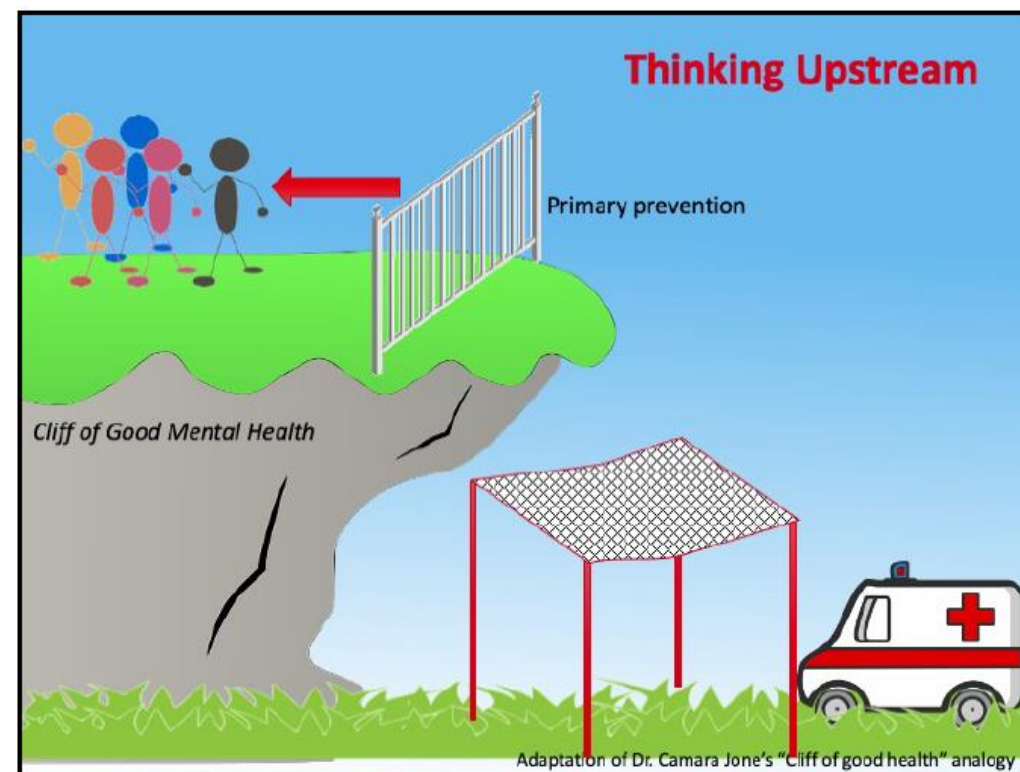
SWDH.ORG

Essential Public Health Services (EPHS)

- Assess health and determine population-level gaps and needs that if addressed could improve the health of the population (EPHS 1)
- Address health problems and hazards affecting the population (EPHS 2)
- Strengthen, support, and mobilize communities and partnerships to improve health (EPHS 4)
- Assure an effective system that enables equitable access to the individual services and care needed to be health (EPHS 7)

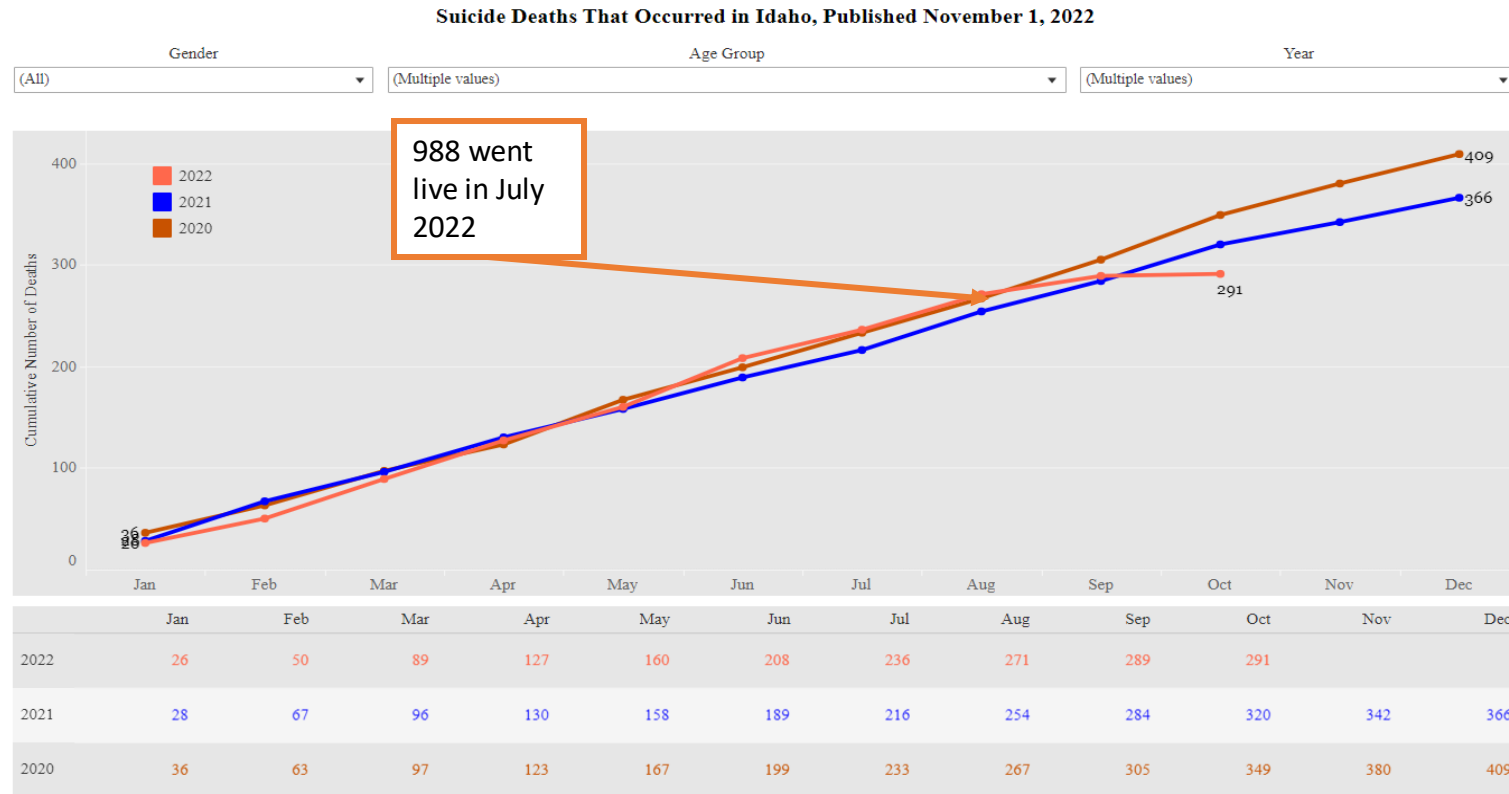
Note: there are 10 identified public health services that are considered essential. These have been established by national organizations with input from local, state, and federal public health professions/organizations.

Thinking Upstream



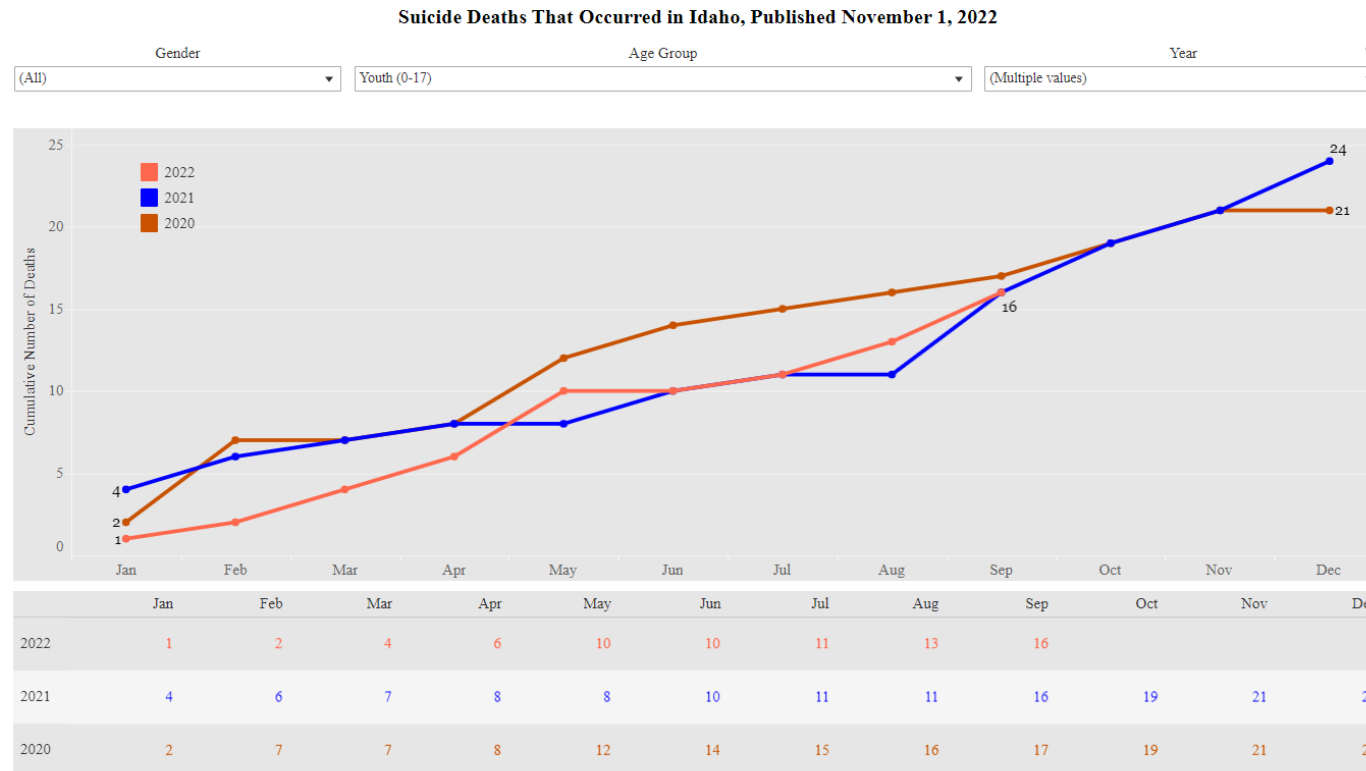
Idaho's Behavioral Health Trends

Statewide Suicide Data 2020-2022: 18+ years



- Published November 1, 2022
- Data for 2022 are preliminary, based on deaths with known cause of death, and filed with Bureau of Vital Records and Health Statistics as of November 1, 2022.
- Data for 2017-2021 are final.
- Data based on deaths occurring in Idaho include deaths among Idaho residents and non-residents; data are not comparable with data based on Idaho resident deaths, which may have occurred in Idaho or out of state.
- Source: Idaho Bureau of Vital Records and Health Statistics, Idaho Department of Health & Welfare

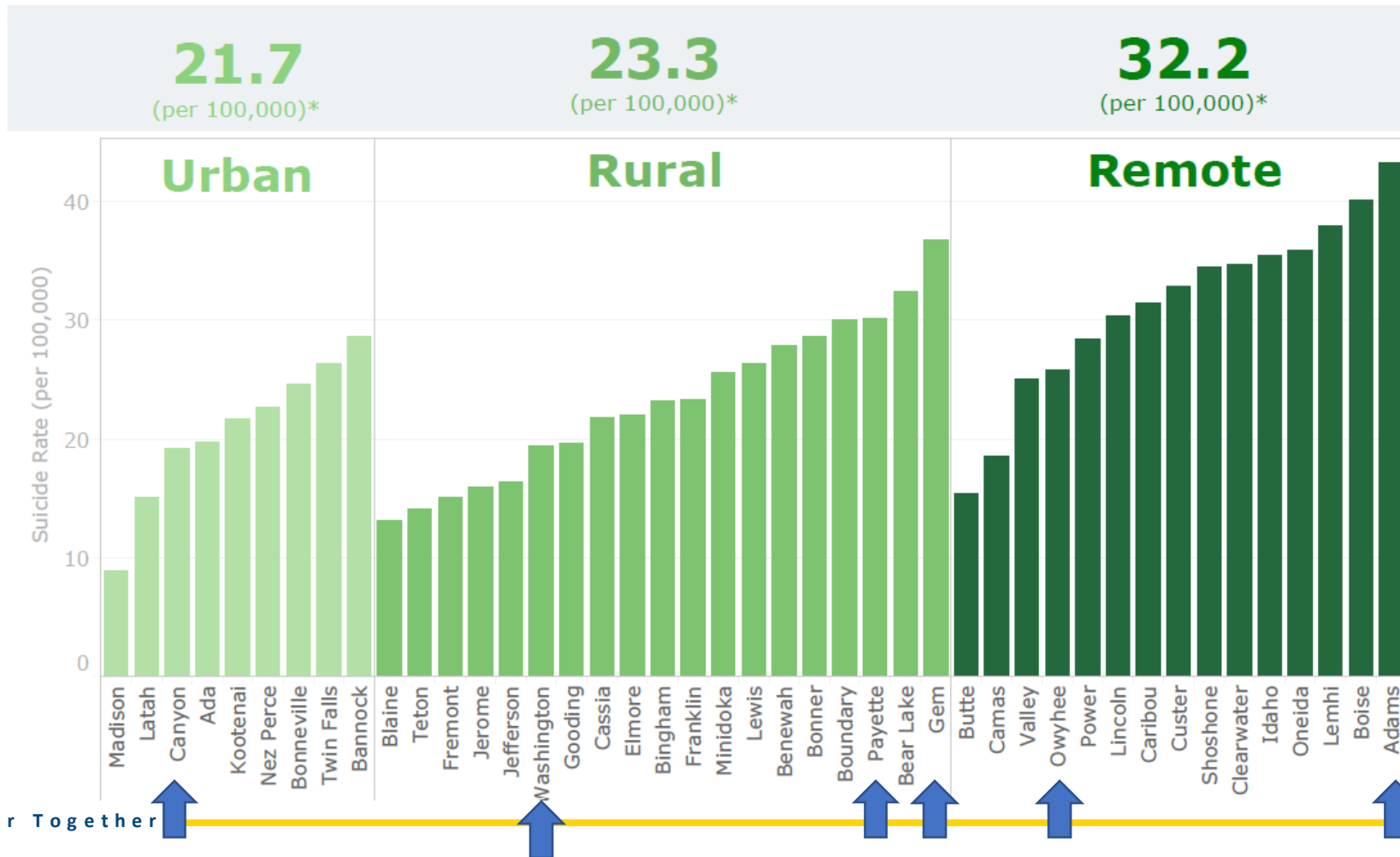
Statewide Suicide Data 2020-2022: 0-17 years



Note:
While adult suicides have dropped since July 2022, youth suicides are continuing to trend with previous years.

- Published November 1, 2022
- Data for 2022 are preliminary, based on deaths with known cause of death, and filed with Bureau of Vital Records and Health Statistics as of November 1, 2022.
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- Source: Idaho Bureau of Vital Records and Health Statistics, Idaho Department of Health & Welfare

Suicide Mortality in Idaho among Urban, Rural, and Remote Counties: 2016 – 2020



Definitions:

Urban - County with a population center of 20,000 residents or more.

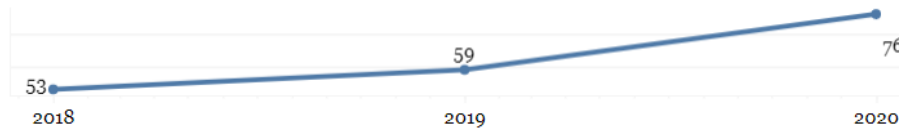
Rural - County with population density greater than 6 persons/sq. mile and no population center(s) of more than 20,000 residents.

Remote - County with a population density of less than 6 persons/sq. mile.

Public Health District 3's Behavioral Health Trends

SWDH Suicide Data by Year: 2018 - 2020

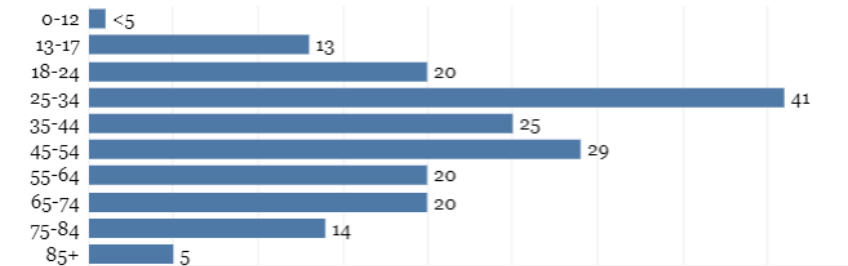
Deaths By Year



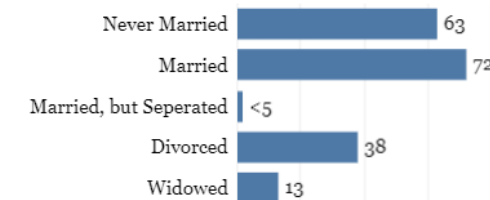
By Gender



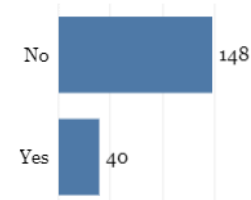
By Age Group



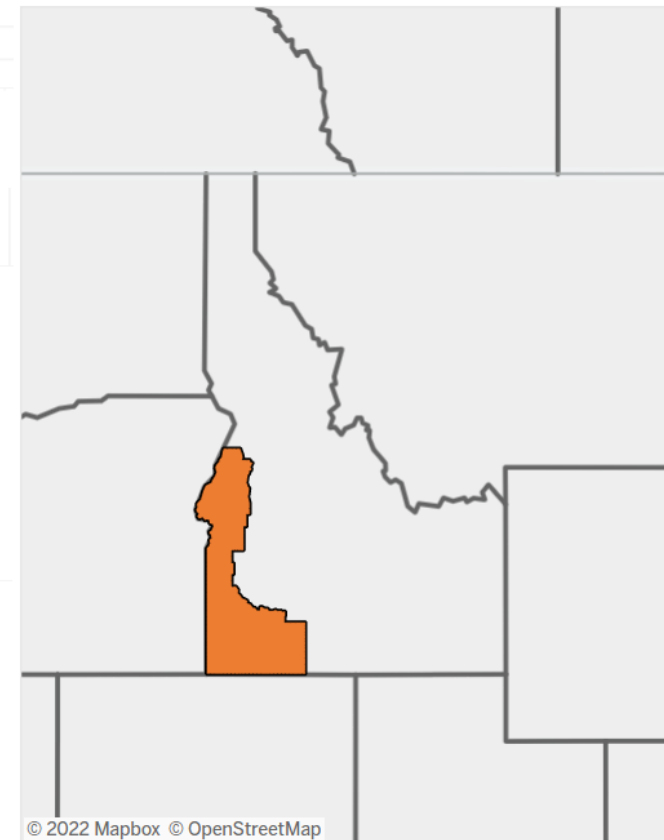
By Marital Status



By Veteran Status



Deaths by Public Health District of Residence

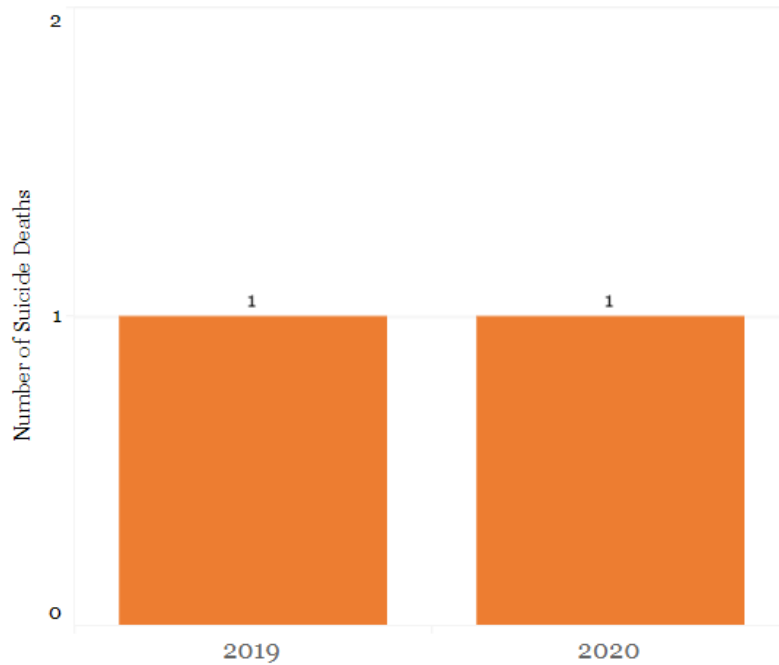


Adams, Owyhee, and Washington Counties Suicide Data by Year: 2018 - 2020

County of Residence
Use this drop down filter to select desired county/counties

Adams ▼

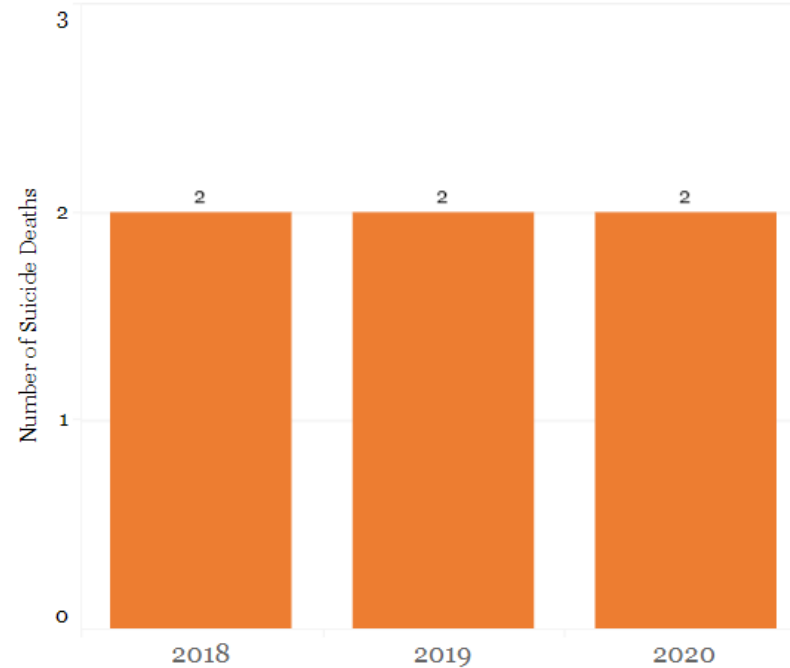
Suicide Deaths by Year



County of Residence
Use this drop down filter to select desired county/counties

Owyhee ▼

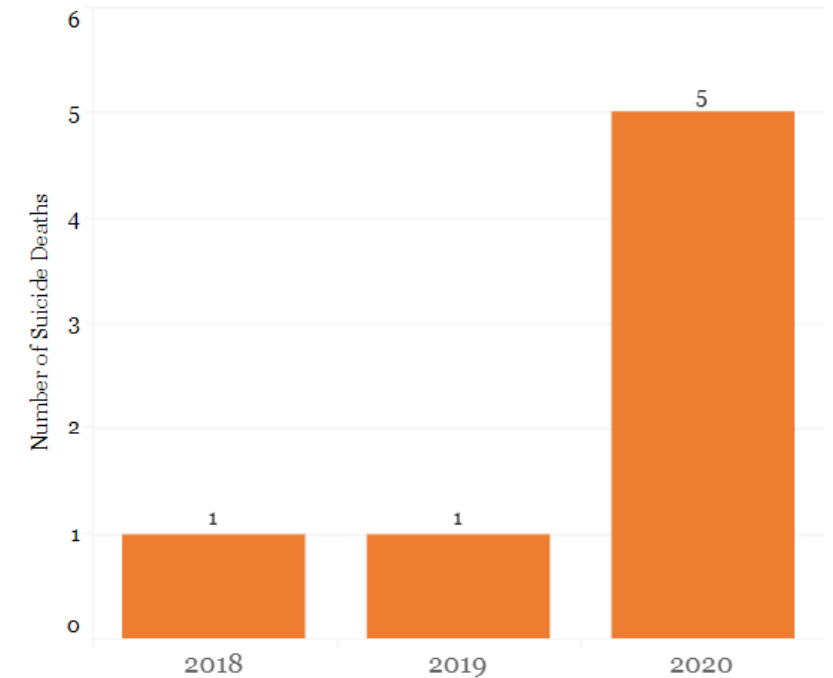
Suicide Deaths by Year



County of Residence
Use this drop down filter to select desired county/counties

Washington ▼

Suicide Deaths by Year

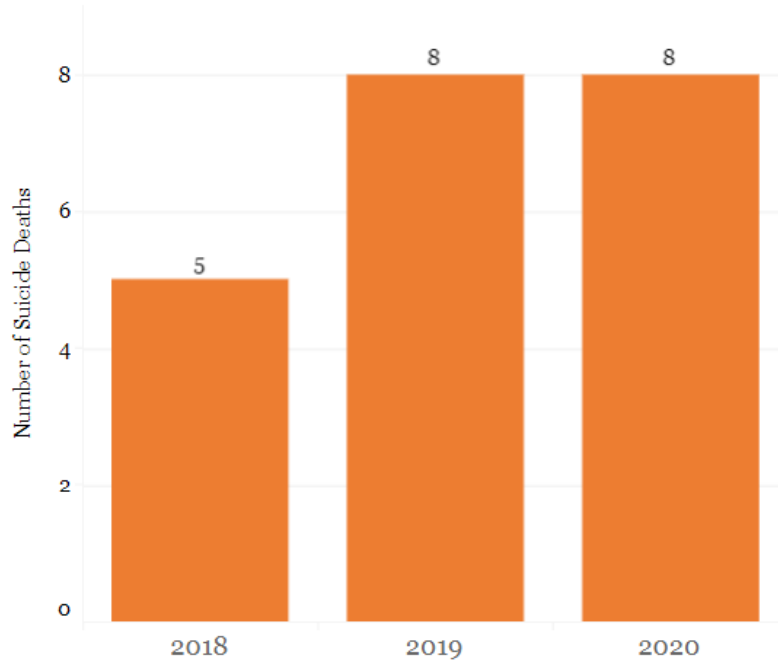


Payette, Gem, Canyon Counties Suicide Data by Year: 2018 - 2020

County of Residence
Use this drop down filter to select desired county/counties

Payette

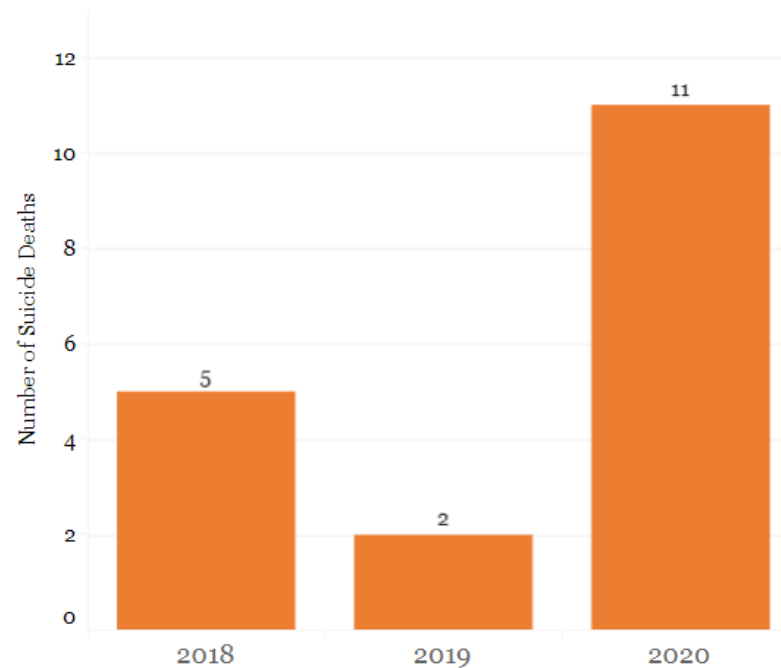
Suicide Deaths by Year



County of Residence
Use this drop down filter to select desired county/counties

Gem

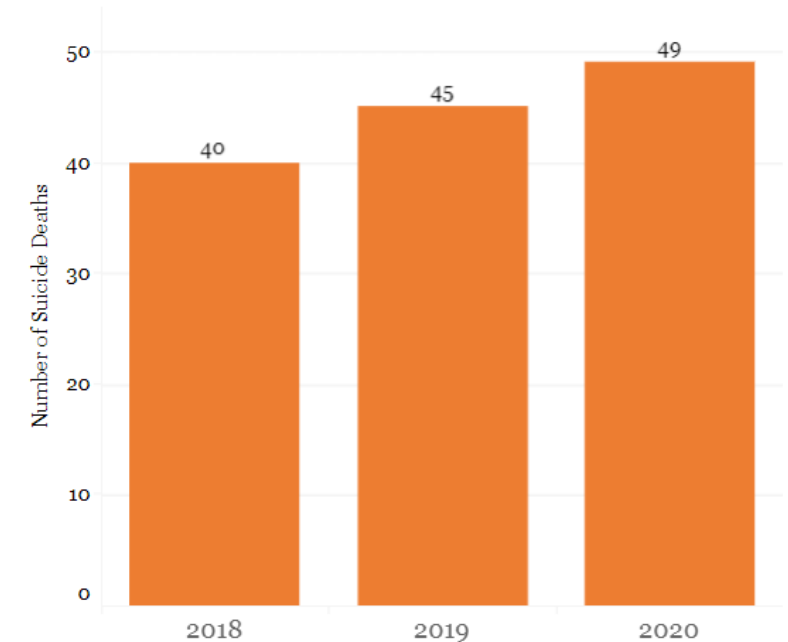
Suicide Deaths by Year



County of Residence
Use this drop down filter to select desired county/counties

Canyon

Suicide Deaths by Year



Youth Suicides Reported by the Canyon County Coroner, 2018 - present

Youth Suicides Reported by the Canyon County Coroner, 2018 – present

Year	Gender	Age	Mode	Location
2018	Male	<15	Hanging	Nampa
	Male	<15	Hanging	Nampa
2019	Male	15 - 17	Hanging	Caldwell
	Male	15 - 17	Hanging	Middleton
2020	Male	<15	Hanging	Caldwell
	Male	15 - 17	GSW	Nampa
2021	Female	15 - 17	Hanging	Caldwell
	Female	<15	Hanging	Nampa
	Female	<15	Hanging	Nampa
	Male	<15	Hanging	Nampa
2022	Male	<15	GSW	Nampa
	Male	<15	OD	Canyon Co.
	Female	<15	GSW	Nampa

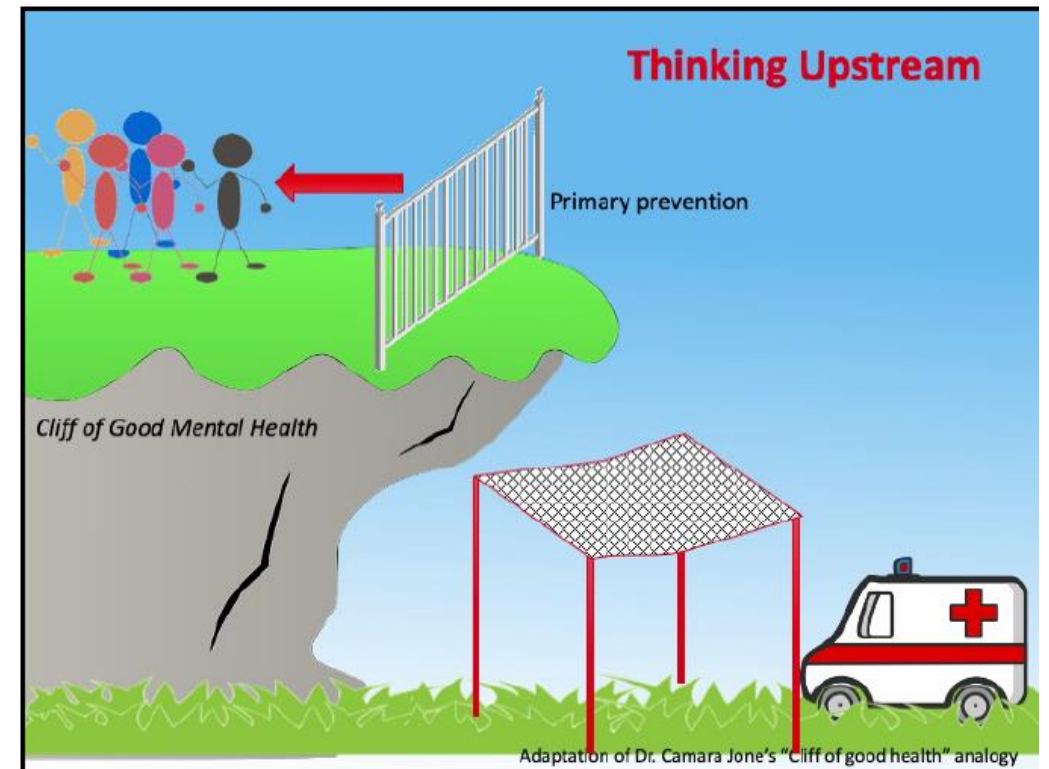
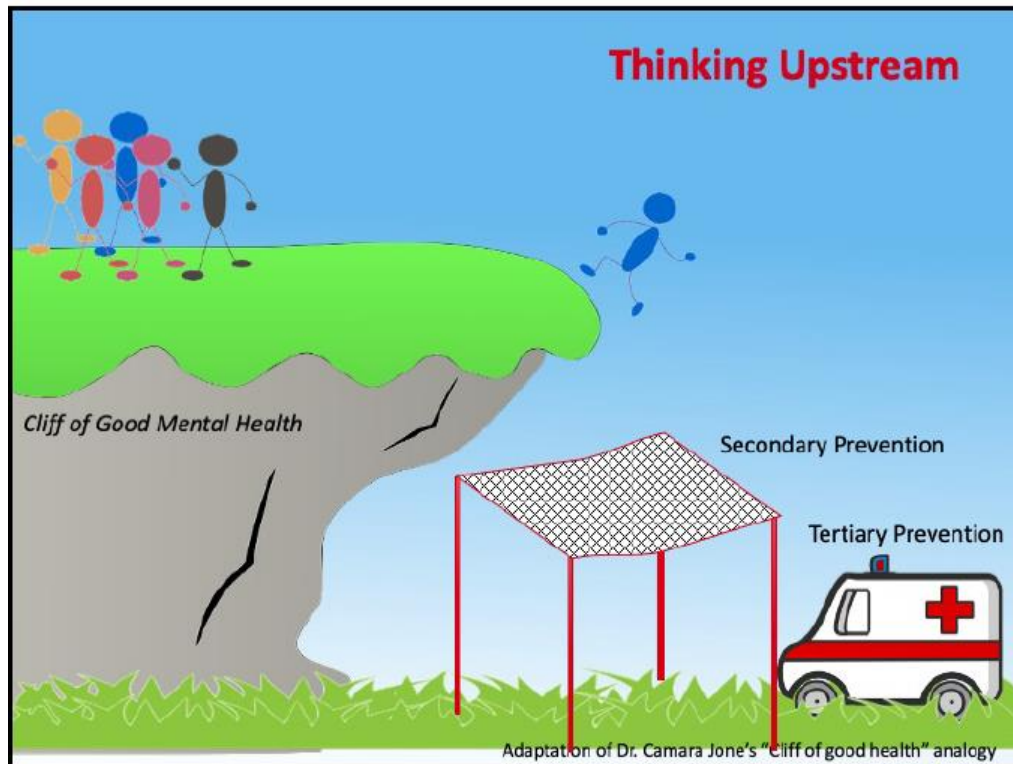
- Location is determined by place of death. In all reported instances, the youth died at their place of residence.
- This is not an exhaustive list of youth suicides in Canyon County. Some suicide attempts that have occurred in Canyon County were transported to Boise hospitals where they were later pronounced dead. Canyon County Coroner's office does not have data on those completions.
- Age range: 12 to 17 years

GSW: Gunshot wound
OD: Overdose

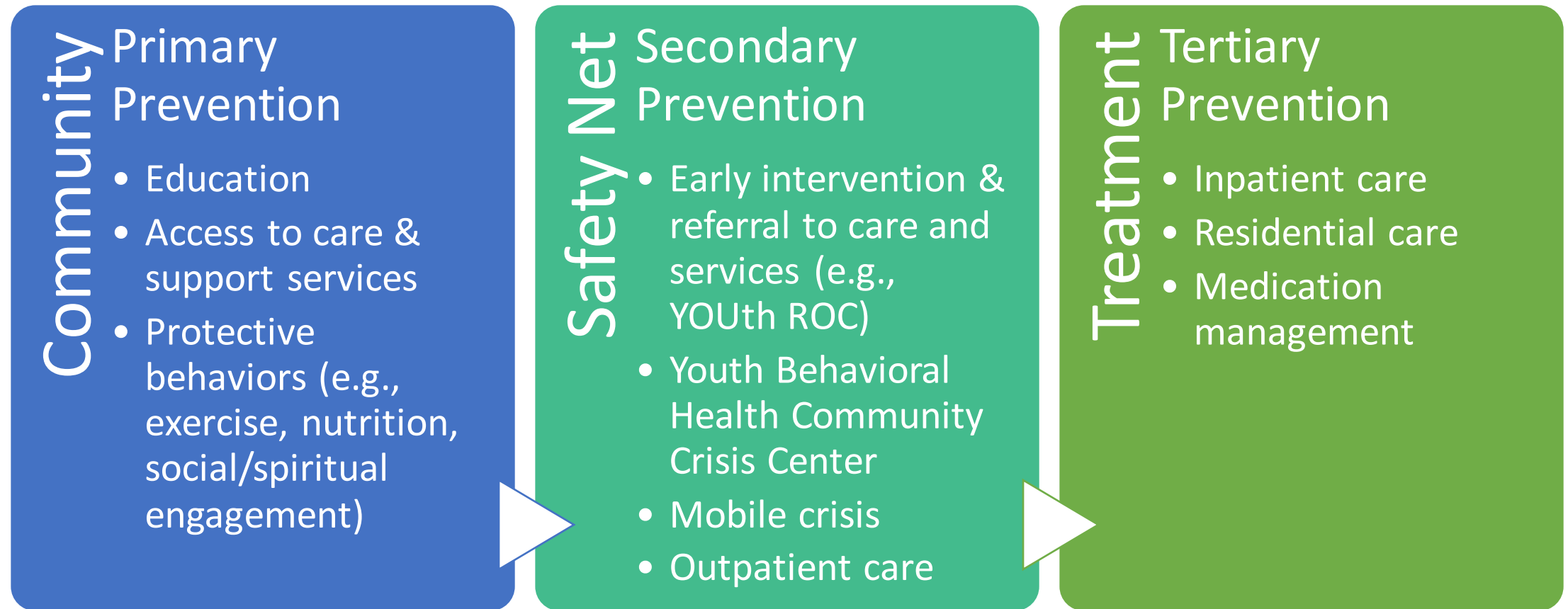
*"Since the onset of COVID, we saw a lot [of] anxiety, suicidality, and depression in the mental health side of things."
"We have had to do more grief groups and coping skills groups than ever before." - Local School District*

Reversing the Trend

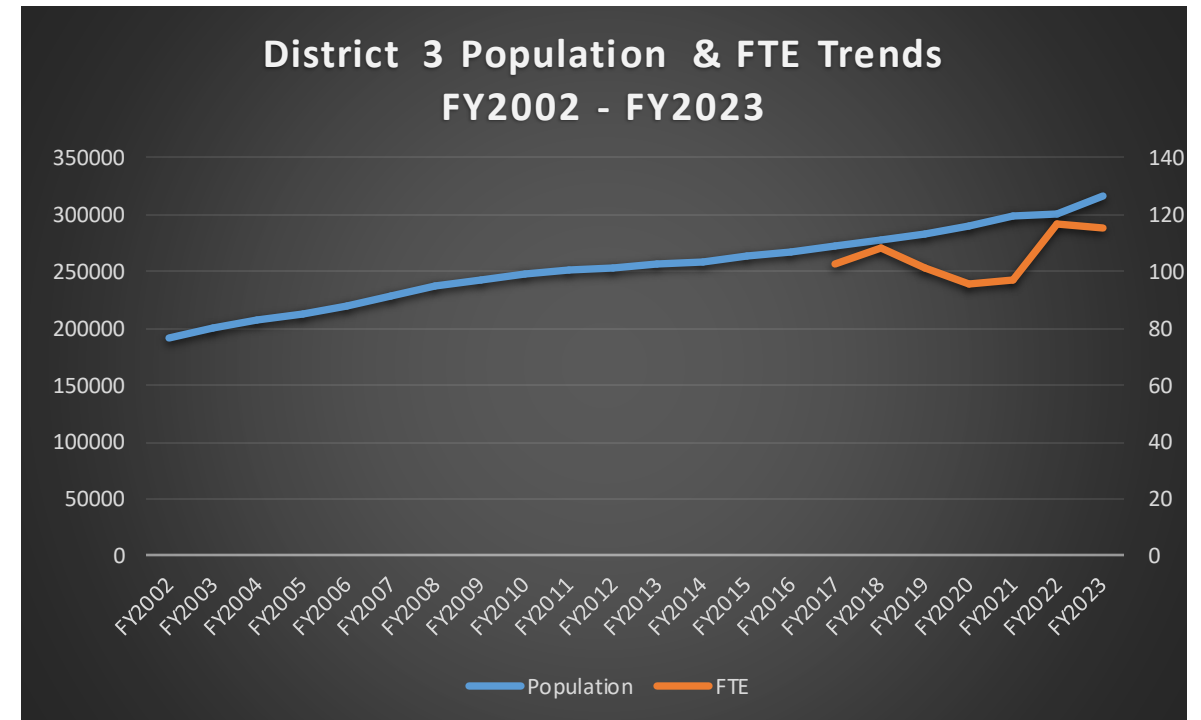
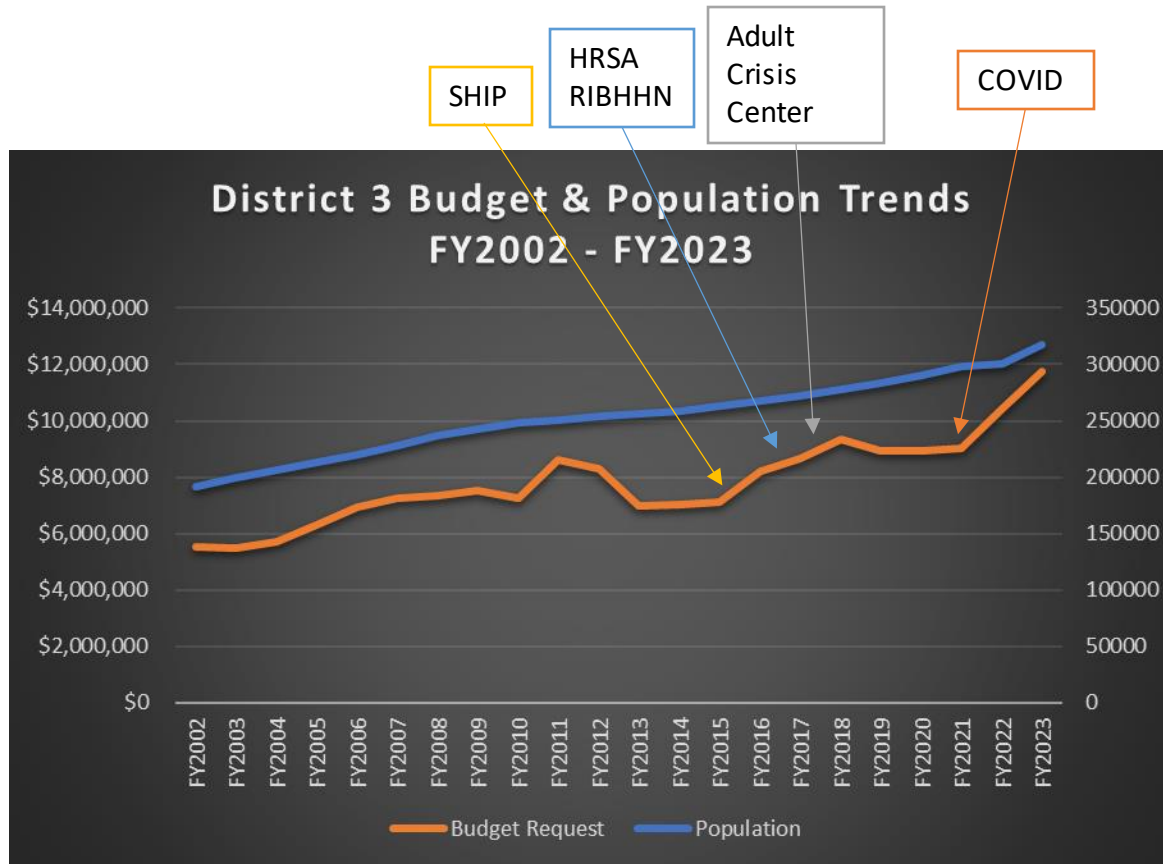
Thinking Upstream



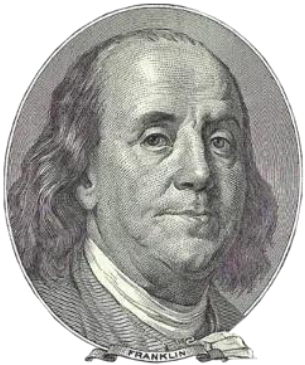
Thinking upstream with youth mental health



What does good fiscal stewardship look like?



Good fiscal stewardship looks like this...



"An ounce of prevention
is worth a pound of cure."

Benjamin Franklin

When Considering Youth Behavioral Health

- Address gaps and needs that impact youth behavioral health
- Be responsive to the public's needs and concerns
- Put the resources in the right places
- Serve as a backbone organization to assist community non-profits in achieving shared goals (e.g., grant writing, data-sharing, sub-granting, consultation, etc.)

References

- Idaho Division of Public Health. December 2021. *Suicide Mortality in Idaho (Among Urban, Rural, and Remote Counties)*.
- Idaho Violent Death Reporting System (IdVDRS) 2014-2020 Data. Accessed November 2022 at <https://www.gethealthy.dhw.idaho.gov/idaho-vdrs>.
- Canyon County Coroner. October 13, 2022. *Youth Suicide Report: 2018 – 2022*.
- Public Health National Center for Innovations. 2020. *The 10 Essential Public Health Services*. Accessed November 2022 at <https://phnci.org/national-frameworks/10-ephs>.



2023 PUBLIC MEETING NOTICE

November 15, 2023

Southwest District Health
Nikole Zogg, Director
13307 Miami Lane
Caldwell, ID 83607

The Southwest District Health Board of Health will hold their monthly Board Meetings on the following dates at 9:00 a.m., unless otherwise noted, at Southwest District Health, 13307 Miami Lane, Caldwell, Idaho.

Tuesday, January 24, 2023*
Tuesday, February 21, 2023*
Tuesday, March 21, 2023*
Tuesday, April 25, 2023
Tuesday, May 23, 2023
Tuesday, June 27, 2023

Tuesday, July 25, 2023
Tuesday, August 22, 2023
Tuesday, September 26, 2023
Tuesday, October 24, 2023
Tuesday, November 28, 2023
Tuesday, December 19, 2023*

This public notice satisfies the notice of meeting requirements in Idaho Code 74-204(1), Open Meeting Law. This document is posted in the principal office of Southwest District Health where the Board of Health meetings are held and is made available at <https://phd3.idaho.gov/boh/calendar/>.

If you have any questions, please contact Nikole Zogg at 208-455-5317.

* These meetings will be held from 10:00 a.m. to 1:00 p.m. to allow for winter driving conditions.

Healthier Together

13307 Miami Lane • Caldwell, ID 83607 • (208) 455-5300 • FAX (208) 454-7722

Executive Policy 17

Line of Succession



Lines of succession ensures the immediate continuity during temporary unavailability (e.g., a medical or family emergency) or after an unexpected vacancy for key positions of Southwest District Health (SWDH). Positions essential to the leadership and operations of SWDH include the district director, division administrators, and finance manager.

Lines of succession are temporary and are established by the Board of Health. The line of succession for each essential position is defined as follows:

Director

- General Support Division Administrator, then
- Division Administrator with most seniority (i.e., time with SWDH), then
- Division Administrator with least seniority, then
- Finance Manager

A person acting as Director serves as the administrative officer of the Board of Health and has the delegated authority to approve purchases, sign binding contracts and non-binding agreements, hear appeals, fill vacancies, address disciplinary matters up to administrative leave with or without pay, issue legal orders, and trespass persons from SWDH premises.

Acceptable reasons to trespass an individual(s) from SWDH premises include:

- Deliberate repeated disruption of the business of the District
- Deliberate entry into area posted with signs designating District property as private
- Deliberate refusal to comply with procedures designed to assure public health and safety

Trespass should be done in the presence of a police officer if at all possible. It should be recorded, if possible. The statement should be something like the following:

"I am [title] and have the authority to trespass you from the premises. I am requesting you to leave the building, sidewalks, and parking area of Southwest District Health immediately and not return for a period of one year."

General Support Division Administrator

- Financial Manager, then
- Human Resources Manager, then
- IT Manager, then
- Program Specialist

Family and Clinic Services Division Administrator

- Family Services Program Manager 2, then
- Clinic Services Program Manager 2, then
- Office Services Supervisor 2

Environmental and Community Health Division Administrator

- Community Health Program Manager 2, then
- Environmental Health Program Manager 2, then
- Public Health Preparedness and Response/Epidemiology Program Manager 2

Finance Manager

- General Support Division Administrator, then
- Financial Specialist, Sr.

Medical Director

- Public Health District 4 Medical Director (MOU)

Approved

Nikole Zogg, PhD, MPH Date:
Director

Origination Date: August 25, 2020
Revision Date: November 15, 2022
Board of Health Approval: August 25, 2020



Board of Health
New member orientation
Southwest District Health (SWDH)

What is our vision, mission, and duty?

- Vision: a healthier southwest Idaho
- Mission: to promote the health and wellness of those who live, work, and play in southwest Idaho
- Duty: provide the basic health services of public health education, physical health, environmental health, and public health administration, but this listing shall not be construed to restrict the service programs of the public health district solely to these categories. (IC 39-409)



What are our core values?

Core Values:

Accountability: Modeling integrity through responsible use of public dollars, service to the community, and transparency

Customer-focused: Willingness to go the “extra mile” to serve internal and external customers in a professional, polite, and personalized manner

Teamwork: Uniting our partners’ and co-workers’ unique skills and abilities to achieve the common vision of a healthier Southwest Idaho

Who governs Idaho's public health districts?

- Each District is governed by a Board of Health comprised of 7 to 9 members appointed by County Commissioners from that District. The board members serve for staggered five-year terms.
- Southwest District Health's Board of Health is comprised of 7 members. Six are county commissioners or their designee and the seventh board member is a physician.
- Each Board of Health appoints a Director to administer and manage the day-to-day activities of the District.

What are Idaho's public health districts' statutory authorities?

Powers and Duties of the District Board	
Administer and enforce all state and district health laws, regulations and standards	Enter into contracts with other governmental agencies
Do all things for the preservation and protection of public's health	Purchase, exchange or sell real property and construct, rent, or lease such buildings
Determine location of its main office and branch offices	Accept, receive and utilize donations for the fulfillment of the purposes outlined in this act
Enter into contracts	Establish fees
Ensure received moneys are deposited into the respective public health district fund	Administer and certify solid waste disposal site operations
Establish a fiscal control policy	Select a board member to serve as a trustee
Cooperate with IDHW and DEQ, and their respective boards	Enter into lease of real or personal property

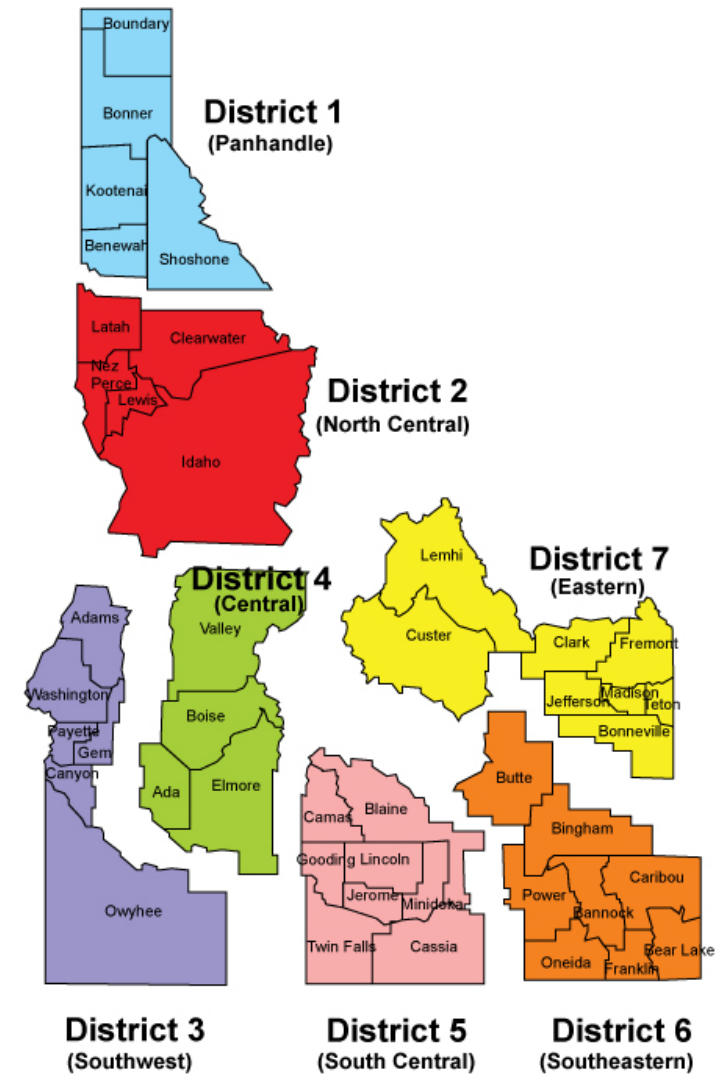
Who serves on our Board of Health?

- Adams County Representative: Commissioner Viki Purdy
- Canyon County Representative: Commissioner Keri Smith
- Gem County Representative: Vacant
- Owyhee County Representative: Commissioner Kelly Aberasturi, Vice Chairman
- Payette County Representative: Vacant
- Washington County Representative: Commissioner Lyndon Haines
- Physician Representative: Dr. Sam Summers

Who are Idaho's public health directors?

- District 1
 - Main Office: Hayden
 - Director: Don Duffy
- District 2
 - Main Office: Lewiston
 - Director: Carol Moehrle
- District 3
 - Main Office: Caldwell
 - Director: Nikki Zogg
- District 4
 - Main Office: Boise
 - Director: Russ Duke
- District 5
 - Main Office: Twin Falls
 - Director: Melody Bowyer
- District 6
 - Main Office: Pocatello
 - Director: Maggie Mann
- District 7
 - Main Office: Idaho Falls
 - Director: James Corbett

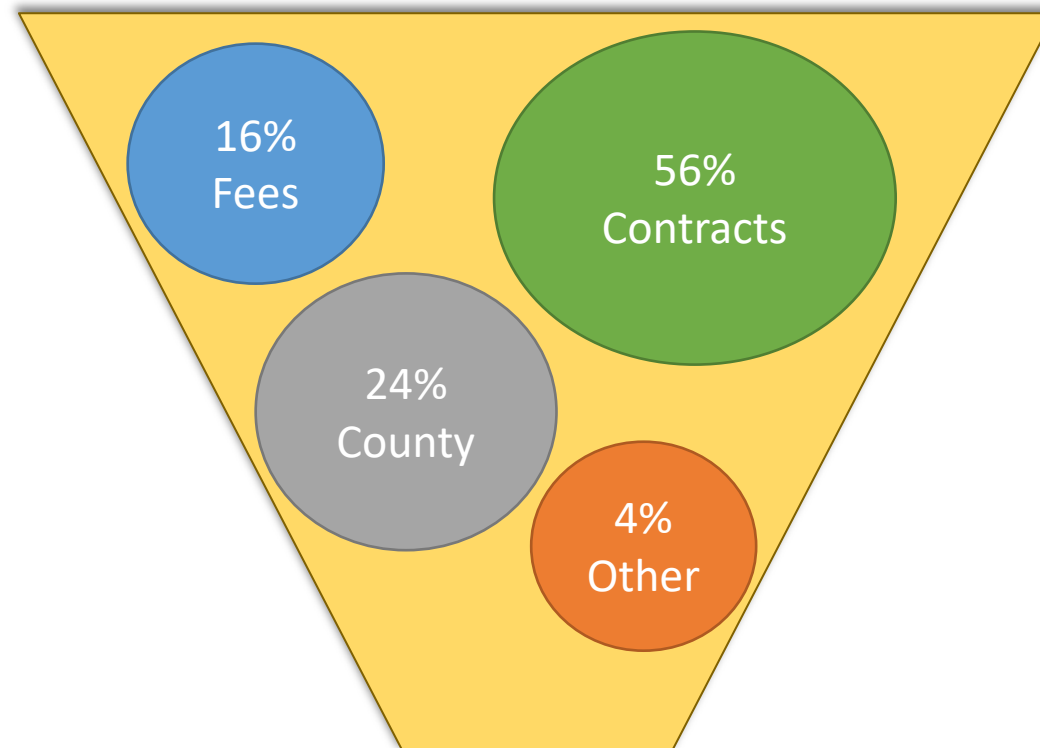
Where are the seven public health districts?



Where are we located?

- Offices:
 - Caldwell (Main facility)
 - Weiser
 - Payette
 - Emmett
 - Homedale (WIC only)
- Other locations
 - Farmway
 - Marsing Community Hub
 - Western Idaho Community Crisis Center (contracted with Lifeways)

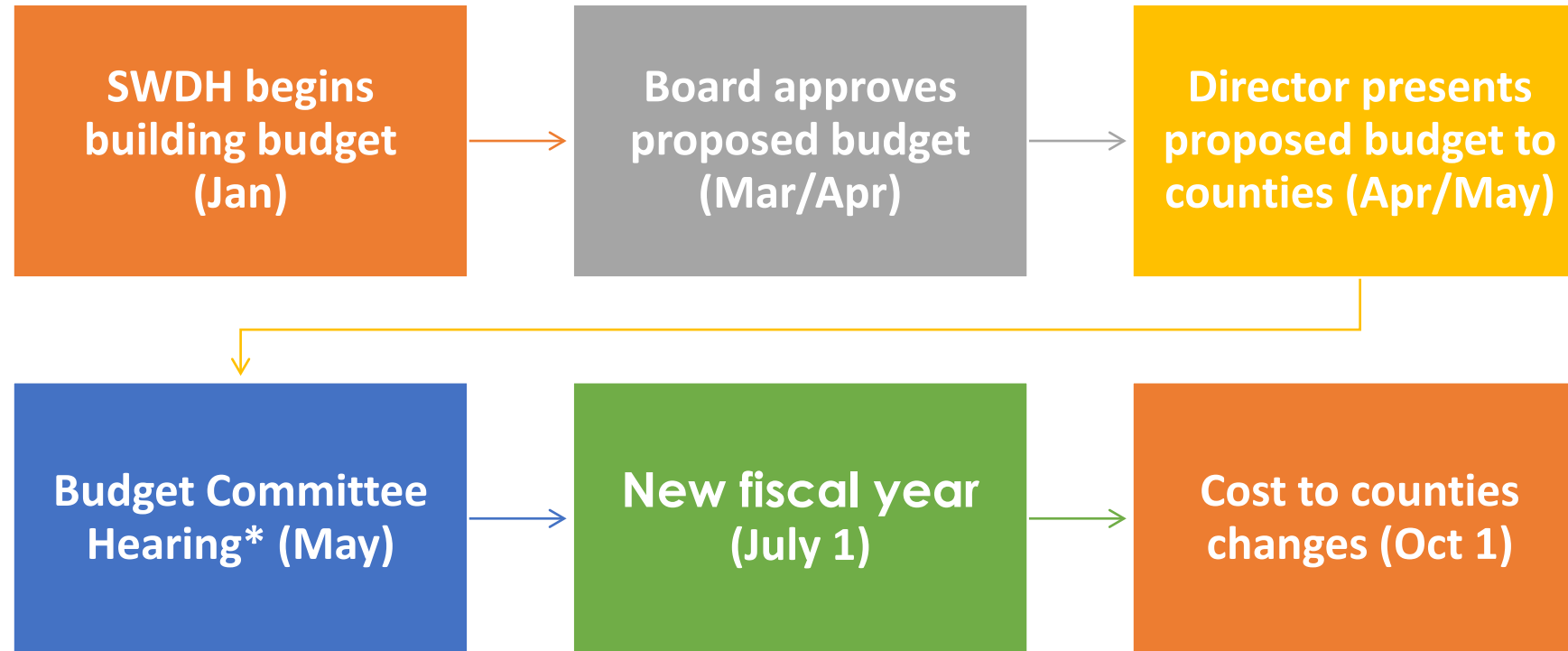
How are we funded?



\$12,685,817*

*FY 2023

What is our budget setting process?



*County contributions are determined pursuant to sections 39-423 and 39-424, Idaho Code

What are our costs?

Under development – what do you think would be helpful to share that would give a snapshot to new board members about what are costs are (e.g., salary & benefits, services, infrastructure, etc.)?

What is our organizational structure?

Board of Health

District Director

General Support Division
Administrator

Family & Clinic Services
Division Administrator

Environmental and Community
Health Administrator

Who works here?

- Nurses
- Nurse practitioners
- Epidemiologists
- Physicians
- Dieticians and nutritionists
- Dental hygienist & assistant
- Clinical assistants
- Customer service representatives
- Peer counselors
- Community health workers
- Environmental health specialists
- Health educators
- Office managers
- Office assistants
- Executives (director and division administrators)
- Financial professionals
- Information technology specialists
- Emergency planners
- Facility and maintenance professionals
- Volunteers
- Communications
- Human resources

What does Environmental and Community Health Division do?



Environmental Health

- **Protecting the public**
- Septic inspections
- Food establishment inspections
- Public water system inspections
- Vector-borne disease surveillance
- Infectious disease investigations
- Landfill/solid waste inspections
- Health impact assessments
- Childcare facility inspections
- Safe food handling education
- Communicable disease education
- Consultation
- Food establishment complaint investigations



Community Health

- **Promoting community collaboration & healthy living**
- Chronic disease prevention education
- Facilitating community-based efforts to improve health
- Coordinating community resources for maximum impact
- Healthy relationship and sexual health education
- Senior physical fitness education
- Youth vaping prevention and tobacco cessation education
- Substance use prevention
- Emergency response planning and education
- Medical Reserve Corps
- Suicide prevention
- Behavioral health crisis intervention

What does Family and Clinic Services do?



Clinic Services

- Provide **affordable preventive healthcare**
- Wellness exams
- Reproductive health
- Sports physicals
- Immunizations
- Nutrition consultation
- Tobacco use counseling
- Cancer screening
- Sexually transmitted disease screening
- Medication management
- Limited urgent care
- Preventive pediatric oral health



Family Services

- **Promoting healthy and thriving families**
- Women, Infants and Children (WIC) nutrition
- Infant growth & development
- Nutrition assessments
- Breastfeeding consultation
- Nutrition consultation
- Nurse-Family Partnership home visiting
- Parents as Teachers home visiting

What does Administration and General Support Division do?



Administration

- Carries out the direction of the Board of Health
- Ensures good fiscal health
- Ensures responsible use of tax-payer dollars
- Works with Board of Health and executive leadership to set organizational goals and priorities
- Ensures staff have the tools and resources to succeed in their work
- Works with elected officials and other executives on policy changes and priority health issues
- Responsible for public relations
- Responsible for all personnel matters
- Monitors organizational performance



General Support

- Manages financial operations
- Ensures safe workspace for employees
- Maintains all physical structures and property
- Oversees and manages purchasing
- Maintains information technology and systems
- Ensures organizational compliance with local, state and federal laws and regulations
- Provides human resource support to staff
- Manages vehicle fleet
- Develops organizational policies and protocols
- Manages contracting

How we accomplish our work?

Essential Public Health Service 1

- Assess and monitor population health status, factors that influence health, and community needs and assets

Essential Public Health Service 2

- Investigate, diagnose, and address health problems and hazards affecting the population

Essential Public Health Service 3

- Communicate effectively to inform and educate people about health, factors that influence health, and how to improve it

Essential Public Health Service 4

- Strengthen, support, and mobilize communities and partnerships to improve health

Essential Public Health Service 5

- Create, champion, and implement policies, plans, and laws that impact health

Essential Public Health Service 6

- Utilize legal and regulatory actions designed to improve and protect the public's health

Essential Public Health Service 7

- Assure an effective system that enables equitable access to the individual services and care needed to be healthy

Essential Public Health Service 8

- Build and support a diverse and skilled public health workforce

Essential Public Health Service 9

- Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement

Essential Public Health Service 10

- Build and maintain a strong organizational infrastructure for public health

What are our strategic goals?

- 2022-2027
 1. Develop and maintain a skilled and engaged public health workforce
 2. Foster trust and confidence in Southwest District Health
 3. Innovate to address emerging public health issues
 4. Assess and address community needs to improve health and wellbeing

Next steps

Practical ways you can carry out your role

- Attend and engage in board meetings – be a voice for the nearly 300,000 residents of the district
- Elevate concerns early with SWDH leadership
- Support SWDH – county collaboration
- Support a strong public health infrastructure

What you can expect from SWDH

- Responsive to your needs and needs of your constituents
- Provide professional expertise and consultation
- Responsible use of tax-payer dollars
- Collaborate on matters impacting the health and vitality of your community



Board of Health

Role, Responsibilities, and Authorities

Definitions:

Director. The director of a public health district created and appointed pursuant to Chapter 4, Title 39, Idaho Code.

District Board. The district board of health of each public health district created and appointed pursuant to Chapter 4, Title 39, Idaho Code. All members shall be chosen with due regard to their knowledge and interest in public health and in promoting the health of the citizens of the state and the public health district (39-411(2)).

Public Health District. The districts created and designated pursuant to Chapter 4, Title 39, Idaho Code.

Rules Governing Contested Cases. The rules that govern appeals or contested cases adopted by the districts pursuant to the Administrative Procedures Act, Chapter 52, Title 67, Idaho Code.

Role:

- The Board of Health has the authority, control, and supervision of the public health district (IC 39-410).
- Advise, advocate, and consult with Southwest District Health (SWDH) staff on matters related to public health priorities, policy making, finance, legal authority, and partnerships.
- Support the health district to provide the basic health services of public health education, physical health, environmental health, and public health administration, but this listing shall not be construed as to restrict the service programs of the health district solely to these categories (IC 39-409).
- Provide input and insights into the leading health priorities in the local community.

Responsibilities:

- Supervision of all public health district programs (IC 39-410).
- Administer and enforce all state and district health laws, regulations, and standards (IC 39-414).
- Adhere to Board of Health by-laws.
- Do all things required for the preservation and protection of the public's health and to support preventive health (IC 39-414).
- Determine the location of its main office and to determine the location, if any, of branch offices (IC 39-414).
- Enter into contracts with any governmental or public agency. This authority is limited to services voluntarily rendered and voluntarily received and shall not apply to services required by statute, rule, and regulations, or standards promulgated pursuant to this act or chapter 1, title 39, Idaho Code (IC 39-414).



- All money or payment received or collected by gift, grant, devise, or any other way shall be deposited to the respective division or subaccount of the public health district in the public health district fund (IC 39-414).
- Establish fiscal control policy required by the state controller (IC 39-414).
- Cooperate with state board of health and welfare, the department of health and welfare, the board of environmental quality and the department of environmental quality (IC 39-414).
- Enter into contracts with other governmental agencies, and this act hereby authorizes such other agencies to enter into contracts with the health district, as may be deemed necessary to fulfill the duties imposed upon the district in providing for the health of the citizens within the district (IC 39-414).
- Purchase, exchange or sell real property and construct, rent, or lease such buildings as may be required for the accomplishment of the duties imposed upon the district and to further obtain such other personal property as may be necessary to its functions (IC 39-414). Public health districts do not have access to the state's building fund.
- Accept, receive and utilize any gifts, grants, or funds and personal and real property that may be donated to it for the fulfillment of the purposes as outlined in this act (IC 39-414).
- Establish a charge whereby the board agrees to render services to or for entities other than governmental or public agencies for an amount reasonably calculated to cover the cost of rendering service (IC 39-414).
- Enter into lease of real or personal property as lessor or lessee (IC 39-414).
- Administer and certify solid waste disposal site operations, closure, and post closure procedures established by state or regulation (IC 39-414).
- Select a board member to serve as trustee on the board of trustees of the Idaho district boards of health (IC 39-414).
- Submit to the budget committee by the first Monday in June of each year the preliminary budget for the public health district and the estimated cost to each county (IC 39-423).
- Resolution and/or policy development, advocacy, and policy-making.
- Contribute to strategic planning efforts.
- Ensure ethical practice of the board and health district. Ethical standards are established by the SWDH leadership team with approval of the board.
- Serve as a strong link between the health district and community, local government, and community organizations.
- Support a culture of continuous quality improvement.
- Hire and evaluate the health district director.

Authorities:

- District board by the affirmative vote of a majority of its members may adopt, amend, or rescind rules and standards as it deems necessary to carry out the purposes and provisions of this act (IC 39-416), and shall conform to the provision of chapter 52, title 67, Idaho Code.
- District board by the affirmative vote of a majority of its members may direct the district on matters as outlined in the responsibilities section above.



- Hold hearings (IC 39-417). Any person, association, public or private agency, corporation, or the district director alleging a violation of this act, the rules promulgated thereunder, or any matter within the jurisdiction of the district board, or any alleged violator thereof, may, pursuant to the provisions of chapter 52, title 67, Idaho Code, and the rules promulgated thereunder by the state board of health and welfare or the board of environmental quality, seek a hearing before the district board and/or such other relief or remedy as is provided available.
- Title 39, Chapter 4 and Title 39, Chapter 36, Idaho Code, grants authority to Public Health Districts to adopt rules, regulations, and standards to protect the environment and health of the Public Health District (IDAPA 41.08.01.000).
- Shall commence and maintain all proper and necessary civil actions and proceedings to enforce the provisions of this act and the preservation and protection of the public and is specifically directed to abate nuisances when necessary for the purpose of elimination of sources of filth, infestation, infections, communicable diseases, health hazards, and conditions not compatible with the preservation and protection of the public health. Enforcement of a final determination of the district board shall be commenced by filing an action in the district court, by any party to the board action, the board, or the director, and the introduction of final determination. (IC 39-420)
- Adopt charges or fees for services provided consisting of screening, education, consultation, record keeping, evaluation, assessment, referral, permitting, inspection, survey, and treatment (IDAPA 41.02.01.11).