

Being an Effective Local Board of Health Member

Your Role in the Local Public Health System

Being an Effective Local Board of Health Member 2.0

Congratulations! You are a vital member of the nation's public health system. You and thousands of other volunteer local board of health members provide the necessary guidance, oversight, and leadership for your local public health agency (LPHA). This role is important because it is up to you and your fellow board members to make sure that the health needs of your community are met.

The National Association of Local Boards of Health (NALBOH) has developed a series of guides to prepare you to confidently and effectively meet these varied responsibilities. This first guide is an introduction to the local public health system and your role as a board member. Additional resources are available from NALBOH to educate board members about environmental public health issues, the National Public Health Performance Standards Programs, and tobacco use prevention and control.

Welcome to public health service!

WHAT IS NALBOH?

The National Association of Local Boards of Health (NALBOH) informs, guides, and is the national voice for boards of health. In today's public health system, the leadership role of boards of health makes them an essential link between public health services and a healthy community. Uniquely positioned to deliver technical expertise in governance and leadership, board development, health priorities, and public health policy, NALBOH strives to strengthen good governance where public health begins—at the local level.

NALBOH board and members:

- Have a voice in emerging national public health policy formulation
- Have access to programs and materials specifically designed for local board of health members
- Receive training and educational materials
- Are informed about new public health issues, programs, and funding opportunities
- Serve on NALBOH committees
- Communicate and share ideas with members of other local boards of health
- Attend NALBOH's Annual Conference to receive information from national public health leaders
- Are eligible for NALBOH-sponsored grants and discounts

For more information about member benefits or to join NALBOH, please contact us by telephone, (920) 560-5644, email nalboh@badgerbay.co or visit us at www.nalboh.org.

THE ROLE OF THE LOCAL BOARD OF HEALTH

Local boards of health around the United States have different authorities for carrying out their responsibilities. Some boards enact rules and regulations, while others advise or make recommendations to the local governing body for public health. All boards of health, regardless of the extent of their legal authority, are obligated to either enact or to recommend policies that serve the interest of the public's health.

The local board of health is responsible for determining or advising on LPHA policy; adopting or making recommendations on the annual budget; determining, monitoring, and evaluating the LPHA's goals and the programs implemented to meet them; and ensuring there is adequate agency funding.

THE LOCAL PUBLIC HEALTH SYSTEM

The local public health system (LPHS) is made up of all the organizations and entities within the community that contribute to the public's health. The center of the system is the primary governmental public agency, usually the health department, responsible for protecting the public's health. In some cases, environmental public health departments operate outside the jurisdiction of the local health department, so it is important to identify the local public agency(ies) at the center of your local public health system.

There are many community examples for protecting the public's health. To encompass the various examples, this guide uses local public health agency (LPHA) to include all government bodies (e.g., health departments, environmental health departments, etc.) that deliver public health services.

With the LPHA at its center, the local public health system expands to include hospitals and clinics, healthcare practitioners, state or local agriculture departments, state or local environmental protection agencies, and schools and universities. In some communities it may also include county commissioners, mayors, city councils, drinking and waste water operators, sewage haulers, substance abuse clinics, mental health and social service agencies, the department of parks and recreations, local nonprofit organizations, places of religious worship, land use planners, federal agencies, and many more. Generally speaking, it is the LPHA that assures public health services and programs are available in the community. The board of health provides oversight of the agency.

SIX FUNCTIONS OF PUBLIC HEALTH GOVERNANCE

- 1. Policy development
- 2. Resource stewardship
- 3. Legal authority
- 4. Partner engagement
- 5. Continuous improvement
- 6. Oversight

All public health governing entities are responsible for some aspects of each function. No one function is more important than another. For more information about the six governance functions, please visit www.nalboh.org.

THE ROLE OF A LOCAL BOARD OF HEALTH MEMBER

A primary responsibility of a local board of health member is to study and to learn as much as possible about the obligations of the board, the LPHA's activities, the community's health problems, and the need for planning solutions that address these concerns.

Board members fulfill these expectations by:

- Being prepared for meetings by reading all pertinent material prior to the meeting, being informed about issues to discuss them responsibly, and researching additional information, as needed.
- Attending and actively participating in board of health meetings.
- Becoming familiar with and understanding the meeting process and following the rules of order.
- Ensuring that time at board of health meetings is set aside for updates on public health problems and what the LPHA is doing, or needs to do, in response to existing challenges.
- Involving others in LPHA functions, special events, and activities to promote and support programs and services.
- Advocating for public health by communicating regularly with community leaders and elected officials about perceived needs and possible resources.
- Serving as a liaison between the community and the LPHA, and between the health agency and the community.
- Working cooperatively with the health officer or health commissioner.
- Learning about every aspect of the LPHA and the local public health system, including identifying possible partners.
- Being patient. Changing health status, enforcing procedures, and solving public health problems takes time.

- Identifying priorities to ensure that the appropriate resources are available to meet the LPHA's long-term goals and objectives.
- Making decisions that must be made, even during adverse public reactions and/or opinions of the governmental body responsible for the appointment or election of board members.
- Knowing the difference between private problems and those that impact the public's health.
- Taking responsibility when asked and following through on commitments.
- Being visionary by planning where the board and the LPHA should be in two to three years and actively participating in identifying and training new board members who support this vision.

While these functions are basic responsibilities of any board, members must be aware that their decisions, deliberations, and actions are part of the public record. As such, they or their actions may become highly visible in the community. Consequently, the board must ensure that it is operating within its legal duties and is operating under the principles of good faith.

It is important to remember that the board is responsible for the financial stability of the LPHA. It is imperative that all board members understand the agency's financial statements and ask questions to ensure clear understanding of these matters.

As a member of a local board of health, you have accepted a significant responsibility to your fellow board members, your local public health agency, and your community. You are indeed a vital component of the grassroots of the nation's public health system. NALBOH provides education, technical assistance, and advocacy to strengthen local boards of health in promoting and protecting the health of their communities. We look forward to assisting you as you serve the public.

PUBLIC HEALTH'S GUIDING PRINCIPLES

Local public health agencies in the United States rely on the three Core Functions of Public Health to guide them. The functions are assessment, policy development, and assurance. Together, the three functions define the roles of federal, state, and local agencies within the public health system. All public health agencies, including the LPHA, are responsible for assessing the status of public health in their communities, developing policies to address public health needs, and assuring that public health needs are met.

While the three Core Functions provide guidance to agency leaders in what they should be doing, the Ten Essential Public Health Services describe how these agencies should carry out the assessment, policy development, and assurance functions. The Ten Essential Services are the actions that the LPHA should take to guarantee that community health needs are met.

Regardless of their legal responsibilities, local boards of health are guided by these principles. A state's constitution or legal code grants the boards of health their specific responsibilities and authorities. For example, in one state, a board's authority may be to advise or make recommendations about public health activities; while in another state, the law permits the

board to pass public health rules and regulations and to enforce them.

Common public health principles standardize the way public health officials work to improve community health. While each community has specific health concerns and population needs, the public health principles provide a uniform framework for analysis and response.

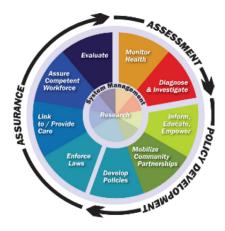
Because the Ten Essential Services define the actions of public health officials, including local board of health members, they are discussed in greater detail in the following pages.

THE TEN ESSENTIAL PUBLIC HEALTH SERVICES

The Ten Essential Public Health Services detail a list of activities associated with the assessment, policy development, and assurance functions of the LPHA.

The following are the Ten 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 healthcare when otherwise unavailable.
- 8. Assure a competent public health and personal healthcare workforce.
- 9. Evaluate the effectiveness, accessibility, and quality of personal and population-based health services.
- 10. Research new insights and innovative solutions to health problems.



Each of the Ten Essential Services is associated with at least one core function. As Figure 1 shows, the last service (Research) is vital to all services and may be linked to all the core functions.

Local board of health members are responsible for making sure the Ten Essential Services are performed in their community. By identifying what public health services are needed locally, making sure that these services can be provided, and promoting local needs to the state and federal government, local boards of health fulfill their core function responsibilities.

Most board members do not actually monitor, diagnose, evaluate, or actively perform the Ten Essential Services in the community. The board members work behind the scenes to create the circumstances in which the LPHA staff provide the Ten Essential Services.

Each essential service requires that the board of health ensure five roles and responsibilities. The five assurances are that:

- 1. the board and LPHA are legally required to provide the service;
- 2. the LPHA has the resources (e.g., financial, technical, personnel) to carry out the service;
- 3. the board of health establishes policies for the delivery of the service;
- 4. there is regular evaluation of the service or program to ensure that it is meeting its intended goals; and
- 5. the board and LPHA solicit input from partners, stakeholders, and the public about the service or program.

Using the first essential service – to monitor health status to identify community health problems – a local board of health's responsibility may include the following:

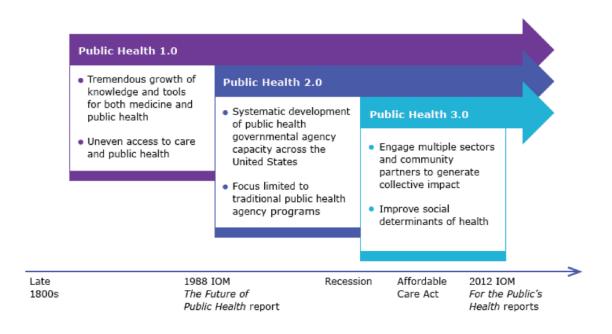
- Assure legal authority: The board may call for a community health needs assessment.
 Working with other partners or groups, the board defines and clarifies the roles, responsibilities, and relationships of the LPHA to avoid overlapping or conflicting authority.
- Assure resources: If conducting a needs assessment, the board ensures that the project has
 the necessary staff, money, technology, and resources available to complete it. Board members
 do this by overseeing and approving the budget.
- Assure policy making: Once the needs assessment is complete, the board may define
 new policies to address health issues. The new policies define a program's goals, its intended
 outcomes, and evaluation process.
- **Assure accountability:** Reviewing and requesting regular program evaluation ensures that services are meeting its intended needs and achieving the desired targets and goals.
- Assure collaboration: During the assessment process, the board should hold public
 meetings to gather information about the community's perceived public health needs,
 concerns, and issues. The board may act as a liaison between other partners and
 stakeholders during this process.

What is Public Health 3.0? A Renewed Approach to Public Health

*Adapted from the Center for Disease Control and Prevention Website

Public Health 3.0 builds on the extraordinary successes of our past. *Public Health 1.0* refers to the period from the late 19th century through much of the 20th century when modern public health became an essential governmental function with specialized federal, state, local, and tribal public health agencies. During this period, public health systematized sanitation, improved food and water safety, expanded our understanding of diseases, developed powerful prevention and treatment tools such as vaccines and antibiotics, and expanded capability in epidemiology and laboratory science. This scientific and organizational progress meant that comprehensive public health protection — from effective primary prevention through science-based medical treatment and tertiary prevention — was possible for the general population.

Public Health 2.0 emerged in the second half of the 20th century and was heavily shaped by the 1988 IOM report *The Future of Public Health* (12). In that seminal report, the IOM posited that public health authorities were encumbered by the demands of providing safety-net clinical care and were unprepared to address the rising burden of chronic diseases and new threats such as the HIV/ AIDS epidemic. The report's authors declared, "This nation has lost sight of its public health goals and has allowed the system of public health activities to fall into disarray."



With this call to action, the IOM defined a common set of core functions, and public health practitioners developed and implemented target capacities and performance standards for governmental public health agencies at every level. During the 2.0 era, governmental public health agencies became increasingly professionalized.

Public Health 3.0 refers to a new era of enhanced and broadened public health practice that goes beyond traditional public department functions and programs. Cross-sectoral collaboration is inherent to the Public Health 3.0 vision, and the Chief Health Strategist role requires high-achieving health organizations with the skills and capabilities to drive such collective action. Pioneering US communities are already testing this approach to public health, with support from several national efforts.

Find more information about Public Health 3.0, by going to: https://www.cdc.gov/pcd/issues/2017/17 0017.htm

