Flu and COVID-19
Shot Clinic

NCDHD Board of Health

Date: September 28

Time: 9 am to 4 pm

NCDHD offers these vaccinations without an appointment:

- Flu
- Updated COVID-19
- Tdap (Tetanus, Whooping Cough, Diptheria)
- Pneumonia
- Shingles
- for other vaccinations please call 402-336-2406 ahead of time

Bring your insurance card (or a copy) and COVID-19 card (if applicable) with you. NCDHD also accepts donations for those persons without insurance or whose insurance doesn't cover vaccinations. Contact our office if you have questions.











NORTH CENTRAL DISTRICT HEALTH DEPARTMENT (NCDHD) BOARD OF HEALTH MEETING AGENDA

Friday, September 15th, 2023—Immediately following the budget hearing NCDHD 422 East Douglas Street, O'Neill, Nebraska 68763

	Agenda				
Call to Order Kelly Kalkowski,					
1.	Notice of Publication	BOH President			
2.	Notification of Open Meetings Act				
3.	Roll call (introductions of new Board Members and non-Board				
	Members in attendance).				
4.	Comments or additions to the agenda				
	The Board of Health reserves the right to add items to this agenda that				
	are emergency in nature as described in NE Revised Statue § 84-1411.				
5.	Approval of the agenda				
Approv	al of previous meeting minutes	Kelly Kalkowski,			
1.	Motion to approve the minutes from July 28 th , 2023 meeting.	BOH President			
	val of proposed 2023-2024 Annual Budget				
1.	Motion to approve the proposed 2023-2024 budget.				
Financ	ial Report	Heidi Kuklis, Executive			
1.	Review of July & August finances	Director			
	 Motion to approve the finances as presented for July & 				
	August.				
2.	Audit Updates	Chuck Abels, Auditor			
	1. Presentation of the Annual Audit				
	i. Motion to accept the annual audit as presented.				
	2. Single Audit	Fred Porter, Auditor			
	i. Motion, if needed.				
	3. IRS 2021 Payroll Audit update				
	4. Audits for FY 2023				
	i. Motion to proceed with vendors.				
Money	Management	Heidi Kuklis, Executive			
1.	Update on Money Management Progress (NPAIT)	Director			
2.	Safety Deposit box- Bank First				
	a. Motion to open a safety deposit box at Bank First, if				
	needed, with the signors on the bank account also being				
	signors for the safety deposit box.				
Surplu		Heidi Kuklis, Executive			
1.	Update on Sale	Director			
	Update on vehicle auction				
Strate	gic Plan	Whitney Abbott & Heidi			
1.	Update on the Strategic Plan/ Feedback	Kuklis, NCDHD			







Approval of NCDHD Policies	Heidi Kuklis, Executive		
Motion to approve all NCDHD policies	Director		
Program Reports	Heidi Kuklis, Director		
 Full reports included in packet. 	Kelli Dempster,		
2. Kelli- Mental Health Awareness Walks	Prevention		
3. Jennifer- Flu shot season	Jennifer Booker,		
	Immunizations		
COVID-19 Boosters	Heidi Kuklis/ Jennifer		
1. Update on purchase/plan	Booker, NCDHD		
Director's Report	Heidi Kuklis,		
1. New staff	Executive Director		
2. Armory claim close out			
3. Difficulty hiring a nurse- wellness position.			
4. Cyber protection			
5. Electronic Health Record System (EHR)			
6. Review of contracted services			
7. Staffing changes			
8. New funding			
9. Commissioner/supervisor visits			
10. Board vacancies and terms			
11. Outside the window for EEOC personal file			
12. Necessary building maintenance			
 a. Building committee/use of executive committee 			
Audit Committee Update	Dean Smith,		
	BOH Audit Committee		
	Member		
Past admin emails archived	Heidi Kuklis, Executive		
 Motion to close R. Wiese email and archive to a shared inbox. 	Director		
Executive Session	Dean Smith, BOH Audit		
The Board of Health reserves the right to enter Executive Session in order to	Committee		
protect the public interest with respect to discussion regarding litigation,			
personnel, and other matters listed in the Nebraska Revised Statute 84-1410.	Kelly Kalkowski, Board		
1. Audit Committee	President		
2. Health director 6 mo evaluation			
Public Comment			
This is an opportunity for members of the audience to be heard for a maximum			
of 3 minutes regarding any topic not on the agenda as it relates to the Board of Health.			
Next Board Meeting			
Approval to Adjourn			

This meeting is held within the guidelines of the Nebraska Open Meeting Act. A copy of the written materials discussed in this meeting are available. Neb. Rev. Stat. § 84-1412. An agenda is kept current up to twenty-four hours prior to the meeting. The agenda may be viewed at North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska. Any Agenda items may be removed, tabled, or reordered at any time at the discretion of the Board President.

Questions: Please contact Heidi Kuklis, Executive Director (402)336-2406

PO Box 191 | 422 E Douglas Street | O'Neill, NE 68763 (402) 336-2406 | ncdhd.ne.gov







NORTH CENTRAL DISTRICT HEALTH DEPARTMENT (NCDHD) BOARD OF HEALTH MEETING MINUTES Friday, July 28, 2023- 10:30 am NCDHD 422 East Douglas Street, O'Neill, Nebraska 68763

Call to Order

- Notice of Publication- Publication was made on the NCDHD website, NCDHD front door and published by the Summerland Advocate, Pierce Leader, Springview Herald, Verdigre Eagle, KVSH, KBRB, and KBRX.
- 2. Notification of Open Meetings Act- K. Kalkowski acknowledged the Nebraska Open Meeting Law was posted in the room. A continually current agenda is available at the NCDHD office.
- 3. Roll call at 10:32 am. Present: D. Bauer; D. Breiner, D. Fox, W. Hollenbeck, K. Kalkowski, T. Kuether, K. Mackeprang, M. McConaughey, C. Plate, D. Pribil, D. Smith, Dr. Tusha
- 4. Comments or additions to the agenda- No additions or changes.
- 5. Approval of the agenda Motion #1 by Doug Fox and seconded by Wade Hollenbeck to approve the current agenda as is. All in favor; Motion carried.

Approval of previous meeting minutes

Motion #2 by Carol Plate and seconded by Kevin Mackeprang to approve previous May meeting minutes. All in favor; Motion carried.

Financial Report

- 1. Review of May & June finances.

 Motion #3 by Dennis Bauer and seconded by Dr. Ken Tusha to approve May and June finances as presented. All in favor; Motion carried.
- 2. 2021-2022 Annual Audit progress update provided by Heidi Kuklis. Audit is still in progress with Severson, Lammers, and Abel.
- 3. 2022 Single Audit progress update provided by Heidi Kuklis. Audit is still in progress with Fred Porter.
- 4. IRS Payroll audit progress updated provided by Heidi Kuklis; IRS auditing 2021 payroll reporting.

Money Management

- 1. Update of Money Management Progress
- 2. Presentation from NPAIT by Walker Zulkoski, NPAIT, Vice President
 - a. Motion #4 by Dennis Bauer and seconded by Dr. Ken Tusha to sign resolution with NPAIT and all signors remain the same as other bank accounts. 11 of 12 in favor; voting against D. Smith; Motion carried.
 - Motion #5 by Doug Fox and seconded Dennis Bauer to allow moving of money from Pinnacle Bank account to NPAIT and close the Pinnacle Bank account. 11 of 12 in favor; voting against D. Smith; Motion carried.

Surplus Sale

1. Sale of Vehicle









Motion #6 by Dean Smith and seconded by Tom Kuether to sell 2012 Chevy Equinox using Auction Time. All in favor; Motion carried.

2. Notification of non-vehicle surplus sale. Opportunity to view items. No comments or concerns provided.

Strategic Plan- 10 Essential Services of Public Health

- 1. Strategic Plan Timeline- presented to board.
- 2. 10 Essential Services Presentation by Colleen Svoboda, UNMC College of Public Health
- 3. BoH Feedback- Board participation in a SWOC analysis to support strategic planning efforts.

Program Reports

- 1. Full reports included in packet. Greater emphasis on partnerships.
- Overview of FIT testing/Infection Control Project in Nursing Homes presented by Danielle Roessler, NCDHD ERC; Amy Latzel NCDHD Environmental & Wellness; Elizabeth Parks, RN Epidemiology.

Tri-County Hazard Mitigation Plan

1. Plan presented by Danielle Roessler, NCDHD ERC.

Motion #7 by Doug Fox and seconded by Dustin Breiner to approve the Tri County Hazard mitigation Plan. All in favor; Motion carried.

Director's Report

- 1. Introduction of new employees- Mindy Spencer as Miles of Smiles Coordinator; Nancy Turpin as Program Assistant; Kirsa Sommersted as Community Impact Coordinator.
- 2. Armory reimbursement- Overpaid by FEMA. Paying back \$915. Will proceed with close out following this payment.
- 3. Building acquisition update/parking- purchased by another buyer. We are out of building 7/31. Potential parking limitations may present with the purchase.
- 4. ARPA funds update- Van purchased. Neighboring building has changed directions and sold to other buyers, so will change direction of this funding.
- 5. Inventory system- utilizing Salamander Live, the process is well underway, moving to the basement to inventory all additional materials and equipment.
- 6. Divvy Credit Card Update-system up and running. Working well.
- 7. Qualtrics Follow Up- Followed up with NALHD on additional questions at last meeting. The agreement we have with Qualtrics goes thru June 29, 2024. Re-evaluate next winter how we proceed with an extension or future contract.
- 8. Cyber Protection- Have CFC quote, pending Cowbell quote. Phishing and cyber protection training in place since June.
- 9. Vaccine billing and preparation for the fall- Believe COVID boosters will still go through state. Planning from state and feds is not finalized; a lot of mixed, unsolidified information. Vaccine is not yet approved. May have to buy private stock vaccine. May need special meeting for purchase.
- 10. Electronic Health Record System (EHR)- continue review process. Have research down to 3 products. CureMD, Patagonia, and Nightingale Notes.

11.







- 12. Review of Contracts- looking at budget, discussion of Zelle, Eide Bailey, and Ideal Payroll contracts.
- 13. Staffing Changes- 3 new staff members. Currently 2 open, new positions. One utilizing state workforce development funding for Wellness Nursing position. Another through a public/private partnership with Heart Corp/American Heart Association to hire a Health Educator position. Both will be paid by DHHS and HeartCorp respectively.
- 14. New funding- evidence practiced wellness with Area Agency on Aging, American Heart Association Opportunity for a staff member positioned in our office, Region 4 workforce retention funding, mpox funding, Medicaid expansion education funding.
- 15. Commissioner/Supervisor visits- Heidi is visiting all groups to do a general overview. Also discussing the Miles of Smiles program. Appreciate support.
- 16. Updated Bylaws- copy provided in packet.
- 17. Board vacancies and terms- Reviewed. Vacancies in Cherry and Keya Paha citizen positions. Review terms.

Audit Committee Update

Board member D. Smith provided an update that no findings have been identified. No further action taken. Tabled discussion and further investigation until additional summary of audit is provided at the next meeting.

EEOC Compliant Outcome

The NE Equal Opportunity Commission determined no reasonable cause as the final determination of Susan Taylor appeal. Evidence fails to support the allegation of discrimination. Should the complainant wish, they could opt to file a suit independently within 90 days of the EEOC determination (as of June 14th).

Public Comment

No public comment.

Next Board Meeting

The next board of health meeting will be in person at NCDHD (422 E Douglas St. O'Neill) on Friday, September 15, 2023, following the annual budget hearing which begins at 10:30.

Approval to Adjourn

Meeting adjourned by President K. Kalkowski at 2:10 p.m.









Present	Board Member	1	2	3	4	5	6	7
	Regina Krebs, Antelope County Supervisor							
Υ	Dean Smith, Antelope County Citizen	Υ	Υ	Υ	N	N	1Y	Υ
	Greg Hull, Boyd County Supervisor							
Υ	Kelly Kalkowski, Boyd County Citizen	Υ	Υ	Υ	Υ	Υ	Υ	Υ
Υ	Dennis Bauer, Brown County Commissioner	Y	Y	1Y	1Y	2Y	Y	Υ
Υ	Carol Plate, Brown County Citizen	Υ	1Y	Υ	Υ	Υ	Υ	Υ
Υ	Mike McConaughey, Cherry County Commissioner	Υ	Y	Y	Y	Y	Y	Y
	Vacant- Cherry County Citizen							
Υ	Dustin Breiner, Holt County Supervisor	Υ	Υ	Υ	Υ	Υ	Υ	2Y
Υ	Denise Pribil, Holt County Citizen	Υ	Υ	Υ	Υ	Υ	Υ	Υ
	Corey Nilson, Keya Paya County Commissioner							
	Vacant- Keya Paha County Citizen							
Υ	Kevin Mackeprang, Knox County Supervisor	Υ	2Y	Y	Y	Y	Y	Υ
	Jean Henes, Knox County Citizen							
Υ	Tom Kuether, Pierce County Commissioner	Υ	Y	Y	Y	Y	2Y	Υ
	Gary Hilkemann, Pierce County Citizen							
Υ	Wade Hollenbeck, Rock County Commissioner	2Y	Y	Y	Y	Y	Y	Υ
Υ	Doug Fox, Rock County Citizen	1Y	Υ	Υ	Υ	1Y	Υ	1Y
Υ	Kenneth Tusha, DDS	Υ	Υ	2Y	2Y	Υ	Υ	Υ
	Ronald Morse, MD							
	*attended via zoom							
			_	-	_	•		

Guests

Heidi Kuklis, NCDHD Executive Director

Elizabeth Parks, NCDHD Epi

Charissa Sladek, NCDHD Office Mgr.

Walker Zulkoski, NPAIT Vice President

*Tana Fye, Fye Law Offices

*Colleen Svoboda, UNMC Public Health

*Whitney Abbott, NCDHD, Program Manager

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Department, 422 East Douglas Street, O'Neill, Nebraska. Any Agenda items may be removed, tabled, or reordered at any time at the discretion of the Board President.

Dean Smith, Secretary	_



The North Central District Health Department's Mission is to promote and protect the health and wellness of our communities.

Healthy People, Healthy Communities



402.336.2406 | ncdhd.ne.gov





Program Updates September 2023



Kirsa had the opportunity to go to the Latino Dialogue Session in Kearney. She heard first-hand what the Hispanic and Latino communities need and what actions can be taken for better inclusion and health equity in Nebraska.

Social Determinants of Health (SDOH) survey launch Progress has been made in gaining indigenous contacts and developing relationships with these communities. Kirsa met in-person with Santee tribal members to introduce herself and learn how we might be of better service. Work will continue to provide these indigenous and other minorities with opportunities for inclusion in community coalitions and events.



A social determinants of health (SDOH) survey has been implemented at clinics, and resources are being shared as needed. This program is being updated and adjusted as knowledge is gained regarding SDOH gaps, individual needs, and preferences.

The self-reporting blood pressure (SMBP) program has been developed and is ready to be launched upon final approval. Since this is a new program, it will be adjusted and changed to meet the needs of the community we service.

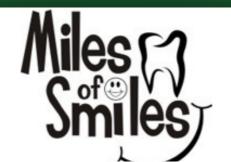








- Credentialed our new Hygienist with MCNA.
- Working on credentialing with the three new dental providers - will be in effect starting in 2024.
- Created on online registration form for Miles of Smiles, they can now donate via online registration with a card if they prefer that over cash or check.
- Printing registration/consent forms, mailing, and coordinating with school to get ready for clinics. The first Clinic is September 6th.
- Working on education/training that is required for our NAHLD grant.









We had 12 clinics in these 2 months. We gave 13 Covid vaccines during this time, 4 primary doses and the rest were Boosters. Also given were 15 Tdap, 5 polio, 5 MMR, 14 Shingrix, 3 varivax, 3 Meningitis ACWY, 6 HPV, 2 Meningitis B, 1 Typhoid, 2 Japanese Encephalitis, 4 Hep B and 2 Hep A. We had several requests kids get 7th grade shots, some immigration catch ups, an adult traveling overseas, and a new area family catching up.

Help Us Serve You

We are still needing any information on contacts for food pantries or food banks in the district. We are looking at partnering with our local food sources for flu shot clinics and some other outreach this fall. Please if you know any of the contacts, let them know that we will be contacting them for updates and we are on the up and up. We simply need to get our contacts updated and corrected so that we may get ahold of them in an emergency, refer the public that may call us for resources or contact them about partnering with them for future outreach projects and programs.



After several mixed messages from state and federal partners, we have some information on the commercialization of the COVID-19 vaccine this fall. The federal program called Bridge Access Program is a temporary program that is to start this fall (sometime in September, depends on FDA and ACIP approval of new vaccine) and will end on December 31, 2024. This program will work like the VFA and VFC programs to provide COVID-19 vaccines to adults who do not have insurance or whose insurance doesn't cover vaccinations. The VFC program will provide COVID-19 vaccines for children. We completed the enrollment form and have that turned in. There has been no details on if we can ask for donations with this change.

We did place a preorder with ModernaDirect for 10 doses of Children ages 6 months-11 years vaccine (single dose vials) and 300 doses of Adult, 12 years and older (single dose, prefilled syringes). We do not have any information on how many doses will come and when they will arrive.

FDA and ACIP will be meeting in September to vote on recommendations and approval for a new COVID-19 formulation this fall. We have been told these meetings will be around the 7 or 8th of sept and the week after, so we should have some clarification some.

Will update as more is learned on this.

Fall flu shot preparations:

Preparations for Fall Flu/COVID shot clinics are completed. Media plan has been set out, flyers are printed and working to get distributed. Flu shot clinics will officially start on September 15 with the Board of Health meeting and September 19 in the communities with a drive through clinic in Plainview.

Please help us to spread the word by distributing flyers in your communities and encouraging people to get their flu shot! It takes all of us to stay healthy this









Health billing is still current and up to date with claim submission. We are working to fix any errors or denials that have come back to us and get them resubmitted in a timely manner.

We are now working with the new billing platform and most issues with the upgrade have been resolved. The ERA set up is finished and running smoothly with its reporting.



We have had a change in the billing procedure for Shingrix with Medicare claims. The program we are using is TransactRx and is very efficient at submitting the Part D pharmacy claims electronically. When we submit the claim, we will have the exact total that will be paid by each company and that remit will be sent within 30 days. This is the platform we will also use for the new RSV vaccine.

The monthly recap is following....

July- \$5393.48 August- \$2138.40

<u>Emergency</u> <u>Response</u>



Program Notes

Since the last Board of Health Meeting in July ERC
Danielle Roessler has attended numerous trainings and
exercises: the Annual Nebraska Disaster Behavioral
Health Exercise, Disaster Behavioral Health Training,
Mpox prevention through Vaccination, and Hospital ICS
training.



She has attended Hazard Mitigation Planning meetings with the Santee Sioux Nation to develop a plan to present to the Board of Health and FEMA, this process is nearing completion. Danielle attended a reunification meeting in Brown County to gather volunteers and discuss reunification training/exercises for the school. She met with several local hospitals and long-term facilities with Dennis Colsden from RROMRS to discuss preparedness and distribute PAPRs (Powered Air Purifying Respirator System) supplied by the Health Care Coalition(HCC).



Danielle has been meeting with RROMRS, long-term and assisted living facilities, and other ERCs in the region to help establish regular interactions in each health district between facilities as well as appoint members to regularly attend RROMRS meetings. She has also been meeting with the region to discuss next steps as there will be several staff from other departments leaving.

She also attended an initial meeting for a potential Hazard Mitigation Planning session for Boyd, Keya Paha, Rock, Brown, and Cherry Counties to discuss the process and gauge public interest. FIT testing for several of the local long-term and assisted living facilities has been provided and supplies have been distributed. The health district is nearing 100% participation in the initial survey for FIT testing and is hoping for every facility to complete the program.

Danielle was chosen to appear on a panel at the Emergency Preparedness Seminar in October.



Program Notes

To show case coalition efforts and increase capacity:

#It'sokaytonotbeokay Walk:

Butte Pancake Days- June 30 Stuart Parade -July 4th Spencer NE

O'Neill Summerfest - Church in the Park- 16th

(Also provided UV flashlights for concert event) Holt County Fair- August 11th

Atkinson Hay Days- August 17th

Compliance Checks:

Trying to get funding out in a timely manner

Community Presentation Partnerships:

Bright Horizons(Human Trafficking)
O'neill Public Library(Human Trafficking)

In the works: St Marys(Human Trafficking)

County Commission Visit Dates:

Antelope County October 5
Pierce County October 16
Boyd County October 24

Understanding the Opioid Crisis:

July 21st in O'Neill at NCDHD Verdigre September 27 Chambers School Looking for 2 more locations

Prevention Distribution & Coalition Recruitment

Medication Lock Boxes, Prevention Resource Guide, Prevention Flashdrive, Coalition Flyer to Elementary-High School:

Cody Kilgore: Valentine: Keya Paha: West Boyd: O'Neill Public: Pierce: Plainview: Osmond

Prevention Coordinator and Community Impact worker met with Santee Community (Roger Trudell Extension Coordinator @NICC; Kameron Runnels Vice President Chairman; Doug Widow Prevenion coordinator at Wellness Clinic

August:

NCDHD Prevention Corner-

Talking to schools about setting up an prevention activity zone to reduce kids playing unsupervised and help teachers keep kids in seats

Mental Health First Aid Boxes

Goal is to place boxes in higher risk locations throughout NCDHD area

Food Pantry:

Amy Shane with NE Children and families and partner in Holt/Boyd coalition will be applying for a \$5,000 grant to set up food pantry cabinets in a few locations in Holt/Boyd area

Holt Boyd Community
Connections
Collaborative
#It'sokaytonotbeokay

Prevention distribution & Coalition recruitment

Stuart 4th of July Parade

Butte Pancake Days















Current Goals:

Collaboratively integrate behavioral health care (BHC) into the CATCH rural Integrated Care Coordination Network (ICCN) program that is inclusive of both public health and primary care.

- · Assess and develop the CATCH Network's capacity to sustain the Integrated Care Coordination Network (ICCN) with behavioral health care (BHC) services into the ICCN.
- Develop and implement an efficient and effective screening/referral/follow-up process from physician clinics and BHPs to LHDs for highrisk chronic care patients with hypertension, diabetes, and depression who have selected Social Determinants of Health (SDOH) issues or needs.
- · Build Electronic Medical Record (EMR) capacity to collect, analyze, and share data between CATCH Network members and utilize data for quality reporting.



9 Radon kits have been sold July-August 2023

- NCDHD continues to encourage Radon sales. Radon education and kits sales are available in office, online and community outreach such as the farm and home shows.
- · HQUIP (Healthcare Quality Improvements Platform) is in full swing as we have partnered with Avera Creighton and Avera St Anthonys Hospitals to encourage those that have had exposure to high Radon levels to be knowledgeable about lung cancer screening and where screening sites are.

Goals:

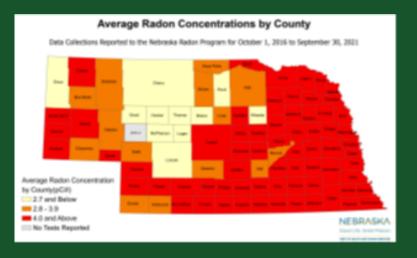
 Reach out to other area critical access hospitals in our district and partner with them to increase awareness of lung cancer screenings.

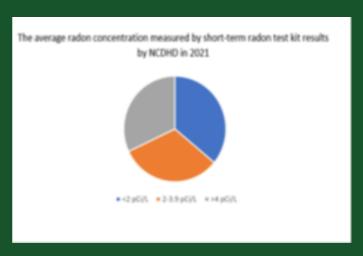
· Continue to educate and sale radon kits.

Radon is a radioactive gas that is naturally released in the air from rocks and soil. It can be found in the air outside and can get inside buildings and homes, where it can build up. There is no known safe level of radon. Aiming for the lowest radon level you can achieve in your home will reduce your risk of harmful health effects, including lung cancer.

NCDHD makes short-term Radon testing kits available for a reduced cost of \$10/kit.

Having radon levels at or above 4.0 pCi/L is considered dangerous for your health. The short-term radon tests distributed in the NCDHD area reflected that 43% of homes that were tested were at or above this level. These homes should be mitigated.





Water Infrastructure Improvements for the Nation



The Nebraska Department of Environment and Energy (NDEE), in cooperation with the Nebraska Department of Health and Human Services (DHHS), has been awarded a Water Infrastructure Improvements for the Nation (WIIN) Act grant from the U.S. Environmental Protection Agency. These funds will be used to create a voluntary lead sampling and analysis effort of drinking water in childcare facilities, preschools, and public elementary schools across the state.

To date, community wide response to our awareness initiative has been tremendous. As we proceed and develop a specific course of action, we

intend to keep parents and the public at large informed every step of the way.

- · Currently still encouraging licensed daycares and schools to test. The state sent out a letter in August to all licensed daycares to encourage testing.
- · New remediation reimbursement guidelines and how to apply have been released.

Goals:

- NCDHD continues to reach out to licensed daycares and schools within our district to encourage free testing.
- · Continue to educate the importance of lead testing and keeping a safe environment for our children.



West Nile



We received results back from our Week 14 mosquito pools. We continued to see positive pools detected, albeit lower than last week. There were 9 new positive WNV mosquito pools (highlighted in yellow in the mosquito pool Excel file). Currently, 209 WNV mosquito pools have been detected this season. For comparisons of this year to the 2022 season through the first 14 weeks of surveillance:

	2023 Season	2022 Season
WNV Positives	209	29
Mosquito Pools Tested	1344	655
Culex Tested	35841	8473

Over the previous 5 years (2018-2022) we have averaged 33.0 WNV positives through week 14. We are about 6x higher than that at present.

Additionally, we had our first positive St. Louis Encephalitis (SLE) virus mosquito pool detected in another district. We typically see 1-2 SLE positive mosquito pools each year. SLE causes a disease with similar symptoms to that seen with WNV. The transmission cycle is also virtually the same as WNV. Prior to the introduction of WNV to Nebraska, SLE was the primary mosquito-borne disease seen in Nebraska.

NCDHD continues to educate the public through social media posts and updated PSA on local radio stations. Also, sending out awareness to local clinics and providers when a positive has been detected in that area.

We are seeing a decline in the numbers of mosquitoes collected in Holt County currently, but clearly the positive pools are still high



\$45,901.11

has been billed since last BOH

primarily quarterly billing January April July October October is the next big billing month. Whitney will bill for 438, 560,620,554,726, and 896 by the end of September.

Since the July 2023 BOH update, \$45,901.11 has been billed:

\$ 2,008.00 801

\$23,386.43 400

\$ 2,270.00 801

\$1,668.68 615

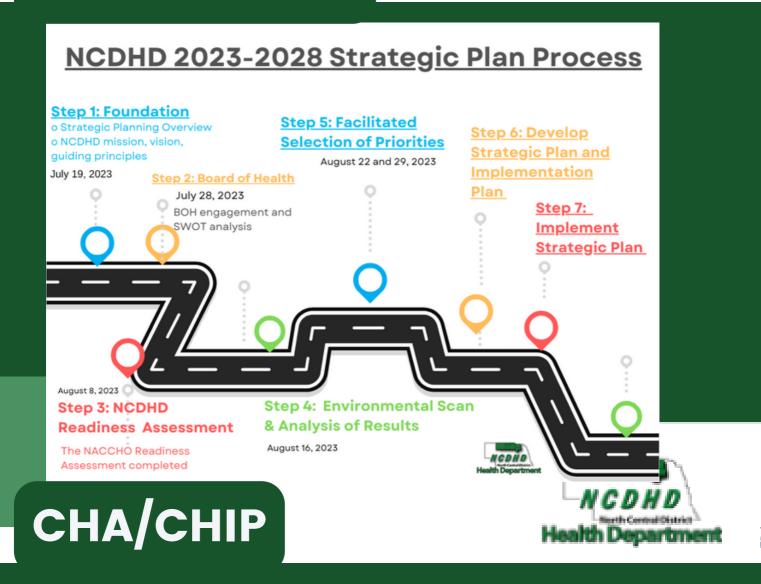
\$ 536.00 801

\$1,032.00 801

\$ 15,000.00 630

Accreditation





Since July 2023 BOH update, one partner meeting was conducted on Septmeber 7th. Partners reviewed the Community Partner Assessment in preparation for the next CHA cycle. The next CHIP meeting will be October 26th.

CHIP Goal #1: Improve Cardio Vascular Health
CHIP Goal #2: Improve Mental Health



Program Notes



completed communicable disease case investigations -Trainings: Healthcare IPC:
Foundational Training, NEHANational Summit, UNMC Project
ECHO, August Surveillance Call, two
COCA calls on Measles and Influenza
and midseason vectorborne update, .

-NCDHD continues to notice an uptick in rabies testing and calls into the office.

Received several unsuitable labs for Rabies testing over the last two months. Disseminated information on handling, packaging and shipping of specimens to our local veterinarian clinics.

-Seeing an uptick in COVID cases throughout the state and district. Several LTC/ALF facilities have faced an outbreak over the last 4-5 weeks. We continue to act as liason and emphasize the importance of prevention and control.



Program <u>Notes</u>





-Collaborating with Longterm Care and Assisted Living Facilities on prevention and control measures, developing procedures and tool kits for dissemination. -Monthly participation in **Healthcare IPC:** Foundational Trainings for HAI/AR calls. -CDC Be Antibiotics Aware Toolkit was shared with local hospitals and outpatient clinics. -Continuing to work the state on easier ways to streamline the reporting process.



Program Notes



-2023/2024 Lead Subaward submitted in August. Funding has increased for year 3 with some minor changes with reporting and invoicing.

-Completed case interviews with follow-up to providers on when repeat testing should be performed.

NCDHD did not complete any environmental, nutritional or development assessments during this time.

-Information was shared with partners on setting up educational sessions on site for testing at well child visits, prevention and control of lead. Have received feedback from 3 area clinics.

-Region 7 Lead Summit will be held September 12-13.





Nancy has also been working on updating our Community Contact lists and has been reaching out to healthcare partners to obtain their correct contact information.

Nancy will also be serving as an extra set of hands and assisting each Program as needed.

She will be attending most clinics with Jennifer to handle all the paperwork.

She is also working with Charissa on finalizing Inventory and the Surplus sale.



Name	type	First Name	Last Name	Email Address	Cell Phone		Start in BOH position	Initial Term (Terms renew for 3 yrs)	**	Renewal Meeting at BOH
Antelope County	County Official	Regina	Krebs	rkrebs@antelopecounty.ne.gov	402-394-8699		Jan-23	2	2025	
Antelope County	Spirited Citizen	Dean	Smith	deanrsmith 57@outlook.com	402-640-2167	County	Jan-23	1	2024	
Boyd County	County Official	Greg	Hull		402-336-7939	operatio	Jan-23	3	2026	
Boyd County	Spirited Citizen	Kelly	Kalkowski	nvhadmin@threeriver.net	402-928-8421	lifetime	Feb-08	1	2024	
Brown County	Spirited Citizen	Carol	Plate	pcplate@nntc.net	402-760-0172	from	Dec-06	2	2025	
Brown County	County Official	Dennis	Bauer	dbauer1@unl.edu	402-760-1549		Jan-19	3	2026	
Cherry County	County Official	Mike	McConaughey	mmcconaughey@cherrycountyne.gov			Jan-23	2	2025	
Cherry County	Spirited Citizen	OPEN						1	2024	
District Dentist	District Dentist	Kenneth	Tusha, DDS	Tushaken@gmail.com	402-394-7254		May-08	2	2025	Mar-23
District Physician	District Physician	Ronald	Morse, MD	rmorse@gpcom.net	402-360-0901	the BOH	Mar-04	3	2026	Mar-23
Holt County	County Official	Dustin	Breiner	dustin.breiner@holtcountyne.gov	402-340-0342		Jan-21	3	2026	
Holt County	Spirited Citizen	Denise	Pribil	denisepribil@gmail.com	402-340-7016	raised in	Jan-22	1	2024	
Keya Paha County	County Official	Corey	Nilson	kpcentercom@gmail.com	402-382-8230		Jan-07	3	2026	
Keya Paha County	Spirited Citizen	OPEN						2	2025	
Knox County	County Official	Kevin	Mackeprang	kevinm@joehunhoffcpa.com	402-841-4633	or from	Feb-16	2	2025	
Knox County	Spirited Citizen	Jean	Henes	jmhenes@gmail.com	402-360-0543	retired	Jan-23	1	2024	
Pierce County	County Official	Tom	Kuether	kuether@ptcnet.net_	402-841-8882		Jan-21	3	2026	
Pierce County	Spirited Citizen	Gary	Hilkemann	ghilkemann@gmail.com	402-750-0925	c and	Oct-22	1	2024	
Rock County	County Official	Wade	Hollenbeck	wadehollenbeck@hotmail.com	402-822-0299	north of	Jan-21	3	2026	
Rock County	Spirited Citizen	Doug	Fox	dlfox@abbnebraska.com	402-394-1481		Mar-07	2	2025	
updated 9/2023										

Note term renewal is updated. Terms are staggered at the formation of NCDHD and continue on at the staggered pattern.

Personnel Policies and Procedures Directives



Heidi Kuklis,

Executive Director



North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska 68763

Date Created:	7/1/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	3/2010, 3/2016
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 1-100

Subject: Organization Description

Scope: All Employees

POLICY STATEMENT: Organizational description and responsibilities of the Department

PROCEDURE

The office of the North Central District Health Department is located at 422 East Douglas Street, O'Neill, NE 68763. Legal authority for Boards of Health and Local Health Departments is found primarily in the Nebraska Statute *Local Health Services – Article 16, Sections 71-1601 through 71-1636.*

Local Health Departments (LHD) were established through legislation passed by the State of Nebraska, LB 692, and effective May 17, 2001, for the purpose of carrying out Core Public Health Functions within their geographically defined communities. Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce and Rock Counties formed the North Central District Health Department. The core functions of public health are: Assessment, Policy Development, and Assurances. (IOM)

LB 692 further authorizes local public health departments to "include the 10 Essential Elements in carrying out the core public health functions to the extent applicable within its geographically defined community and to the extent funds are available. The essential elements include, but are not limited to, (a) monitoring health status to identify community health problems, (b) diagnosing and investigating health problems and health hazards in the community, (c) informing, education, and empowering people about health issues, (d) mobilizing community partnerships to identify and solve health problems, (e) developing policies and rules that support individual and community, health efforts, (f) enforcing laws, rules, and regulations that protect public health and the environment and ensure safety, (g) linking people to needed medical and mental health services and assuring the provision of health care when not otherwise available, (h) assuring a competent workforce within the health care industry and the public health departments, (i) evaluating effectiveness, accessibility, and quality of services within the health care industry and the public health departments, and (j) researching to gain new insights and innovative solutions to health problems."

Responsibilities of local Health Departments – General Provisions

- Assume the responsibility concerning public health and remedial care and treatment of the indigent sick people;
- Adopt measures for the control and eradication of preventable or communicable diseases;

- Use modern scientific methods of hygiene and sanitation;
- Educate the public in matters relating to public health;
- Protect the health of the public and prevent communicable diseases;
- Make all necessary sanitary and health investigations and inspections;
- Investigate the existence of any contagious or infectious disease and adopt measures to arrest the progress of the same:
- Distribute free as the local needs may require all vaccines, drugs, serums, and other preparations obtained from the Department of Health and Human Services or purchased for public health purposes by the district board of health;
- Upon request, give professional advice and information to all city, village, and school authorities on all matters pertaining to sanitation and public health;
- Establish fees for the cost of all services, including those services for which third-party payment is available;
- Implement and enforce air pollution control program(s).

The North Central District Health Department conducts business under the interlocal agreement with each of the nine counties (Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce and Rock Counties), and bylaws ratified by the Board of Health in December of 2001. The North Central District Health Department is governed by a Board of Directors which serves as the District Board of Health. LB692 states that "the District Board of Health shall consist of the following members: a. one member of each county board in the district; b. at least one physician; c. at least one dentist; d. one or more public-spirited men or women interested in the health of the community from each county in the district.

The Board of Health is responsible for approving and enacting the policies and ordinances of North Central District Health Department as prescribed within the North Central District Health Department interlocal agreement and bylaws and LB692. All North Central District Health Department employees have the responsibility to comply with Board approved policies and ordinances.

With respect to the individual responsibilities, no North Central District Health Department employee will direct the functions of any Board member, nor will any Board member direct the functions of any North Central District Health Department employee, except for the Executive Director.



North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska 68763

Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	3/2010, 3/2016
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 1-200

Subject: Employee Welcome Message

Scope: All Employees

POLICY STATEMENT: This is a welcome message from Executive Management to new employees.

Welcome new employee!

On behalf of your colleagues, I welcome you to the North Central District Health Department and wish you every success. Your skills and expertise will be a valuable addition to our growing agency in your new job position. We believe that each employee contributes directly to the North Central District Health Department's growth and success, and we hope you will take pride in being a member of our team.

This Manual was developed to describe some of the expectations of our employees and to outline the policies, programs, and benefits available to eligible employees. Employees are expected to familiarize themselves with the contents of the North Central District Health Department Personnel Policies Manual, as soon as possible, for it will answer many questions about employment with the North Central District Health Department. This printed copy is yours to keep for any future reference needed. I hope that your experience here will be challenging, enjoyable, and rewarding. Again, welcome!

Sincerely,

Roger W. Wiese

Executive Director



North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska 68763

Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	3/2010, 3/2016
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 1-400

Subject: Introductory Statement

Scope: All Employees

POLICY STATEMENT: Policies and/or procedures are designed to acquaint employees with the North Central District Health Department and provide information about working conditions, employee benefits, and some of the policies affecting employees.

PROCEDURE

Employees should read, understand, and comply with all provisions of all policies and procedures. It describes many employee responsibilities and outlines the programs developed by the North Central District Health Department to benefit employees. An objective of the North Central District Health Department is to provide a working environment that is conducive to both personal and professional growth.

No Personnel Policies Manual can anticipate every circumstance or question about policy. As the North Central District Health Department continues to grow, the need may arise and the North Central District Health Department, it's Executive Director, reserves the right to revise, supplement, or rescind any policies or portion of the Manual from time to time as it deems appropriate, in its sole and absolute discretion. All policy additions and/or deletions (unless otherwise noted in this manual) may be effective after approval by two-thirds (2/3) vote of the Executive Committee of the Board of Health and will be non-retroactive to ensure consistency. Procedures of a policy can be modified and/or corrected by administrative decision of the Executive Director.

This Manual is designed as a communication tool for employees and supervisors. It is intended to reduce the difficulties that might arise from unwritten policy, inconsistent policy, or lack of proper communications. **THIS MANUAL IS NOT A CONTRACT OF EMPLOYMENT**. An employee relationship with the North Central District Health Department is known as "at-will" employment.

This means that either the employee may resign, or the North Central District Health Department may terminate an employee at any time, with or without cause. No one other than the Board of Directors has the authority to enter into a contract of employment with you or to employ you on the basis other than employment "at-will".

Furthermore, although this Manual describes in general the policies of the North Central District Health Department, this does not guarantee that a particular procedure or policy will be strictly followed in any particular situation, and no employee has a right to insist that a particular policy or procedure be followed in any particular situation, unless the policy or procedure is required by law.

The Personnel Policies Manual describes important information about the North Central District Health Department and I understand that I should consult my supervisor and the Executive Director regarding any questions not answered in the Manual.

Since the information, policies, and benefits described herein are subject to change, I acknowledge that revisions to the Manual may occur. I understand that revised information may supersede, modify, or eliminate existing policies. Furthermore, I acknowledge that this Manual is neither a contract of employment nor a legal document. I have received the Manual and completed the Employee Orientation described below, and I understand that it is my responsibility to read and comply with the policies contained in this Manual and any revisions made to it.



North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska 68763

Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	3/2010, 3/2016, 2/2018
Revised Date:	3/2010
Approved By:	Board of Health
Approval Date:	3/2018

Policy: 2-010

Subject: Nature of Employment

Scope: All Employees

POLICY STATEMENT:

The Personnel Policies Manual is not intended to create a contractual relationship, either implied or explicit. All employees of North Central District Health Department are employees "at will". This means that there is no specific duration to the employment and that the employee may be terminated at any time, with or without cause. Nothing that is said elsewhere in this Manual or that is said by any officer, manager, supervisor or other employee can change the at-will nature of the employment. The "at-will" nature of the employment can be changed only by a written document, expressly labeled "Employment Contract", and signed by both the employee and Executive Director of North Central District Health Department. By accepting employment and continuing to work for the North Central District Health Department the employee agrees to the "at-will" nature of the employment relationship.



North Central District Health Department, 422 East Douglas Street, O'Neill, Nebraska 68763

Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-15

Subject: Employment Orientation

Scope: All Employees

POLICY STATEMENT:

New employees will be introduced to the North Central District Health Department by their Supervisor or Executive Director, or delegated staff member through completion of the North Central District Health Department Employee Orientation form in the Employee Acknowledgment Form, during the employee's first two weeks of employment. The Employee Orientation will include a review of the Personnel Policies, review of the position description and performance expectations, tour of the facilities and review of the personnel action form documenting work schedule, compensation and any other special considerations (safety issues, legal issues, Drug Free work place, fingerprinting, as applicable or as needed).



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-20

Subject: Employee Relations

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department believes that the work conditions, wages and benefits it offers to its employees are competitive with those offered by other employers in this area and in this industry. If employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly to their supervisors.

The North Central District Health Department experience has shown that when employees deal openly and directly with supervisors, the work environment can be excellent, communications can be clear, and attitudes can be positive. We believe that the North Central District Health Department amply demonstrates its commitment to employees by responding effectively to employee concerns.

The North Central District Health Department policy is that all employees have the right to deal directly with their supervisor and other members of the administration regarding work-related matters.

No employee is required to obtain another person or organization to represent him/her in the presentation of complaints, problems, or questions to the administration.

All employees have the right to be informed about the organizational chain of command. The chain of command must be followed when addressing employee concerns and/or complaints. If resolution of the situation is not possible through the immediate supervisor, then the employee will

bring the complaint or concern to the attention of the Executive Director. The Board of Directors will be contacted by the Director, if needed, and only if the chain of command has been followed.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-40

Subject: Hiring of Relatives

Scope: All Employees

POLICY STATEMENT:

To promote consistency and equity in the treatment of all employees, to prevent breaches in confidentiality, to prevent improper influences in employment and to prevent the perception of favoritism, the agency will not hire or employ, in any position, the immediate relatives of current employees if:

- A. They will directly supervise another relative or;
- B. They will be directly supervised by another relative or;
- C. They will be working in the same office where such has the potential for creating an adverse effect on supervision, security, morale, or involves potential conflicts of interest.

For purposes of this policy, the term "relative" means an individual who is related by blood or marriage to the employee as a father, mother, son, daughter, brother, sister, grandmother, grandfather, uncle, aunt, nephew, niece, husband, wife, father-in-law, mother-in-law, son-in-law, daughter-in-law, sister-in-law, brother-in-law, step-father, step-mother, stepson, stepdaughter, stepsister, stepbrother, half-brother, or half-sister.

If the employees become related after employment and a conflict of such as described in the above paragraph exist; or, if reorganization creates such a conflict, reasonable time (30 days) will be provided to resolve the matter voluntarily or by transfer of one of the employees. If that is not

possible, the employee with the most recent date of continuous employment will be the first in the consideration to be released.

Members of the Board of Directors or other committees capable of influencing the hiring, evaluation, or other employee actions, and who are related to employees covered by these policies, shall refrain in all actions having to do with such relatives.

All applicants for positions shall indicate during the official interview whether they are related to any employee. This information will be used to determine their eligibility for the position. If an applicant untruthfully answers questions concerning the relationship, and this fact later becomes known, the employee may be terminated immediately.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-50

Subject: Immigration Law Compliance

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department is committed to employing only United States citizens and aliens who are authorized to work in the United States. The North Central District Health Department does not unlawfully discriminate on the basis of citizenship or national origin.

In compliance with the Immigration Reform and Control Act of 1986, each new employee must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility as a condition of employment. Former employees who are rehired must also complete the form if they have not completed an I-9 with the North Central District Health Department within the past three years, or if their previous 1-9 is no longer retained or valid.

Employees with questions or seeking more information on immigration law issues are encouraged to contact the Executive Director. Employees may raise questions or complaints about immigration law compliance without fear of reprisal.



Date Created:	9/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-60

Subject: Conflict of Interest

Scope: All Employees

POLICY STATEMENT: The purpose of these guidelines is to provide general direction so employees can seek further clarification on issues related to the subject of acceptable standards of operations.

Employees have an obligation to conduct business within guidelines that prohibit actual or potential conflicts of interest. This policy establishes only the framework within which the North Central District Health Department wishes the business to operate. The purpose of these guidelines is to provide general direction so employees can seek further clarification on issues related to the subject of acceptable standards of operations. Contact the Executive Director for more information or questions about financial and developmental conflicts of interest.

Transactions with outside firms must be conducted within a framework established and controlled by the executive level of the North Central District Health Department. Business dealings with outside firms should not result in unusual gains for those firms. Unusual gain refers to bribes, product bonuses, special fringe benefits, unusual price breaks, and other windfalls designed to ultimately benefit the employer, the employee, or both. Promotional plans that could be interpreted to involve unusual gain require specific executive-level approval.

An actual or potential conflict of interest occurs when an employee is in a position to influence a decision that may result in a personal gain for that employee or for a relative as a result of the North Central District Health Department business dealings. For the purposes of this policy, a

relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

No "presumption of guilt" is created by the mere existence of a relationship with outside firms. However, if an employee has any influence on transactions involving purchases, contracts, or leases, it is imperative that he or she discloses the relationship as soon as possible to the Director so that safeguards can be established to protect all parties. Supervisor will then contact the Director notifying them of the relationship as well.

Personal gain may result not only in cases where an employee or relative has a significant ownership in a firm with which North Central District Health Department does business but also when an employee or relative receives any kickback, bribe, substantial gift or special consideration as a result of any transaction or business dealings involving the North Central District Health Department.

Although it is not possible to specify every action that might create a conflict of interest, this policy sets forth the ones which most frequently present problems. If an employee has any question whether an action or proposed course of conduct would create a conflict of interest, he or she should immediately contact the Health Director to obtain advice on the issue. The purpose of this policy is to protect employees from any conflict of interest that might arise. A violation of this policy will result in immediate and appropriate discipline, up to and including immediate termination.

Acceptance of Gifts

No employee may solicit or accept gifts of significant value (i.e., in excess of \$25.00), lavish entertainment or other benefits from potential and actual customers, suppliers or competitors. Special care must be taken to avoid even the impression of a conflict of interest.

An employee may entertain potential or actual customers if such entertainment is consistent with accepted business practices, does not violate any law or generally accepted ethical standards and the public disclosure of facts will not embarrass the Company. Any questions regarding this policy should be addressed to the Executive Director.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	03/07/2018
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-70

Subject: Outside Employment

Scope: All Employees

POLICY STATEMENT:

Outside employment must not interfere with job duties at the North Central District Health Department. This includes conflict of interest, neglect of duty, absence from the work station, and performing duties associated with additional employment during normal working hours. Supervisors are responsible for determining if additional employment adversely affects job performance.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/02/2018
Revised Date:	
Approved By:	Board of Health
Approval Date:	03/28/2018

Policy: 2-80

Subject: Classification and pay plan

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department classification plan ensures that all employment functions within the North Central District Health Department are uniformly classified by a position description. The position description will be developed by the Project Director or the Executive Director. The position description will be based on the objectives of the program/project and in compliance with the funding source for the position, and will contain minimum qualification/requirements including technical skills, training capabilities, education, and any special requirements. The North Central District Health Department management shall review and approve job descriptions at every job vacancy. The Executive Director will approve all new or revised position descriptions.

Cost of Living Allowances (COLA) are based on availability of funds and any COLA increase will be determined by the Board of Health, as presented by the Executive Director, on an annual basis.

The North Central District Health Department recognizes that job functions may change to fulfill revised program needs and goals. This may result in the reclassification of position descriptions to reflect revised or restructured duties and responsibilities within the North Central District Health Department Classification Plan.

Any revision of position descriptions or reclassification of positions will be made by the Executive Director. Reclassified or revise position descriptions will be offered to incumbent personnel for acceptance or rejection. Employees who reject reclassified or revised positions may be laid-off of

employment status. All job descriptions shall be analyzed and updated as needed and as a group every five years.

The North Central District Health Department may assign additional supervisory responsibility to appropriate staff members. Assignment of responsibilities will identify the duties and responsibilities and the length of the temporary assignment, as well as relative compensation increase, whenever possible.



Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	3/2010; 3/2016
Revised Date:	3/2016, 3/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 2-90

Subject: Recruitment, Interview and Selection

Scope: All Employees

POLICY STATEMENT: North Central District Health Department believes that hiring qualified individuals to fill positions contributes to the overall strategic success of NCDHD. Each employee, while employed, is hired to make significant contributions to NCDHD.

PROCEDURE:

Recruitment, selection and promotion of employees shall be based on the individual's knowledge, abilities, skills, experience, education or training. Recruitment for vacant positions within the North Central District Health Department will be initiated by the Executive Director who will review the position description for accuracy and confirm availability of funding.

The Executive Director will draft and post the position vacancy notice that will include the position title, salary range, brief description of duties and responsibilities, minimum qualifications, procedure for requesting an application and position description and the application opening and closing dates.

The North Central District Health Department employees may submit an application for promotion or transfer to a vacant position provided they have completed their introductory employment period and meet the prescribed minimum qualifications of the vacant position. The transferred/promoted employee's prior position may or may not be temporarily filled for 90 days pending the completion of the transferred/promoted employee's new introductory period. Promoted/transferred employees who are unsuccessful in the completion of their introductory period will resume their prior position at the prior compensation level.

The North Central District Health Department applications for employment will be accepted from applicants until 4:30 p.m. of the closing date of the vacancy notice. The Executive Director (and Hiring Committee if applicable) will review and rank the applicants based upon the minimum qualifications of the position description. The Executive Director or her/his delegate will obtain at least one job related reference as part of the initial review of applicants. This reference will be either submitted in writing or orally, and will be recorded on a Reference Check Form. The top two candidates, at a minimum, and any other applicant who meets the minimum qualifications will be scheduled for an interview. Another advertisement for the position may be placed if only one application is received, or if applicants are not deemed suitable for the position.

The Executive Director (and Hiring Committee if applicable) will develop a concise list of interview questions to be asked of each applicant based upon the competencies required of the position and will use the North Central District Health Department Interview Form to evaluate each applicant's response to the questions. Upon completion of the interview, the evaluation and any other qualitative analysis for each applicant will be reviewed by the Director and/or amongst the Hiring Committee.

The Executive Director, or his/her delegate, will issue a North Central District Health Department notice of appointment form to the successful applicant, process the necessary personnel action form, and notify in writing all unsuccessful interview candidates.



Date Created:	8/14/2013
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	12/9/2016 and 11/30/2021
Revised Date:	1/18/2017/; 1/24/2018; 12/2/2021
Approved By:	Board of Health
Approval Date:	12/03/2021

Policy: 2-120

Subject: HIPAA Compliant, Confidentiality and Privacy

Scope: All Employees

Purpose

The Health Insurance Portability and Accountability Act of 1996 and 45 CFR Parts 160 and 164, as amended by the Health Information Technology for Economic and Clinical Health Act ("HITECH Act"), (collectively "HIPAA") HIPAA is a federal law that was designed to provide protections for a patient's medical information. HIPAA's primary purpose is to protect against the misuse of patient's health information and to provide protection of a patient's health data (collectively protected health information, "PHI").

The Privacy Rule permits covered entities to disclose PHI, without authorization, to public health authorities who are legally authorized to receive such reports for the purpose of preventing or controlling disease, injury, or disability. This would include, for example, the reporting for a disease or injury; and conducting public health surveillance, investigations, or interventions. See 45 CFR 164.512(b)(1)(i). Also, covered entities may, at the direction of a public health authority, disclose PHI to a foreign government agency that is acting in collaboration with a public health authority. Covered entities that are also a public health authority may use, as well as disclose, PHI for these public health purposes. See 45 CFR 164.512(b)(2).

A "public health authority" is an agency or authority of the United States government, a State, a territory, a political subdivision of a State or territory, or Indian tribe that is responsible for public health matters as part of its official mandate, as well a person or entity acting under a grant of authority from, or under a contract with, a public health agency. See 45 CFR 164-501. Examples of a public health authority include State and local health departments, the Food and Drug Administration (FDA), the Centers for Disease Control and Prevention (CDC), and the Occupational Safety and Health Administration (OSHA).

Employees should also refer to HR Policy I-6 Responsibilities with Confidential Information, HR Policy I-7 Confidentiality of and access to Employment Records, HR Policy V-8 Portable Computing and Electronic Devices, and HR Policy V-10 Data Use Guidelines for Public Health Reporting, Assessment and Analysis of Health Information for additional information.

Policy:

North Central District Health Department (NCDHD), as a public health authority, is responsible for maintaining the confidentiality of protected health information (PHI) for all clients served by NCDHD and its contractors and business associates.

The NCDHD HIPAA Policy will be kept current and in compliance with any changes in the law, regulations, or practices of NCDHD. Staff members will be appropriately trained on the importance of maintaining security.

NCDHD will ensure that staff members will be appropriately disciplined for violating the Privacy Rule and NCDHD security policies and procedures, which could include termination. NCDHD will not intimidate or retaliate against any person for exercising his or her rights under the Security Regulations for reporting any concern, issue, or practice that such person believes to be in violation of the Security Regulations or the NCDHD HIPAA Security Policy. NCDHD will not require any person to inappropriately waive any rights to file a complaint

Privacy Officer

NCDHD has designated an employee as the Privacy Officer for the health department. The Privacy Officer will serve as the primary agency contact for privacy issues and concerns regarding the use and disclosure of PHI. The Privacy Officer will be responsible for responding to client requests for further information regarding the Notice of Privacy Practices for Public Health. The Privacy Officer will oversee all activities related to the development, maintenance, and adherence to policies and procedures regarding the use and disclosure of individually identifiable health information in accordance with state and federal laws and best business practices. The Privacy Officer will investigate and respond to privacy complaints.

Notice of Privacy and Patient Health Information

NCDHD will offer its Notice of Privacy Practices as follows:

- 1. To any person who requests it.
- 2. To everyone who participates in a health screening or whom NCDHD is collecting or tracking biometric or other personal health or health history information, no later than the first service delivery date.
- 3. In emergency situations, the Notice will be provided to the individual as soon as reasonably practicable after the emergency treatment situation.
- 4. Have Notice available at the physical service delivery site.
- 5. Post Notice in a clear and prominent location in all NCDHD offices.
- 6. Posted on the NCDHD website at www.NCDHD.ne.gov.

NCDHD staff will make a good faith effort to obtain written acknowledgment of receipt of the notice and when documentation is not possible, good faith efforts will be documented. NCDHD will retain copies of the signed Acknowledgement of Receipt of Notice of Privacy Practices or documentation of the good faith efforts made to obtain such written acknowledgement. Documentation of good faith effort is defined as a typed statement including the client's name, the date, a description of the circumstance/good faith effort, and signature of the staff person. This documentation will be retained for at least six years from the date it was created or from the date it was last in effect, whichever is later.

NCDHD has incorporated a standard acknowledgement of receipt of privacy practices phrase that has been added to many NCDHD intake forms that are completed by the client at the time of service or during their participation in an NCDHD service. This intake form will be retained as indicated in the Records Retention schedule and will be kept on file in the program-related file.

Business Associate Agreements

A business associate is an individual or entity who provides a service, performs a function, or performs an activity on behalf of NCDHD that involves the creation, use or disclosure of PHI. Business associates do not include staff of NCDHD. NCDHD may disclose PHI to a business associate provided a Business Associate Agreement is in place.

The business associate must provide (in writing) satisfactory assurances that it will appropriately safeguard the information it receives, uses, or discloses in carrying out the specified functions or activities. The Business Associate Agreement will contain elements specified in the Privacy Rule.

If NCDHD knows of a material breach or violation by the business associate of the agreement, NCDHD is required to take reasonable steps to fix the breach or end the violation, and if such steps are unsuccessful, to terminate the agreement. NCDHD employees shall immediately notify the Privacy Officer if they learn that a business associate <u>may</u> have breached or violated its Business Associate Agreement. The Privacy Rule requires covered entities to obligate their business associates to comply with the minimum necessary standard.

Access to Health Information

Individuals have the right to access, inspect and/or copy his/her PHI with advanced written notice to the Privacy Officer and/or upper-level management. Exceptions to this general rule are noted below. NCDHD may either grant or deny the request within thirty (30) days of request. The individual must present identification and/or proof of permission to access the PHI. PHI must be reviewed in the presence of the Privacy Officer. No part of the PHI may be removed from the office by the individual. Photocopies of the PHI, or portions of the PHI, may be requested by the individual. Within reason, the Privacy Officer will provide photocopies. For extensive copying (copies exceeding twenty pages, one-sided), the individual will need to pay for the photocopies in advance at the current copy rate.

NCDHD will document the identity of the records; the identity of the staff person responsible for receiving and processing requests for access to PHI; and any communications requesting access, denial of access and results of any review on the Release of Medical Records Tracking Log saved in the secured A: drive HIPAA folder. The documentation will be retained for at least six years from the date it was created or from the date it was last in effect, whichever is later. See Attachment A, Records Retention Schedule.

If, upon inspection of the PHI, the individual feels the record is inaccurate or incomplete, the individual has the right to request an amendment in writing. NCDHD will review the request and respond back to the client within 30 days.

NCDHD may deny an individual's access to his/her PHI, without providing the individual an opportunity for review, in the following circumstances:

- 1. Psychotherapy notes.
- 2. Information compiled in reasonable anticipation of, or for use in a civil, criminal, or administrative action proceeding.
- 3. PHI that is prohibited from access by the Clinical Laboratory Improvements Amendments of 1988.
- 4. Records that are subject to the Privacy Act of 1974, 5 U.S.C. § 552a, and the denial of access meets the requirement of that Act; or

5. The PHI was obtained from someone other than a health care provider under a promise of confidentiality, and the access requested would be reasonably likely to reveal the source of the information.

NCDHD may also deny an individual access if a licensed health care provider has, in their professional judgment, determined that the access requested is reasonably likely to endanger the life or physical safety of the individual or another person; or the PHI refers to another person who is not a health care provider and that access requested is reasonably likely to cause substantial harm to such other person.

If the access is denied on a reviewable ground, the individual has the right to have the denial reviewed by the NCDHD Medical Director or a licensed health care professional of his/her choice who is designated to act as a reviewing official and who did not participate in the original decision to deny, at the client's expense. The individual must request the review in writing. NCDHD will provide the individual with a copy of the health care professional's written determination and will provide or deny access in accordance with the determination of the reviewing official.

If access to PHI is denied in whole or in part, the Privacy Officer will provide a timely, written denial to the individual that must contain:

- 1. Basis for the denial.
- 2. A statement of the individual's review rights, if applicable.
- 3. A description of how the individual may file a complaint, including the name, title, telephone number and address.
- 4. If access is denied because NCDHD does not maintain the PHI requested, but knows where the requested information is maintained, NCDHD must inform the individual where to direct the request for access.
- 5. NCDHD must give the individual access to any other PHI requested, after excluding the PHI that NCDHD has grounds to deny.

Use and Disclosure of Health Information

All disclosures of health information must be routed through the HIPAA Privacy Office.

Except as otherwise described or unless otherwise permitted by law, NCDHD must have proper written authorization from the individual before NCDHD may use or disclose an individual's protected health information. Upon verification that an individual has been authorized to act as a personal representative of an individual, NCDHD will treat the personal representative as the individual with respect to the use and disclosure of his/her PHI, as well as individual rights under the Privacy Rules, except as limited by Nebraska Revised Statute, Section 71-5185.

An Authorization for the Release of Medical Records form will be used for all requests for information. If the authorization form is signed by the individual's personal representative, it must state the personal representative's name and the relationship that gives the personal representative authority to act on the individual's behalf which will be verified. A copy of the signed Authorization for the Release of Medical Records form will be provided to the individual on request.

An Authorization for the Release of Medical Records form is not valid if:

- It is not signed or dated.
- The expiration date or event has passed.
- It is not filled out completely.
- It has been revoked.
- It contains any material information known to be false.

Although An Authorization for the Release of Medical Records form is not required for the following circumstances, all requests for PHI must be in writing. If necessary, the request will be forwarded for legal review prior to responding. All requests will be reviewed by HIPAA Privacy Officer to determine that the record is in fact exempt from the authorization requirement.

- Treatment, payment, and health care operations.
- To the individual who is the subject of the information.
- Required disclosures to the Secretary of Health and Human Services for enforcement of Privacy Rules.
- Required by law.
- Public health activities (prevention or control of disease, vital statistics.)
- Regarding victims of abuse, neglect, or domestic violence.
- Health oversight activities (licensure, audit, inspections).
- Judicial and administrative proceedings (subpoena, discovery requests, or legal process).
- Limited law enforcement purposes.
- Coroners, Medical Examiners and Funeral Directors regarding decedents.
- Organ, eye, or tissue donation purposes.
- Research purposes.
- To avert a serious threat to health or safety.
- Specialized government functions (military, veterans' activities, national security, intelligence activities).
- Worker's Compensation.
- Food and Drug Administration.
- Facility Directories (in the case of inpatient phone calls, mail and/or visitors) provided the individual was
 notified in advance of the disclosure and given the opportunity to object to his/her information being used
 or disclosed in the directory.

The exception to the above is a request for immunization records. At the time an individual completes and signs the Client Vaccine/Services Consent form, the individual is authorizing NCDHD to release information from the client's medical record including, but not limited to, the following entities: client/family/guardians/representatives requesting the immunization record, childcare, school, or work-related authorities to prove immunization status, medical providers, medical records, billing, and insurance. Release of immunization records will not be tracked on the Release of Medical Records Tracking Log.

An individual may revoke an Authorization at any time by providing written notice to NCDHD's Privacy Officer. The individual's Authorization is no longer valid once NCDHD knows of the revocation except to the extent NCDHD has already acted in reliance of the Authorization or to the extent the Authorization was obtained as a condition of obtaining insurance and other law provides the insurer the right to contest the policy or claim under the policy.

NCDHD must retain any signed authorization and revocation. The documentation must be retained for at least six years from the date it was created or from the date it was last in effect, whichever is later. See Attachment A, Records Retention Schedule.

Tracking Disclosures

Because disclosure of PHI is the responsibility of the HIPAA Privacy Officer, the tracking of the disclosure is likewise the responsibility of the Privacy Officer.

NCDHD will keep a record of disclosures it makes of patient protected health information (PHI) as required by the Privacy Rules. Some disclosures do not need to be tracked. Individuals have the right to an accounting of the disclosures made of their PHI within the six years prior to their request. Exceptions to this general policy are provided below.

All requests for an accounting of disclosures must be submitted in writing to the Privacy Officer. Individuals may request an accounting of disclosures for a period of up to six years prior to the date of the request. An individual may request one accounting within a 12-month period, free of charge. A reasonable fee can be charged for more frequent accounting requests. NCDHD will respond to a request for an accounting of disclosures within 60 days of the request.

The disclosure accounting should include the date the disclosure was made, the name of the entity or individual the disclosure was made to and their address; description of information disclosed or a copy of the authorization form or request which yielded the disclosure, the purpose of the disclosure and the identity of the staff disclosing the information. The disclosure accounting will be tracked on the Release of Medical Records Tracking Log saved in the secured A: drive in the HIPAA folder.

NCDHD must track and account for disclosures made as required by law; for public health activities; about victims of abuse, neglect or domestic violence; for health oversight activities; for organ, eye or tissue donation purposes; for judicial or administrative proceedings; for law enforcement purposes; for research purposes; for Worker's Compensation purposes; to prevent a serious threat to health or safety; to coroners, medical examiners or funeral directors; for specialized government functions; and to the Food and Drug Administration.

Documents generated in response to a request for PHI must be maintained by NCDHD for a period of at least six years from the date it was created or from the date it was last in effect, whichever is later. See Attachment A, Records Retention Schedule.

Requests to Amend Health Information

An individual has the right to request that his/her PHI be amended if he/she feels that the information is incomplete or inaccurate. This right lasts for as long as that information is maintained. Exceptions to this general policy are provided below. Any staff member may receive a request to amend or correct PHI, but the request must be reviewed by the immediate program supervisor and the HIPAA Privacy Officer before a decision to grant the request is made.

All requests from the individual to amend or correct PHI must be submitted in writing to any staff member and clearly identify the information to be amended or corrected, as well as the reason(s) for the amendment/correction

The Privacy Officer will act on the individual's request for an amendment no later and sixty (60) days after receipt of such request.

If NCDHD accepts the requested amendment, in whole or in part, it must make the appropriate amendment to the PHI or record and inform the individual in a timely manner that the amendment is accepted. If applicable, obtain from the individual the permission to allow NCDHD to notify any outside relevant persons with which the amendment needs to be shared. NCDHD will make reasonable efforts to inform and provide the amendment within a reasonable time to persons identified by the individual as having received PHI about the individual and needing the amendment and persons, including business associates, that the agency knows have the PHI that is the subject of the amendment and that may have relied on such information to the detriment of the individual.

NCDHD may deny an individual's request for amendment if it is determined that the PHI that is the subject of the request was not created by NCDHD; is for information that is not part of the designated record; is not accessible to the individual because of federal and state law do not permit it (if NCDHD denied an individual's request to inspect PHI, it would also be permitted to deny a request to amend the PHI); or is already accurate and complete.

If NCDHD denies the requested amendment, in whole or in part, NCDHD must provide the individual with a written denial in plain language within 3 weeks. The written denial must contain the following: the basis for the denial; the individual's right to submit a written statement of disagreement with the denial and how the individual may file such a statement; a statement that the individual may request that NCDHD provide the individual's request for an amendment and the denial with any future disclosures of the PHI that is the subject of the amendment; a description of how the individual may complain to the NCDHD Privacy Officer, or to the Secretary of Health and Human Services; and the name, title and telephone number of the contact person for NCDHD designated to receive complaints.

NCDHD must permit the individual to submit a written statement disagreeing with the denial of all or part of a requested amendment and the basis of such disagreement. NCDHD may prepare a written rebuttal to the individual's statement of disagreement.

NCDHD must amend PHI or records on receipt of notice from another covered entity that the information has been amended within one week of receipt.

NCDHD must document the identity of the staff responsible for receiving and processing requests for amendments and any communications requesting, granting, or denying the amendment. This document will be retained by NCDHD for at least six years from the date it was created or from the date it was last in effect, whichever is later. See Attachment A, Records Retention Schedule.

Requests to Restrict Use and Disclosures of PHI

An individual has the right to request NCDHD to restrict use and disclosures of PHI when carrying out treatment, payment, or health care operations. However, NCDHD is not required to agree to the individual's request for restrictions.

All requests for restrictions shall be submitted in writing and the request must include a description of the information to be limited; whether the request is to limit the use, disclosure, or both; and to whom the limitation should apply. All requests should be forwarded to the Privacy Officer for determination and response. NCDHD will notify the individual in writing whether the request will be granted.

If the restriction is granted, NCDHD will inform the staff members and business associates who are affected by the agreement. Affected staff and business associates must implement procedures to prevent any use or disclosure contrary to an agreement to these restrictions.

NCDHD may use restricted PHI or may disclose it to a health care provider when the information is needed for treatment of an individual in a medical emergency. In the event NCDHD uses or discloses restricted PHI in a medical emergency, staff must document justification for the determination, whether it resulted in withholding, using, or disclosing the restricted PHI; staff must request the other parties involved not to further use or disclose the restricted information and document this request.

NCDHD may terminate an agreement restricting use or disclosure of PHI with the agreement of the individual or unilaterally by written notice of termination to the individual. Unilateral termination is only effective with respect to PHI created or received after the individual has been informed of the unilateral termination of the restriction.

NCDHD must document any agreed upon restriction, any notice to business associates or others and any written or oral agreement to terminate a restriction for at least six years from the earlier of (1) the date it was created or (2) the date when it was last in effect. See Attachment A, Records Retention Schedule.

Requests for Confidential Communications

An individual may request to receive confidential communications from NCDHD, either at an alternative location or by alternative means. For example, an individual may request to receive all written communications from NCDHD at a work address rather than a home address. NCDHD will accommodate reasonable requests.

All requests shall be made in writing and shall clearly state the alternative means of disclosure requested. All reasonable requests will be granted. NCDHD will respond to the request in writing. If the request is granted, NCDHD will notify all affected staff and business associates in writing of any decision to accommodate.

The agency shall retain all documentation concerning a request defined herein for at least six years from the earlier of (1) the date it was created or (2) the date when it was last in effect. See Attachment A, Records Retention Schedule.

Minimum Necessary

NCDHD must take reasonable efforts to use, disclose, or request of another covered entity, only the minimum necessary PHI to accomplish the intended purpose. See Attachment B, Protocol for NCDHD Staff Requesting Client Health Information from Another Entity.

NCDHD shall identify and document those staff members who need access to PHI to perform their duties; the categories of PHI needed by each of these staff members to perform those duties; and the conditions appropriate to each staff member's access to those categories. NCDHD will

implement procedures to ensure that each staff member has access to, and use of only, that PHI consistent with these identified and documented needs.

NCDHD shall implement policies and procedures or standard protocols for the routine or recurring requests for, or disclosures of, PHI (other than those for which there is no minimum necessary requirement) so that NCDHD limits the PHI it requests or discloses to the minimum reasonably necessary for the purpose of the request or disclosure.

For any request for, or disclosure of, PHI that has not been identified and documented as routine or recurring (and that is not excepted from the minimum necessary requirement), NCDHD must have and apply criteria designed to limit the PHI it requests or discloses to that reasonably necessary for the purpose of the request or disclosure. The agency should review each non-routine or non-recurring request or disclosure on an individual basis according to these criteria.

NCDHD may not use, disclose, or request an entire medical record, unless it is specifically justified as reasonably necessary for the purpose. The Privacy Officer may identify and document those situations in which use, disclosure or request for an entire medical record may be justifiable and will develop and document procedures for obtaining approval to use, disclose or request an entire medical record.

Exceptions to the minimum necessary requirement are:

- 1. Disclosures to, or requests by, a health care provider for treatment purposes.
- 2. Disclosures made to the individual (or the individual's personal representative) who is the subject of the PHI.
- 3. Uses or disclosures made pursuant to a valid authorization.
- 4. Disclosures to HHS for compliance reviews or complaint investigations under HIPAA.
- 5. Uses or disclosures required for compliance with the HIPAA.
- 6. Uses or disclosures required by law.

NCDHD may rely, if reasonable for the situation, on a request to disclose PHI being for the minimum necessary, if the requester is another covered entity; a professional (including an attorney or accountant) who provides professional services to NCDHD, either as a member of our staff or as our business associate, and who states that the requested information is the minimum necessary; a public official who represents that the information requested is the minimum necessary; or a researcher with appropriate documentation from an Institutional Review Board (IRB) or

Privacy Board.

Verification of Individual's Identity

Before making any permitted disclosures of PHI, the NCDHD HIPAA Privacy Officer shall utilize his/her discretion in verification of the identity and/or authority of the person requesting the PHI. If NCDHD knows the person making the request, additional verification of his/her identity is not required.

NCDHD will take reasonable steps to verify the identity of an individual requesting access, use or disclosure of his/her PHI when the person is not known to them. Examples of appropriate identification include driver's license, photo ID, government identification card or badge, and appropriate documentation on government letterhead. Current practices of sending the information to a recognizable organizational address or, if faxing or phoning information, by calling the requester back through the main organization switchboard rather than through a direct phone number, are sufficient to meet these requirements.

NCDHD must take reasonable steps to verify the identity and authority of any person requesting PHI on behalf of another individual. Examples of appropriate authority include identification as parent, guardian or executor, power of attorney, or other evidence of appropriate relationship with the individual, a warrant, subpoena, order or other legal process issued by a grand jury or a court or administrative tribunal.

NCDHD will document verification of the identity and authority of a person or entity before granting access to or disclosing PHI.

Privacy Complaints and Inquiries

Individuals (both internal and external to NCDHD) have the right to file a complaint regarding NCDHD's Privacy Policies and Procedures or the Privacy Rules. Individuals have the right to file the complaint either directly to the NCDHD Privacy Officer or to the Secretary of Health and Human Services.

NCDHD must cooperate with investigations by the Secretary of Health and Human Services permitting access to information requested by the investigator. NCDHD must receive and document complaints and their disposition, if any, and retain these records for six years.

Each complaint received by an outside agency or individual must be documented and referred to the NCDHD Privacy Officer for investigation. All complaints shall be submitted in writing. The Privacy Officer will facilitate an investigation into each complaint. Any response to the complainant shall be in writing and within thirty (30) days of receiving the complaint. The Privacy Officer shall institute action to correct the matters complained of, if corrective action is appropriate.

Any NCDHD staff member who suspects that these privacy policies and procedures, the Privacy Rules or other applicable federal or state privacy law has been violated by another staff member or by a business associate, must report the suspicion to the Privacy Officer in sufficient detail to permit the matter to be investigated and to prevent or mitigate any harmful effects. Reports may be made anonymously.

NCDHD employees who violate NCDHD Privacy Policies and Procedures, the Privacy Rules or other applicable federal or state privacy laws will be subject to disciplinary action, up to and including termination.

NCDHD will mitigate, to the extent reasonable and possible, any harmful effect of improper use or disclosure of protected health information (PHI) by our staff or by our business associates in violation of these Privacy Policies and Procedures, the Privacy Rules or other applicable federal or state privacy law.

NCDHD will not require an individual to waive any right under the Privacy Rules, including the right to complain to HHS, as a condition to providing claims payment, enrollment, or benefits eligibility for the individual. Any NCDHD employee who attempts to intimidate, threaten, coerce, discriminate, or retaliate against an individual who exercises any right, including filing complaints, under the Privacy Rules, will be disciplined as appropriate.

The Privacy Officer shall retain copies of all complaints, investigations, responses, and documentation of any action taken for at least six years from the date it was created or from the date it was last in effect, whichever is later. See Attachment A, Records Retention Schedule.

HIPAA Documentation and Record Retention

NCDHD must document and maintain all HIPAA policies and procedures and any other communication, action, activity, or designation that must be documented under the Privacy Rule. Documentation may be maintained in electronic form or on paper. The Privacy Officer will maintain the following in written or electronic form:

- NCDHD Privacy Policies and Procedures and approved forms, and each revision to the same.
- Notices of Privacy Practices and each revision to the same.
- Documentation evidencing distribution of the Notices and each revision to the same.
- Documentation evidencing designation of the NCDHD Privacy Officer.
- Each authorization.
- Each request from individuals for access, amendment, record of what is disclosed, restriction or confidential communications and all documentation relating to them.
- · Each complaint and any material generated because of investigating and resolving the complaint; and
- Other documentation requested or required under these Privacy Policies and Procedures.

Each document shall be retained for six (6) years after the later of its creation or last effective date. See Attachment A, Records Retention Schedule.

NCDHD will implement document-retention practices within NCDHD consistent with these Privacy Policies and Procedures to ensure that the Privacy Officer receives the original of each document required by these Privacy Policies and Procedures. See HR Policy V-3 Records Retention.

NCDHD must promptly amend these privacy policies and procedures, as necessary and appropriate to comply with each change in the Privacy Rules or applicable federal or state privacy law.

NCDHD must promptly make appropriate revisions to its Notice of Privacy Practices whenever the change in law materially affects the accuracy of the Notice's content and distribute our revised Notice to our current clients within 60 days after the effective date of the change in law. Current means any client with an active staff-client relationship with NCDHD and the time of the change in law.

NCDHD conducts communicable disease surveillance in our 9-county district. This includes obtaining, conducting, and performing investigations by interview and/or obtaining needed information via clinicians at hospitals and clinics. Information would include demographics, symptoms, onset, exposures, close contacts, vaccination records as just some examples. This information is stored in locked filing cabinets located in a private office for up to 7 years. Information cannot be retrieved unless warranted through NCDHD privacy officer and or the Nebraska Department of Health and Human Services and the Centers for Disease Control to complete needed information for clusters, outbreaks, and single cases.

Expectation of Privacy and NCDHD Rights to Deactivate Access

Staff members using NCDHD systems and workstations should have no expectation of privacy. To protect and manage its information systems and enforce appropriate security measures, NCDHD management may log, review, or monitor any data (ePHI and non ePHI) stored or transmitted on its information systems and devices with or without notification to staff members. NCDHD may remove or deactivate any workforce member's user privileges and access to security areas when necessary to preserve the integrity, confidentiality and availability of its facilities, user services, data, or ePHI.

When a staff member's employment or services are terminated or he/she transfers to another position, the Manager is responsible for ensuring that the staff member's access to accounts that contain ePHI and applications containing ePHI are terminated. If job responsibilities change for a staff member, the Manager will perform a re-evaluation and make appropriate changes as necessary. All such determinations shall be communicated to the Computer Information Technician by the office manager.

Upon being asked to terminate access, the Computer Information Technician will inactivate the user account(s); remove the user profile from all PC's; where applicable, remove user from any remote connectivity systems; where applicable, copy user folders to location specified by the Manager.

All NCDHD staff will comply with HR Policy V-8 Portable Computing and Electronic Devices to ensure that portable computing and electronic devices that access ePHI are used in a secure and legitimate manner.

Storing and Access to Patient Health Information

The Privacy Rule's safeguards standard assures the privacy of PHI by requiring covered entities to reasonably safeguard PHI from any intentional or unintentional use or disclosure in violation of the Privacy Rule. The safeguards requirement, as with all other requirements in the Privacy Rule, establishes protection for PHI in all forms: paper, electronic and oral. Safeguards include such actions and practices as securing locations and equipment, implementing technical solutions to mitigate risks, and workforce training.

NCDHD has established guidelines for determining each staff members' need to access ePHI. See Attachment C, Sensitivity for Filing document. Only authorized users will be granted access to ePHI. The fundamental principle of "need to know" will be applied to determine access privileges. Reasonable efforts shall be made to limit the amount of information to the minimum necessarily needed to accomplish the intended purpose of the use, disclosure, or request. NCDHD staff members are responsible for being aware of, and complying with, NCDHD HIPAA Security Policies and Procedures. All portable computing and electronic devices that have the capability to access or store ePHI shall have power on passwords or data encryption to reduce the exposure to ePHI being made available to unauthorized users.

Managers are responsible for authorizing access to systems and networks containing ePHI for his or her subordinates. Staff members are not permitted to authorize their own access to ePHI. This determination should be based on their specific requirements to fulfill their job responsibilities and includes access to both hardware and software. Managers are responsible for ensuring that the access to ePHI granted to each of his or her subordinates is the minimum access required for each such subordinate's job role and responsibilities. Managers will be responsible for periodically reviewing the access to ePHI granted to each of his or her subordinates and for modifying such access, if appropriate. Any staff member who either successfully or unsuccessfully attempts to gain access to ePHI for which they are not authorized, or for which they do not "need to know," shall be subject to disciplinary action up to and including termination. Communications through social networking including, but not limited to, Facebook, Twitter, etc., as with all communications outside NCDHD, should never contain information that reasonably identifies a patient's identity,

health condition, or any PHI/HIPAA-protected information. Any staff member who communicates PHI via Social Networking shall be subject to disciplinary actions up to and including termination.

NCDHD will follow the Records Retention Schedule attached. (Attachment A)

<u>Safeguards</u>

The NCDHD Computer Information Technician will implement procedures to detect and guard against malicious code such as viruses, worms, adware, and any other computer program or code designed to interfere with the normal operation of a computer system. NCDHD will implement reasonable technical safeguards to protect the confidentiality, integrity, and availability of ePHI transmitted over any electronic communications network. The Computer Information Technician will notify all staff of new and potential threats from malicious code.

NCDHD will only dispose of or reuse media and/or equipment in an appropriate fashion to ensure the protection of all ePHI in its possession. This process shall include the tracking of, receipt of, and removal of hardware.

The Computer Information Technician will be responsible for security on networks, servers, and systems by establishing security to support the separation and accessibility of ePHI data and programs.

All users who require access to any network, system or application will be provided with unique user identification (user ID) and associated password. The unique user ID will be based on standard naming conventions established by the Computer Information Technician. Staff members will not share their unique user ID or password with anyone, except for the Office Manager, who keeps a master list of all passwords for the continuity of operations. Staff members must not misrepresent themselves by using someone else's User ID or password and must not allow others to use their User ID or password. Staff members are responsible for the proper use and protection of their passwords. Passwords shall not be written down, posted, or held in an insecure manner (i.e. on a post-it-note). Staff members should refuse all offers by software and/or Internet sites to automatically login the next time that they access those resources. If a staff member believes his/her user ID has been compromised, he/she must report that security incident to their manager. A password must be changed immediately if it is suspected of being disclosed.

Passwords must be at least:

- 1. Eight alpha-numeric characters or more.
- 2. Include two capital letters.
- 3. Have at least one number; include one or more special characters, i.e.!@#\$%^&*;
- 4. May not refer to your name or email address (including your initials).

Passwords will be changed at the request of the Computer Information Technician.

Staff members will utilize auto-log-off software, or software which inhibits access to ePHI when leaving their work areas for extended periods of time. See Attachment D, Auto Log Off Schedule. Staff members will log off of their computers at the end of each workday. Any improper use of a password, as set forth in this section, by a staff member, shall cause the offending staff member or members to be subject to disciplinary actions, up to and including termination.

The Office Manager will maintain an up-to-date inventory of hardware and software used by NCDHD staff. All disposal of surplus equipment shall be coordinated by the Office Manager.

E-mailing Patient Health Information

The HIPAA security rule requires offices to secure their computer networks. This means that appropriate safeguards must be in place, such as firewalls and virus protection, to keep out cyber hackers, viruses that download information, or anyone who may be able to intercept email exchanges.

HIPAA requires encryption of emails containing patient information that are transmitted using the Internet. Special software allows users to retrieve encrypted emails with the use of a secure password.

Encryption is the process of scrambling up the email message so that it can only be decoded when the recipient types in the correct passcode. NCDHD will send all PHI by encrypted attachments. No PHI will be contained in the email itself. Encrypting attachments protects PHI so that nobody, except for the intended recipient, can access the information. The sender sets the passcode, and the passcode must never be sent in the body or subject line of the email that contains an attachment to be decoded. To provide extra security, passcodes will be delivered by a separate means, i.e., verbally over the phone, or via text message.

The subject lines in emails should be generic and nonspecific. Identifying information, such as the name and date of birth should not be placed in the subject line of your email or in the body of an email. Emails containing PHI information must contain email notices. Email notices are messages at the bottom of the email that explains that the information in the email is private and confidential. Notices inform recipients that they should not forward or share the information with people who are not privileged to have it. Additionally, email notices let recipients know that if they are not the intended recipient, and the email came to them accidentally, that they should notify the sender immediately. When sending an email, it is imperative to make sure the address is accurate for the recipient. This will reduce the chance of accidentally sending an email with patient information to an unintended recipient, thereby causing a HIPAA violation.

Faxing Patient Health Information

When faxing PHI, a cover sheet is to be used indicating the recipient of the fax. The cover sheet will also contain a notice message at the bottom that explains that the information in the fax is private and confidential. Notices inform recipients that they should not forward or share the information with people who are not privileged to have it. Additionally, the notices let recipients know that if they are not the intended recipient, and the fax came to them accidentally, that they should notify the sender immediately. When sending a fax, it is imperative to make sure the fax number is accurate for the recipient. This will reduce the chance of accidentally sending a fax with patient information to an unintended recipient, thereby causing a HIPAA violation.

Media Releases

To protect the privacy of clients associated with NCDHD, an Image Release must be obtained before any photographs, video or other images or likenesses of clients or patients can be used by NCDHD for promotional or other purposes. All image releases will be filed in a three-ring binder and referenced before an image may be used. If the person whose image is to be used is under the age of 19, the release must be signed by the parent or guardian. NCDHD has incorporated a standard image release phrase that has been added to many NCDHD intake forms that allows NCDHD to capture a photo at the time of service or during their participation in an NCDHD service. This intake form will be retained as indicated in the Records Retention schedule. It is important to note that this release is only specific to the program for which the form is used.

Breach Notification

A breach is an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of the protected health information such that the use <u>OR</u> disclosure poses a significant risk of financial, reputational, or other harm to the affected individual. There are three exceptions to the definition of "breach". A username or email address, along with a password or security question and answer that would permit access to an online account is included in the definition of personal information that if breached, would require notice.

- 1. Applies to the unintentional acquisition, access, or use of PHI by a staff member acting under the authority of NCDHD or business associate.
- Applies to the inadvertent disclosure of PHI from a person authorized to access protected health information at NCDHD or business associate to another person authorized to access PHI.
 (In both cases 1 and 2, PHI cannot be further used or disclosed in a manner not permitted by the Privacy Rule).
- 3. If NCDHD or business associate has a good faith belief that the unauthorized individual, to whom the impermissible disclosure was made, would not have been able to retain the information.

NCDHD will comply with (and follow) the Breach Notification rules as outlined in the Privacy Rule (45 CFR Parts 160 and 164). NCDHD will notify the Nebraska Attorney General of any breach, regardless of the number of impacted individuals. This notification must be made no later than the notice to the impacted individuals.

Additionally, upon becoming aware of a breach of the security of our information system or an impermissible use or disclosure, NCDHD will conduct (in good faith) a reasonable and prompt investigation to determine the likelihood that unencrypted personal information has been or will be used for an unauthorized purpose. Data is not considered encrypted if the confidential process or key was acquired because of the breach or is reasonably believed to have been acquired because of the breach. If the investigation determines that the use of information about an individual for an unauthorized purpose has occurred or is reasonably likely to occur, NCDHD will give notice to the affected person(s).

- 1. Reporting Responsibility: It is the responsibility of all employees, contractors, and agents of NCDHD to report breaches or suspected breaches in accordance with this Policy to the director, immediate supervisor, or management.
- 2. Reporting: Management will conduct in good faith a reasonable and prompt investigation to determine the likelihood that personal information has been or will be used for an unauthorized purpose. If the investigation determines that the use of information about an individual for an unauthorized purpose has occurred or is reasonably likely to occur, NCDHD will give notice to the affected person(s). Notice shall be made as soon as possible and without unreasonable delay, consistent with the legitimate needs of law enforcement and consistent with any measures necessary to determine the scope of the breach and to restore the reasonable integrity of the computerized data system, if applicable. Notice may be delayed if a law enforcement agency determines that the notice will impede a criminal investigation. Notice shall be

made in good faith, without unreasonable delay, and as soon as possible after the law enforcement agency determines that notification will no longer impede the investigation. Notices to those directly affected by the breach usually must be sent by first-class mail or if preferred by the patient, email may be used. In the event of an emergency, the telephone may be used. If the breach involves numerous persons, notice must be sent to local media outlets in the state.

Notices must contain the following information:

- 1. An account of what happened and how the organization discovered it, including dates;
- 2. A description of the affected PHI;
- 3. A brief description of how the organization is handling the breach to minimize harm and the potential for further breaches;
- 4. Guidance on how an individual can protect him/herself from problems stemming from the breach; and
- 5. Instructions for how individuals can ask questions or receive additional information.

Training

All policies and procedures related to HIPAA, HITECH (Health Information Technology for Economic and Clinical Health), and Confidentiality, identified on Page 1 of this policy, will be reviewed annually, and revised as needed. Staff, Board Members, Contracted Employees, and volunteers will sign a "Responsibilities with Confidential Information" form annually. All staff will receive training on privacy policies and practices annually.



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Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	
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Approval Date:	3/28/2018

Policy: 2-121

Subject: Confidential Nature of Employment

Scope: All Employees

POLICY STATEMENT:

All North Central District Health Department records and information relating to North Central District Health Department or its customers are confidential and employees must, therefore, treat all matters accordingly. No North Central District Health Department or North Central District Health Department-related information, including without limitation, documents, notes, files, records, oral information, computer files or similar materials (except in the ordinary course of performing duties on behalf of North Central District Health Department) may be removed from North Central District Health Department's premises without permission from North Central District Health Department. Additionally, the contents of North Central District Health Department's records or information otherwise obtained in regard to business may not be disclosed to anyone, except where required for a business purpose. Employees must not disclose any confidential information, purposefully or inadvertently through casual conversation, to any unauthorized person inside or outside the Health Department. Employees who are unsure about the confidential nature of specific information must ask their supervisor for clarification. Employees will be subject to appropriate disciplinary action, up to and including dismissal for knowingly or unknowingly revealing information of a confidential nature.



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Approval Date:	3/28/2018

Policy: 2-122

Subject: Employee Attire

Scope: All Employees

POLICY STATEMENT:

Employees are expected to maintain an appropriate appearance in accordance with their own particular work responsibilities. Appropriate can be defined as casual, business casual, professional, uniforms required by a specific work unit or other style appropriate for the type of work performed and extent of customer contact. Senior Management will be responsible for defining what is appropriate for their particular work area including the necessity for protective clothing related to safety sensitive jobs.



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Policy: 2-125

Subject: Data Use Guidelines for Public Health Reporting,

Assessment and Analysis of Health Information

Scope: All Employees, Board of Health and Contract Workers

<u>Policy Statement</u>: North Central District Health Department (NCDHD) is responsible for preserving privacy and maintaining data confidentiality. Public health policy decisions are based on reliable data. Questions concerning health outcomes and related health behaviors and environmental factors often are studied within small subgroups of a population.

NCDHD acting in its role as a public health authority is not subject to HIPAA requirements if the information is collected to carry out public health authority functions; to prevent or control disease, injury, or disability – such as reporting disease, injury, vital events like birth or death; and public health surveillance, investigations and interventions. Non-public health authority aspects of NCDHD's operations and programming are subject to HIPAA requirements.

<u>Working with Small Numbers</u>: Continuing improvements in information technology have led to new opportunities for analysis and new challenges for assuring confidentiality, especially when working with data on small populations. Small numbers also raise statistical issues concerning the reliability of the data. In general, problems with confidentiality may arise when there are small denominators (the population size is small); and, problems with data reliability arise when there are small numerators (number of cases or individuals).

<u>Working with Encrypted Data</u>: All efforts should be made to secure and protect health information, by de-identifying health data, making re-identification less possible and reporting in

aggregate form whenever possible. This includes working with limited health data sets and meeting the minimum necessary requirements of HIPAA.

Recommendations to Protect Confidentiality: The following guidelines can be used to alert staff to situations that require attention to avoid breaches of confidentiality. For example, the department routinely publishes data by county. Most department programs are comfortable publishing numbers or rates by county when the population denominator is the entire county population. However, programs are to carefully evaluate the potential for breaches of confidentiality when considering publishing the same data by demographic characteristics, because denominators shrink when considering subpopulations within counties. Depending on the type of data and the types of demographic characteristics, programs may conclude that there is not a risk for a breach of confidentiality, and they can safely publish the data even when the denominator is less than 300. Alternatively, they may conclude there is a risk of inadvertent disclosure and decide not to publish such tables at all or not publish for selected counties.

- Evaluate the risk for a breach of confidentiality for denominators less than 300. Be cautious with denominators less than 50.
- Be cautious when reporting counts (numerators) less than 10.
- Be cautious when reporting a specific confidential characteristic of a population if a very high proportion of the population has this characteristic. For example, if 95% of high school seniors reporting using illegal drugs, we would not release that as it would make the general public view high school seniors unfavorably and assume that they are part of the 95%.

Methods to adjust for small numbers when deemed necessary:

1. <u>Adjust the granularity of aggregation</u>-The first option is to aggregate the data values to create a table with no small numbers as denominators or numerators. In this option, the granularity of aggregation is adjusted. For example:

Granularity: Aggregation					
Field	Туре	Small	Medium	Large	
Age	Continuous	Year of birth	5-year age group	10-year age group	
Date of occurrence	Continuous	Day	Month	Year	
Diagnosis	Nominal	Complete ICD	Three-digit ICD	Selected cause	
		code		tabulation	
Geography	Ordinal (special)	Zip code, census	Sub-county area	County	

2. <u>Cell suppression</u>-Sometimes, when tables are being made, there are very small numbers that are somewhat risky to publish. When these numbers are withheld from publishing, it is called cell suppression. When it is determined that certain information should not be shown on a table, the information is replaced with a symbol, such as an 'x.' The process for withholding the risky data (cell suppression) is below:

- a. Data suppression involves not releasing information for potentially-identifiable unsafe cells, or, if nothing else works, deleting individual records or data items from the dataset. If a table contains totals, it may still be possible for an outside person (from the general public) to calculate the value of a risky cell 'x' by subtracting the value of other cells from the total. For this reason, you may need to consider withholding at least one additional piece of information to prevent identification.
- b. The following table shows an example: supposing that the cell in the upper left (0-34 Black) did not meet the threshold for release, regardless of whether for reason of numerator or denominator:

Age	Black	White	Other	Total
0-34	X	30	X	60
35-64	Х	60	Х	150
65+	70	90	80	240
Total	120	180	150	450

- 3. When neither of these methods are satisfactory two methods remain:
 - a. <u>Combine multiple years of data</u> (a form of aggregation). The effect is to increase the population size of the sample.
 - b. Omit certain fields from analysis. When none of the above methods is satisfactory, the staff might want to omit certain fields from analysis entirely. For example, for a department release of asthma data, it was not possible to achieve adequately large cell denominators in annual county-level data showing both age-specific and gender-specific counts and rates. Those publishing the data opted to omit the gender-specific data, and display only tables of age-specific data, on the grounds that no intervention programs targeted groups differently on the basis of gender, but most intervention programs target age groups differently.

4. Group identification

- a. In addition to individual identification, staff need to be alerting to risk for group identification. Here, something confidential is revealed about a group of individuals identifiable by their age, race or other reported characteristics. While this type of disclosure has received less attention than individual disclosure, it represents an emerging concern and should be considered when deciding whether to publish data. Note that this is more of a problem when the prevalence is high (over 80%) than it is when the prevalence in the group is low. An example of this may be releasing data on one school or on one classroom, etc.
- b. When the prevalence of sensitive information (negative risk behavior or disease that carries a stigma) in an identifiable group is over 70%, the disclosure of this data will not occur without review by the Health Director.

c. Confidentiality breaches resulting from failure to comply with this policy will result in disciplinary action up to and including termination. See HIPAA P&P for more details and considerations.

Securing and Handling of Data: NCDHD may be requested by outside individuals and/or entities to provide data. All requests for release of data must be in writing. All atypical requests (i.e. requests for records not obviously deemed to be public information) will be forwarded for legal review prior to responding. All requests will be reviewed to determine that the data are in fact de-identified and that it contains no information that would be considered a HIPAA violation. Simple requests for release of data will be received and processed by the Office Manager or Disease Surveillance Coordinator no later than three weeks from the date that the request was received. Upon receiving the request, an NCDHD Request Form must be completed by the requester. If hard copies of data reports are requested, the requester of the data may be charged a fee at the current photocopying rate as determined by NCDHD. If the request entails a data analysis report that does not exist, NCDHD may prepare an analysis report for the requester if the requester agrees to the fee of \$25.00/hour to prepare such reports. A due date timeline will be mutually agreed upon between NCDHD and the requester based upon the nature and depth of the analysis request. NCDHD will document what data, if any, was released to the requester.

Confidential data will be stored on separate secured drives or in a secure subfolder on the NCDHD server. All surveillance data, defined by the Reportable Disease list of 2017, immunizations, Miles and Smiles and any other information with name and demographics is considered confidential. NCDHD shall identify and document those staff members who need access to this data to perform their duties, including the categories of data needed by each of the staff members. NCDHD will implement procedures to ensure that each staff member has access to, and use of only, that data consistent with these identified and documented needs.

Data that has not been de-identified will only be sent by email after it has been encrypted. The password to decrypt the data will be sent separate from the encrypted data.

Adapted from Lincoln-Lancaster Public Health Department.



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Assigned Annual Review Period:	At least every 5 years	
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Revised Date:		
Approved By:	Board of Health	
Approval Date:	3/28/2018	

Policy: 2-130

Subject: Confidential Nature of Work

Scope: All Employees

POLICY STATEMENT: CONFIDENTIAL NATURE OF WORK

All North Central District Health Department records and information relating to North Central District Health Department or its customers are confidential, and employees must, therefore, treat all matters accordingly. No North Central District Health Department or related information, including without limitation, documents, notes, files, records, oral information, computer files, passwords or similar materials (except in the ordinary course of performing duties on behalf of North Central District Health Department) may be removed from North Central District Health Department's premises without permission from North Central District Health Department. Additionally, the contents of North Central District Health Department's records or information otherwise obtained in regard to business may not be disclosed to anyone, except where required for a business purpose. Employees must not disclose any confidential information, purposefully or inadvertently through casual conversation, to any unauthorized person inside or outside the Health Department. Employees who are unsure about the confidential nature of specific information must ask their supervisor for clarification. Employees will be subject to appropriate disciplinary action, up to and including dismissal for knowingly or unknowingly revealing information of a confidential nature.



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Reviewed Date:	02/09/2018	
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Approval Date:	3/28/2018	

Policy: 2-140

Subject: Political Activities

Scope: All Employees

POLICY STATEMENT:

If an employee's position is partially or entirely funded with federal money, they are covered by the Federal Hatch Act and are barred from being a candidate for a partisan office (offices with candidates identified as being from specific political parties). Employees may engage in political activities when they are performing official state duties. Employees shall not, however, use their position with the North Central District Health Department to distribute or receive political favors.

- *Employees may not display a political poster in their office, nor wear clothing with political slogans/symbols or political buttons while on duty.
- *If an employee wishes to take part in political activities during their normally scheduled work hours, they must arrange for leave (PTO, leave without pay, etc.) to cover the period of authorized absence.
- *If an employee is elected to office, and such office presents a conflict of interest with the employee's job or interferes with the employees scheduled work hours, the agency has the authority to change the employee's terms and conditions of employment, up to and including termination of employment.

^{*}Rest periods are considered work time.



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Approval Date:	3/2018

Policy: 2-150

Subject: Ethics Policy

Scope: All Employees

POLICY STATEMENT: North Central District Health Department (NCDHD) staff will perform all responsibilities and activities consistent with the Public Health Code of Ethics, the Department's Guiding Principles. With this policy, the North Central District Department (NCDHD) formally adopts the Public Health Code of Ethics established by the Public Health Leadership Society (PHLS) to provide guidance on issues of ethical practice. See Appendix A: Public Health Code of Ethics

PROCEDURE

Process for consideration, deliberation and resolution of ethical issues

- The Health Director has the "power and duty to (a) Provide administrative supervision of the Health Department." This responsibility is carried out through assurance that employees follow all health department policies, regulations and laws. The Health Director, a Public Health Nurse, and the Emergency Response Coordinator constitute the body (Ethics Team) responsible for consideration, deliberation and resolution of ethical issues.
- 2. At least once a year, the Health Director and will meet as the Department's Ethics Team. This meeting will be dedicated to a discussion of ethical issues and considerations. It will include a review of any issues that arose during the year and the resolution as well as lessons learned. The notes from the meeting will be prepared to document the findings of the Ethics Team.
- 3. As needed throughout the year, ethical issues will be handled by the Health Director and Ethics Team. The Health Director will determine which situations or emerging issues require consideration of applying this policy and will assign staff to assist. The ethical decisions will be documented as described in #4. Depending on the issue and scope of impact the Health Director may also choose to:
 - a. Invite stakeholders to participate. This could include, engaging individuals and/or organizations affected by the issue to ensure consideration of their risks and interest and commitment to resolve.

- b. Expand to department staff outside the Senior Management Team or invite other city or county staff to participate.
- c. This could also include representatives from other organizations Ethics Committees/Teams.
- 4. The staff assigned to an event or issue will work to find and help implement a satisfactory and ethical resolution. Their work will include the following:
 - a. Considering the input from all participants (including those most affected)
 - b. Researching and finding the best evidence/information/data available to inform decision-making.
 - c. Documenting issue, deliberation, action and resolution.
 - d. For large and significant events, an after action review is conducted. The documentation of the after action review will also be part of the Ethics Team Annual review.
 - e. For smaller events or simpler issues the annual review will be the after action review used to evaluate decisions, new information, lessons learned and outcomes.

APPENDIX A: Public Health Code of Ethics

The Public Health Code of Ethics consists of a set of Ethical Principles published by the Public Health Leadership Society (PHLS) in 2004 with collaboration of many national public health organizations. The Public Health Code of Ethics was finalized in 2001 and adopted by the American Public Health Association (APHA) in 2002 and by the National Association of County and City Health Officers (NACCHO) in 2003.

NCDHD employees will incorporate the following Principles of Ethical Practice into their planning, activities and daily work.

- 1. NCDHD will address principally the fundamental causes of disease and requirements for health, aiming to prevent adverse health outcomes.
- 2. NCDHD will achieve community health in a way that respects the rights of individuals in the community.
- 3. NCDHD policies, programs and priorities will be developed and evaluated through processes that ensure an opportunity for input from community members.
- 4. NCDHD will advocate and work for the empowerment of disenfranchised community members, aiming to ensure that the basic resources and conditions necessary for health are accessible to all.
- 5. NCDHD will seek the information needed to implement effective policies and programs that protect and promote health.
- NCDHD programs will provide communities with the information they have that is needed for decisions on policies or programs and should obtain the community's consent for their implementation.
- 7. NCDHD will act in a timely manner on the information they have within the resources and the mandate given to them by the public.
- 8. NCDHD programs and policies will incorporate a variety of approaches that anticipate and respect diverse values, beliefs, and cultures in the community.
- 9. NCDHD programs and policies will be implemented in a manner that most enhances the physical and social environment.
- 10. NCDHD will protect the confidentiality of information that can bring harm to an individual or community if made public. Exceptions must be justified on the basis of the high likelihood of significant harm to the individual or others.
- 11. NCDHD shall ensure the professional competence of their employees.
- 12. NCDHD and their employees will engage in collaborations and affiliations in ways that build the public's trust and the department's effectiveness.



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Policy: 2-160

Subject: Employment Classifications

Scope: All Employees

POLICY STATEMENT:

It is the intent of the North Central District Health Department to clarify the definitions of employment classifications so the employees understand their employment status and benefit eligibility.

Each employee is designated as either NONEXEMPT or EXEMPT from federal and state wage and hour laws. NONEXEMPT (hourly) employees are entitled to overtime pay under the specific provisions of federal and state laws. EXEMPT (salaried) employees are excluded from specific provisions of federal and state wage and hour laws. An employee's EXEMPT or NONEXEMPT classification may be changed only upon written notification by the North Central District Health Department Management. Provisions of eligible benefits are to be made at the discretion of the Executive Director.

In addition to the above categories, each employee will belong to one other employment category:

REGULAR FULL-TIME employees are those who are not in a temporary or introductory status and who are regularly scheduled to work the North Central District Health Department full-time schedule, defined as scheduled to work at minimum 32 hours/week. Generally, they are eligible for the benefit package, subject to the terms, conditions, and limitations of each benefit program.

REGULAR PART-TIME employees are those who are not assigned to a temporary or introductory status and who are regularly scheduled to work less than the full-time work schedule, but at least 20 hours per week. Regular part-time employees may be eligible for some benefits sponsored by

the North Central District Health Department. All benefits are subject to the terms, conditions, and limitations of each benefit program, and are prorated based upon the part-time employee's average work-week.

PART-TIME employees are those who are not assigned to a temporary or introductory status and who are regularly scheduled to work less than 20 hours per week. While they do receive all legally mandated benefits (such as Social Security and workers' compensation insurance), they are ineligible for all of the North Central District Health Department's other benefits programs.

INTRODUCTORY employees are those whose performance is being evaluated to determine whether further employment in a specific position with the North Central District Health Department is appropriate. Employees who satisfactorily complete the introductory period will be notified of their new employment classification.

TRAINEE employees are those whose performance and advancement is based upon the successful completion of the trainee development plan for positions identified and advertised as Trainee. Trainee employees receive all legally mandated benefits (such as Social Security and worker's compensation insurance), but are ineligible for all of the North Central District Health Department benefits programs, unless they are specified and funded through the grant/contract agency. Upon successful completion of the trainee development plan supported by performance evaluation, the trainee will advance to the introductory employee classification.

CONTRACT EMPLOYEES are individuals who enter into a contractual agreement with the North Central District Health Department Board that defines legally the rights of both the employee and the North Central District Health Department. Normally, employment contracts are limited in duration, identify specific contract objectives, identify funded benefits, and include employment terms consistent with these policies and procedures.

TEMPORARY employees are those who are hired as interim replacements, to temporarily supplement the work force, or to assist in the completion of a specific project. Employment assignments in this category are of a limited duration not to exceed 90 days in any twelve month period. Employment beyond any initially stated period does not in any way imply a change in employment status. Temporary employees retain that status, unless and until notified of a change. While temporary employees receive all legally mandated benefits (such as workers' compensation insurance and Social Security), they are ineligible for all of the other North Central District Health Department benefits programs.

CASUAL employees are those who have established an employment relationship with the North Central District Health Department, but who are assigned to work on an intermittent and/or unpredictable basis. While they receive all legally mandated benefits (such as workers' compensation insurance and Social Security), they are ineligible for all of the North Central District Health Department other benefit programs.

Individuals appointed by the Board to represent the North Central District Health Department, including Board members, Advisory Committee members, contractors, consultants, etc., are not

considered employees of the North Central District Health Department and are not subject to be considered employees for the provisions contained within these policies.

The North Central District Health Department retains confidential personnel files on each employee maintained in a secure location by the Executive Director or delegate. The personnel file includes and may include such information as the employee's job application, resume, records of training, all personnel action forms, performance evaluations, salary increases, professional development and other employment records.

Personnel files are the property of North Central District Health Department, and access to the information they contain is restricted. Generally, only supervisors and management personnel of the North Central District Health Department who have a legitimate reason to review information in a file are allowed to do so with the Executive Director and with reasonable advance notice.

Due to federal funding received at times, governmental officials who are responsible for contract or licensing monitoring or auditing, may have access to employee records including personnel files.

Employees who wish to review their own personnel file should put their request in writing to the Executive Director. With reasonable advance notice, employees may review their own personnel files in the offices with the Executive Director.



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Policy: 3-20

Subject: Employment Reference Checks

Scope: All Employees

POLICY STATEMENT:

It is the policy of the North Central District Health Department to check the references of all applicants. This provides additional assurance that individuals who join North Central District Health Department are well qualified and have a strong potential to be productive and successful.

The Assistant Director will respond to all reference check inquiries from other employers. The inquiries will provide confirmation of employment dates, wage rates, and position(s) held. Release of further information will require a release signed by the former employee authorizing the North Central District Health Department Executive Director to provide reference to future employers.



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Approval Date:	3/28/2018

Policy: 3-25

Subject: Employee Persona Data

Scope: All Employees

POLICY STATEMENT:

It is the responsibility of each employee to promptly notify the North Central District Health Department of any changes in personnel data: personal mailing addresses, telephone numbers, number and names of dependents, individuals to be contacted in the event of emergency, educational accomplishments, and other such status reports should be accurate and current at all times. If any personnel data has changed, notify the supervisor or the Executive Director.

Personnel data will include but not limited to:

- o Name
- Marital status
- Address
- o Telephone number
- o Number of eligible dependents
- o W-4 deductions

Person to be contacted in case of emergency



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Policy: 3-30

Subject: Employee Orientation Period

Scope: All Employees

POLICY STATEMENT:

The introductory period is intended to give new employees the opportunity to demonstrate their ability to achieve satisfactory level of performance and to determine whether the new position meets their expectations. The North Central District Health Department uses this period to evaluate employee capabilities work habits, and overall performance. Either the employee or the Executive Director may end the employment relationship at will at any time during employment, with or without cause or advance notice.

All newly appointed employees work on an introductory basis for the first 90 calendar days after their date of hire. Any significant absence will automatically extend an introductory period by the length of the absence. If the North Central District Health Department determines that the designated introductory period does not allow sufficient time to thoroughly evaluate the employee's performance, the introductory period may be extended for a specified period.

Upon satisfactory completion of the introduction period supported by a performance evaluation and personnel action form, employee enters the "regular" employment classification.

During the introductory period, new employees are eligible for those benefits that are required by law, such as worker's compensation insurance and Social Security. They may also be eligible for other provided benefits. All benefits are subject to the terms and conditions of each benefits program. Employees should read the information for each specific benefits program for the details on eligibility requirements.



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Approval Date:	3/28/2018

Policy: 3-60

Subject: Employee Evaluation Period

Scope: All Employees

POLICY STATEMENT:

Employees are strongly encouraged to discuss job performance and goals on an informal, day-to-day basis. A formal written performance evaluation will be conducted at the end of an employee's initial period of hire, known as the introductory period. The formal written performance evaluation is provided by the Director. Additional formal performance evaluations are conducted to provide both the Director and employee the opportunity to discuss job tasks, identify and correct weaknesses, encourage and recognize strengths, and discuss positive, purposeful approaches for meeting goals. Performance evaluations provide the basis for personnel actions and both documents become part of the employees personnel file.

Performance evaluations are scheduled approximately every 12 months. A performance evaluation may be completed earlier in the event of supervisor departure if the most recent performance evaluation is more than six months old.

The Executive Director will maintain informal documentation of employee performance discussed with the employee and may incorporate this documentation in the formal performance evaluation.

The Executive Director provides a formal written evaluation of all administrative and managerial positions. The Executive Director provides a formal written performance evaluation of the North Central District Health Department for team members with respect to daily job performance, team work, punctuality, etc.



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Approval Date:	3/28/2018

Policy: 3-70

Subject: Employee Background Checks

Scope: All Employees

POLICY STATEMENT:

It is the policy of the North Central District Health Department to complete background checks on all employees of the department. This background check may include, but is not limited to a check of character references, checks of Nebraska Child/Adult Abuse and Neglect Central Registers and Nebraska State Patrol Sex Offender Registry, and criminal records check. Unsatisfactory background checks will be grounds for immediate termination.



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Policy: 3-80

Subject: Employee Termination

Scope: All Employees

POLICY STATEMENT:

Termination of employment is an inevitable part of personnel activity within any organization, and many of the reasons for termination are routine. Below are examples of some of the most common circumstances under which employment is terminated.

RESIGNATION -- voluntary employment termination initiated by an employee.

DISCHARGE -- involuntary employment termination initiated by the organization.

LAYOFF -- involuntary employment termination initiated by the organization for non-disciplinary reasons.

Staff who are resigning employment should provide a written statement of such intent at least thirty days prior to resignation to the Director. The personnel files of terminated employees are archived by the North Central District Health Department and may be purged seven years after the date of separation.

All employees leaving employment at the North Central District Health Department, for any reason are asked to participate in an exit interview. The Director will generally schedule exit interviews at the time of employment termination. The exit interview will afford an opportunity to discuss such issues as conversion privileges, repayment of outstanding debts to the North Central District Health Department, or return of the North Central District Health Department property. Suggestions, complaints, and questions can also be voiced.

Resignation is a voluntary act initiated by the employee to terminate employment with the North Central District Health Department. The North Central District Health Department requires at least thirty days written resignation notice from all employees to be submitted to the immediate supervisor.

With no thirty days advance notice in writing, the employee may be considered ineligible for rehire. The Executive Director may grant a waiver of required notice or termination effective date may be scheduled sooner if it is in the best interest of the North Central District Health Department.

Discharge is the termination of employment for reasons of good cause, for gross misconduct, and in accordance with the provisions of these policies. The Executive Director is responsible to authorize employee discharge.

Layoff is employment separation deemed necessary by reason of lack of work or funds due to program reduction, reorganization or any other organizational revision. Employees affected will receive written notification of an impending lay off in advance when applicable prior to the effective date of the layoff. The layoff notice will include the reason for the layoff.

Seniority, performance, and type of appointment will be considered in determining the order of layoff but shall not be determinative of the order to layoff.

Employees who experienced a recent layoff may be offered reinstatement of their position and benefits at the time of layoff if funds are restored or work specific to their program area resumes.



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Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	
Revised Date:	
Approved By:	Executive Director
Approval Date:	3/2018

Number: 3-500

Procedure: Public Notification Protocol

Subject: Communication

Scope: All Employees

PROCEDURE Notification Regarding Public Health Violations

H. Notification Regarding Public Health Violations

It is important that the health department share enforcement information with other agencies and the public when the public may make decisions or alter their behavior, based on this information. It is important that the health department shares this information concerning enforcement actions and/or any resulting follow-up with other agencies that have a role in educating or providing follow-up with the enforced entity or the public. Appropriate agencies include health departments at other levels of government: Tribal, state, or other local health departments.

Public Notification: NCDHD requires that they notify their constituents, when appropriate, when a public health violation is noted that poses a significant health threat to the public.

Required Elements of a Public Notice (each notice must contain):

- 1. Description of the violation or situation.
- 2. When the violation or situation occurred.
- **3.** Any potential adverse health effects derived from the situation.
- **4.** The population at risk, including subpopulations that may be particularly vulnerable if exposed.
- **5.** Actions consumers should take, including when they should seek medical help, if known.
- **6.** What is happening to correct the violation or situation.
- 7. When compliance or resolution of the situation is expected.

- **8.** The name, business address, and phone number of the NCDHD as a source of additional information concerning the notice.
- **9.** A statement encouraging recipients of this notice to distribute the notice to others, where applicable.

For non-emergent issues, these notifications should take place as soon as possible (within eight business hours). Because some local newspapers print a weekly edition vs. a daily edition, it is important to recognize that attempts to notify the public immediately may not result in the message going to the public immediately. This will require that more than one means of communication be used in order to saturate the public with the message to the highest extent possible. Acceptable methods of notification may include public postings, press releases, media releases, mailings, website postings, social media, or any other venues accessible through the public domain. For emergent issues, notification methods must utilize a variety of means of notifications to ensure that immediate public notification actually occurs. Methods of immediate notification may include daily newspaper editions, public postings, radio announcements, website postings, or social media postings.

Documentation of notification to the public must be completed immediately after happening.

Documentation can be recorded within the respective file with the other situation/issue documents.

This notification will be tracked via the NCDHD Performance Measures Database



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Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 4-10

Subject: Benefits

Scope: All Employees

POLICY STATEMENT:

Eligible employees at the North Central District Health Department are provided a wide range of benefits. A number of the programs, i.e. Social Security, workers' compensation, and unemployment insurance, cover all employees in the manner prescribed by law.

Benefits eligibility is dependent upon a variety of factors, including employee classification. The Supervisor or Executive Director can identify the programs for which an employee is eligible. Details of many of these programs can be found elsewhere in the Manual.

The following benefit programs (if applicable)* may be available to eligible employees:

Administrative Leave

Bereavement Leave

Civic Duty

Dental Insurance

Health and Life Insurance*

Holidays

Individual Development Plan (IDP)*

Paid Time Off (PTO)

Retirement

Supplemental Insurance (AFLAC)

Workers' Compensation Insurance

Some Benefit programs may enlist contributions from the employee, but most are contributed by the Department or fully paid by the North Central District Health Department.



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Approval Date:	3/28/2018

Policy: 4-20

Subject: Administrative Leave

Scope: All Employees

POLICY STATEMENT:

Under unusual circumstances, including bereavement or other family emergencies, emergencies such as severe weather, fires, power failures, tornadoes, earthquakes or other natural disasters, the Executive Director may grant administrative leave for employees. The Executive Director must approve administrative leave and will determine whether the leave is paid or unpaid.



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Policy: 4-30

Subject: Bereavement Leave

Scope: All Employees

POLICY STATEMENT:

Funeral/bereavement leave will be granted when there is a death or imminent death of a family member. Family members are defined as spouse, child, parent, brother, sister, grandchild, foster child, foster parent, step child, or step parent.

Funeral leave is authorized for use up to five (5) working days for the family members identified above.

Funeral leave can only be used at the time of death up to two (2) days following the funeral and will not be accumulated to be used at another time.

Employees who wish to be granted paid funeral/bereavement leave should contact the Health Department as soon as possible and complete a leave request form providing ample details of the situation and number of days required to their supervisor, when possible. An employee is responsible for submitting written communication to the Executive Director containing the leave request. Failure to comply with these procedures may result in the request being denied.

The death of other family members not defined above or where a "close personal relationship" exists may warrant special consideration of paid absence from work on a case-by-case basis at the discretion of the Executive Director.

Generally, the determination of whether an employee will be granted paid funeral/bereavement leave rather than other types of absence will be based on such factors as the employee's service length, performance history and apparent hardship conditions.

The supervisor will make a recommendation for paid leave, unpaid leave, or accrued PTO to the Executive Director. The type of absence approval will be entered on the employee's time sheet/card by the supervisor. Employees who are on temporary or probationary status are not eligible for funeral/bereavement leave with pay unless authorized under special circumstances by the Executive Director.

Proof of death and relationship to the deceased may be required.



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Policy: 4-40

Subject: Civic Duty

Scope: All Employees

POLICY STATEMENT:

Witness Summons

If an employee is summoned to be a witness in their official capacity, whether on behalf of the prosecutor or the defendant, taking leave is not required since the employee will be representing the agency.

If an employee is summoned to be a witness as a private citizen, the employee will be on authorized annual leave. If annual leave is exhausted, leave without pay will be used.

Jury Duty

Employees are required to notify their immediate supervisor promptly upon receipt of a jury summons and subsequent notice to serve as juror. Employees summoned for jury duty will receive their regular rate of pay for normal work hours, provided the employee submits evidence of the summons and selection notice. Paid absences for jury duty must be so noted on the employee's program tracking sheet by the immediate supervisor for each pay period in which this form of absence occurs. Fees received as compensation for jury duty shall be paid to the North Central District Health Department, unless vacation/annual leave is taken. Employees will be allowed to retain any reimbursements for transportation, lodging, meals paid by the respective court jurisdiction.

Time off for Voting

Staff members are encouraged to vote via absentee ballots if election polling hours conflict with work schedules. If unable to vote via absentee ballot, registered voters may receive authorization for up to two hours paid absence from work to vote in tribal, state or federal election. The length of absence will be granted at the discretion of the immediate supervisor.

Employees may be required by their supervisor to provide evidence, such as location of poll or voting validation.



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Policy: 4-60

Subject: Life Insurance

Scope: All Employees

POLICY STATEMENT:

An eligible employee of the North Central District Health Department is offered Life Insurance, if applicable, as funding is available. Employees who are eligible may apply for insurance. If a designated Life Insurance policy is "in place and active," The North Central District Health Department may pay up to One-Hundred per cent of the monthly insurance cost for single insurance when they become enrolled in the insurance plan. Employees have the option to purchase family insurance coverage at their own expense. Life insurance (if available) is not paid by the department for family members and is only available to employees through the insurance package.

Supplemental insurance benefits may be made available to employees as a part of the benefit package but at the personal expense of the employee. This is strictly a voluntary feature to which the employee may choose to participate or may deny. Examples of supplemental insurance are: cancer insurance, short-term disability, accident, intensive care, and etc.



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Approval Date:	3/28/2018

Policy: 4-70

Subject: Holidays

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department will be closed to observe the following holidays (on the day or the day observed) and those days that the Federal Government and/or Nebraska State Government state or declare a holiday or as a paid day off:

New Year's Day

Presidents Day

Martin Luther King Day

Arbor Day

Memorial Day

Juneteenth Day

Independence Day

Labor Day

Columbus Day

Veterans Day

Thanksgiving

Day After Thanksgiving

Christmas Day

Full time employees will be paid at their regular salary or hourly rate, via Holiday Pay, for an eight-hour workday or prorated as appropriate. Authorization of the Executive Director is requested for an employee work on a scheduled holiday.



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Policy: 4-80

Subject: Individual Development Plan (IDP)

Scope: All Employees

POLICY STATEMENT:

Employees are valuable resources to North Central District Health Department, and they are encouraged to develop their professional abilities through personal and work-related training opportunities. Upon completion of an employee's introductory period, the Supervisor and/or Executive Director and employee will develop an individual professional development plan which relates to personnel issues, at least one of which is related to Drug-Free Workplace issues. Attendance at any off-site training, workshop, or seminar may be determined based on needs identified in the IDP. The plan and any training records submitted by the employee will become a part of the employees' personnel record and will be considered during performance evaluations and promotional opportunities.

The North Central District Health Department may assist in the achievement of an individual's professional development plan through work related-education and training. All work related education and training opportunities funded by the North Central District Health Department will require the authorization of the Executive Director within any budgetary and compliance constraints.

All employees will be required to complete an Individual Development Plan after completion of their introductory period. In-service training plans and approval of outside training will be based on the state's licensing and/or certification standards and Individual Development Plans.

The agency's in-service training program for personnel may cover:

- A. Skills and information which enhance their ability to carry out the agency's programs;
- B. Skills in working cooperatively and effectively with other personnel who fulfill different tasks or responsibilities; and
- C. An awareness, sensitivity, and appreciation of cultures and perspectives of the clients served by the agency.

The in-service training program is reviewed at least annually and revised as indicated by the agency's assessment of its training needs.

Employees and volunteers without professional training and those with limited professional experience will receive training appropriate to their assigned tasks.



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Policy: 4-90

Subject: Paid Time Off (PTO)

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department provides Paid Time Off for annual leave, sick leave, holidays, and other situations where employees need to take time off of work. PTO is earned at the rate outlined in the accrual section of this policy. The accrual begins per employee anniversary date.

On the anniversary date of hire for each eligible employee, PTO totals will be reviewed.

Requests for scheduled PTO should be submitted to the supervisor at least 48 hours prior to the requested dates whenever possible. If the PTO exceeds 3 consecutive days, the request should be submitted a week prior to the PTO so that the workload can be evenly distributed and covered during the employee's absence.

Eligible employees may use PTO hours for an absence due to their own illness, injury, dental care, health care prevention, etc., or that of an immediate family member (spouse, child, sibling or parent) in increments of one (1) hour.

If an employee is absent for three or more consecutive days due to illness or injury, a physician's statement may be requested, verifying the disability and its beginning and expected ending dates. Such verification may be requested for other sick leave absences as well and may be required as a condition to receiving approved PTO sick leave benefits. Bereavement days will not be considered as PTO.

Employees are to promptly notify their supervisors within 30 minutes of the regularly scheduled starting time whenever the use of PTO time for personal sick leave becomes necessary. The employee him/herself should be the person contacting the supervisor, if possible. Employees are expected to:

- 1. Advise their supervisor of the specific reason for taking sick leave;
- 2. Advise their supervisor of the probable duration of absence;
- 3. Seek their supervisors' oral or written approval to use sick leave; and
- 4. Keep their supervisor informed of conditions during a sick leave absence, including medical verifications. Any illness beyond three days may require a physician's verification.

North Central District Health Department reserves the right to determine an employee's misuse or abuse of PTO absences, which may be subject to discipline, including termination.

Where PTO is taken due to health reasons, North Central District Health Department reserves the right to require that the employee be examined by an agency paid physician prior to returning to work in order to assure fitness for a resumption of duties and the welfare of other employees and clients.

If a legitimately absent employee exhausts his or her accrued PTO due to an illness or another emergency that requires special considerations for extended absence from work and is authorized by the Executive Director, the employee will be subject to an unpaid leave-of-absence request also authorized by the Executive Director.

Time off is paid at the employee's base pay rate at the time of vacation. It does not include overtime or any special forms of compensation such as incentives, commissions, bonuses, or shift differentials.

A maximum accrual of annual leave time is listed in the accrual schedule. Accrued time that exceeds the maximum amount will be forfeited unless approved by Executive Director. Upon "positive" termination of employment, employees will be paid for unused PTO time that has been earned through the last day (less that of forthcoming holidays of the employee's anniversary period) of work contingent upon thirty-day notification of resigning or policy waiver authorized by the Executive Director. Only with administrative approval will PTO hours be allowed to accrue in excess of the hours listed in this policy.

Carry over from an employee's anniversary period should not exceed the maximum listed accrual balance. Only with administrative approval will PTO be allowed to exceed maximum accrual balance. Reasons must be related to work demands and requirements that cannot be delegated to other staff members. PTO hours beyond 120 in excess may be cashed out at regular pay per the approval of the director.

Leave notice must be completed and submitted for approval to the employee's supervisor prior to the absence whenever possible, or immediately upon return to work in the case of unscheduled absences due to sickness or emergencies. Leave notice will be filed as a component of the payroll and personnel records for each employee.

PAID TIME OFF (PTO) EARNING SCHEDULE

Years of	PTO Hours	Accrual Hours	Maximum PTO
Service	per Year	Per Pay Period	Accrual Balance
First year	120	4.62	200 hrs.
2 years+	160	6.15	280 hrs.
10 years+	200	7.69	320 hrs.
15 years+	240	9.23	360 hrs.

An employee will begin to accrue PTO from their first day of employment. However, the employee is not allowed to take PTO until they have completed the probation period of 90 days.



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Policy: 4-100

Subject: Worker's Compensation

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department provides a comprehensive workers' compensation insurance program at no cost to employees. This program covers any injury or illness sustained in the course of employment that requires medical, surgical, or hospital treatment. Subject to applicable legal requirements, workers' compensation insurance provides benefits after a short waiting period or, if the employee is hospitalized, immediately.

Employees who sustain work related injuries or illnesses should inform their supervisor immediately. The supervisor will report the incident to the Executive Director, who will complete the necessary documentation. All on-the-job injuries are to be reported immediately. This will enable an eligible employee to qualify for coverage as quickly as possible.

Neither the North Central District Health Department, nor the insurance carrier will be liable for the payment of workers' compensation benefits for injuries that occur during an employee's voluntary participation in any off duty recreational, social, or athletic activity sponsored by the North Central District Health Department.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	03/07/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 5-10

Subject: Employee Timekeeping & Project Tracking

Scope: All Employees

POLICY STATEMENT:

Accurately recording time worked is the responsibility of every employee. Federal and state laws require the North Central District Health Department to keep an accurate record of time worked in order to calculate non-exempt employee pay and benefits. Time worked is all the time actually spent on the job performing assigned duties.

Nonexempt employees should accurately record the time they begin and end their work, as well as the beginning and ending time of each meal period. They should also record the beginning and ending time of any split shift or departure from work for personal reasons. Overtime work must always be approved before it is performed.

Altering, falsifying, tampering with time records, or recording time on another employee's time record may result in disciplinary action, up to and including termination of employment.

Nonexempt employees should report to work no more than 15 minutes prior to their scheduled starting time nor stay more than 15 minutes after their scheduled stop time without expressed, prior authorization from the Director.

Exempt employees will keep program tracking sheets to document their weekly hours for accountability to funding sources and to record PTO hours/days. It is the employee's responsibility to complete an accurate tracking record, attaching all authorization leaves slips and any flextime schedule, and to sign his or her record to attest to the accuracy of documented allocation. The

Director is responsible to review and certify the employee's time record for accuracy and completeness prior to submitting it for payroll processing.



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Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	03/07/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 5-20

Subject: Payroll

Scope: All Employees

POLICY STATEMENT:

All employees are paid every two weeks. This results in 26 pay periods per year. Each paycheck will include earnings for all work performed through the end of the payroll period. Respective payroll periods are at the discretion of the Executive Director and are subject to change on any given notice.

Written authorization by the employee is required to release any pay checks to an individual other than the employee on scheduled pay dates. Payment will be scheduled for distribution to employees within five ordinary business days after a pay period has ended.

The North Central District Health Department does not provide pay advances to employees under any circumstances. The only exception may pertain to approved travel advances.

The North Central District Health Department takes all reasonable steps to ensure that employees receive the correct amount of pay in each paycheck and that employees are paid promptly on the scheduled payday. In the unlikely event that there is an error in the amount of pay, the employee should promptly bring the discrepancy to the attention of the Executive Director so corrections can be made as quickly as possible.

The law requires the North Central District Health Department make certain deductions from every employee's compensation. Among these are applicable federal, state, and local income taxes. The North Central District Health Department must also deduct Social Security taxes on each employee's earnings up to a specified limit that is called the Social Security "wage base." The

North Central District Health Department matches the amount of Social Security taxes paid by
each employee.



Date Created:	3/21/2018
Assigned Annual Review Period:	At least every 5 years
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Approved By:	Board of Health
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Policy: 5-60

Subject: Salary Structure

Scope: All Employees

Policy

North Central District Health Department (NCDHD) recognizes the importance of cultivating a rewarding and productive work environment through the selection and retention of a highly-qualified, talented and diverse workforce. NCDHD will compensate employees based upon his/her applicable education, education/experience desired for the position (as referenced in the job description), bilingual status, relevant experience, budget parameters, local wage scales of comparable positions, and in comparison with public health department salary levels in Nebraska.



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Reviewed Date:	03/07/2018
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Approval Date:	3/28/2018

Policy: 6-10

Subject: Employee Safety

Scope: All Employees

POLICY STATEMENT:

To assist in providing a safe and healthy work environment for employees, clientele, and visitors, North Central District Health Department shall maintain a workplace safety program. The Executive Director has responsibility for implementing, administering, monitoring, and evaluating the safety program. Its success depends on the alertness and personal commitment of all.

The North Central District Health Department provides information to employees about work place safety and health issues through regular internal communication channels such as supervisor and/or employee meetings, bulletin board postings, memos, or other written communications.

Some of the best safety improvement ideas come from employees. Those with ideas, concerns, or suggestions for improved safety in the workplace are encouraged to raise them with their supervisor, or with another supervisor or manager, or bring them to the attention of the Executive Director. Reports and concerns about workplace safety issues may be made anonymously if the employee wishes. All reports can be made without fear of reprisal.

Each employee is expected to obey safety rules and to exercise caution in all work activities. Employees must immediately report any unsafe condition to the appropriate supervisor. Employees who violate safety standards, who cause hazardous or dangerous situations, or who fail to report or, where appropriate, remedy such situations, may be subject to disciplinary action, up to and including termination of employment.

In the case of accidents that result in injury, regardless of how insignificant the injury may appear, employees should immediately notify the Executive Director. Such reports are necessary to comply with laws and initiate insurance and workers' compensation benefits procedures if applicable.



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Approval Date:	3/28/2018

Policy: 6-30

Subject: Tobacco Use

Scope: All Employees

POLICY STATEMENT:

In keeping with the North Central District Health Department intent to provide a safe and healthy work environment, the use or possession of any tobacco product is prohibited in all North Central District Health Department buildings, facilities, grounds and vehicles in accordance with federal contract and grant guidelines.

This policy applies equally to all employees, clients and visitors.

This policy may be updated and changed by the Executive Director and will come in effect upon written notice to employees.



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Policy: 6-40

Subject: Equipment & Vehicle Use

Scope: All Employees

POLICY STATEMENT:

All North Central District Health Department employees must follow State and Federal Rules and Regulations governing the operations of vehicles. The following are guidelines:

- Drivers must have a valid driver's license.
- Due to possible liability insurance requirements, staff under 26 years of age may not be authorized to drive agency owned vehicles (unless authorized by the Executive Director).
- The operator of any motor vehicle which is in any manner involved in an accident of any sort shall within 8 hours report the matter in writing to their supervisor, who will report the accident to the Executive Director within 48 hours.
- A minimum of one rest stop of 15 minutes or more, each 100 miles traveled will be provided for clients and drivers.
- Staff may be authorized to transport family members or children for case management purposes and/or to schedule North Central District Health Department meetings.

No alcohol, tobacco, or illegal drugs will be used in vehicles used for agency business during business hours. North Central District Health Department employees will refrain from using tobacco products in agency vehicles. North Central District Health Department employees will abide by all laws pertaining to the use of alcohol and or drugs at all times. Infractions of this policy are subject of disciplinary action up to and including termination.



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<u>Policy:</u> 6-50

Subject: Business Travel; Personal Expense

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department will reimburse employees for reasonable business travel expenses incurred while on assignment away from the normal work location or conducting business locally. All business travel must be requested on the North Central District Health Department Travel Authorization Form and be approved in advance by the Executive Director.

When approved, the actual costs of travel, meals, lodging, and other expenses directly related to accomplishing business travel objectives will be reimbursed by the North Central District Health Department in accordance with the Federal Travel Regulations after receipts are submitted to the North Central District Health Department. To the extent possible, employees traveling to the same destination will commute in the same vehicle.

Expenses that generally will be reimbursed include the following:

- Airfare or train fare for travel in coach or economy class or the lowest available fare. Airline tickets which are purchased less than 14 days in advance may not be allowed expenses unless a written justification as to why the tickets were not purchased in a timely manner is included in the request for reimbursement.
- Car rental fees, primarily for compact or mid-sized cars.
- Fares for shuttle or airport bus service, public transportation, or other ground travel, at the most reasonable rate available.
- Taxi fare, only when there is no less expensive alternative.
- Mileage costs, based upon beginning and ending mileage, for use of personal vehicles, only

when less expensive transportation is not available.

At times the North Central District Health Department employees are authorized to use their own vehicles for administrative travel. Authorized personal vehicle use for business will be reimbursed at the reimbursement mileage rate set by the IRS for travel beyond the employees' normal commute from home to the office. This reimbursement does not cover an employees' travel at the beginning or end of the day if the mileage of the travel is less than the employee's normal commute to the office.

Example:

Normal commute from home to office:	80 miles
• Mileage to/from meeting: Reimbursement:	100 miles 20 miles
Mileage to/from meeting:	65 miles

Reimbursement: 0 miles

- Cost of standard accommodations subject to the lodging rates allowable within the Federal Travel Regulations (i.e. CONUS rates as listed at www.policyworks.gov/org/main/mt/homepage/mtt/perdiem).
- Cost of meals, subject to the Per Diem rates allowable within the Federal Travel Regulation (i.e. CONUS rates). Receipts may not (always) required to be submitted for reimbursement; however the employee is required to maintain supporting documentation either in the form of a log, accountant book or actual receipt(s). No reimbursement may be made for alcoholic beverages.
- A maximum of twelve (12) hours meeting and/or travel time will be allowed for business travel and training per a one day twenty-four hour period.

Employees who are involved in an accident while traveling on business must report the incident to their immediate supervisor.

A family member or friend may accompany employees on business travel, when the presence of a companion will not interfere with the successful completion of business objectives. Generally, employees are also permitted to combine personal travel with business travel, as long as time away from work is approved. Additional expenses arising from such non-business travel are the responsibility of the employee.

Employees must submit actual travel authorization expense reports, attaching receipts for lodging, travel, phone calls, and all other expenses, within thirty days of completed travel. The employee will receive the amount dictated by the Federal CONUS rates, when applicable, whether or not the expenses for lodging and subsistence exceed or are less than actual costs. In rare circumstances, if there are no alternatives, rates that exceed the CONUS rate may be approved by the Administration. If per-diem structure is used in the office at any time as approved by management, then the set per-diem structure and procedure will be followed regarding receipts management.

Employees should contact the Director for guidance and assistance on procedures related to travel arrangements, travel advances, expense reports, reimbursement for specific expenses, or any other business travel issues.

Abuse of this business travel expense policy, including falsifying expense reports to reflect and/or costs not incurred by the employee, can be grounds of disciplinary action, up to and including termination of employment.



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Approval Date:	3/28/2018

Policy: 6-65

Subject: Debarment & Suspension

Scope: All Employees

POLICY STATEMENT:

The Federal Office of Management and Budget (OMB) Circular A110, Uniform Administrative Requirements for Grants and Agreements with Institutions of Higher Education, Hospitals, and Other Non-Profit includes Debarment and Suspension requirements.

Section 13 provides Federal awarding agencies and recipients shall comply with the non-procurement debarment and suspension common rule implementing Executive Orders 12549 and 12689, "Debarment and Suspension." This common rule restricts sub-awards and contracts with certain parties that are debarred, suspended or otherwise excluded from or ineligible for participation in Federal Assistance programs or activities.

Appendix A, Section 8 prohibits contracts made to parties listed on the General Services Administration's List of Parties Excluded from Federal Procurement or Non-procurement Programs. Contractors with awards that exceed the small purchase threshold shall provide the required certification regarding its exclusion status and that of its principal employees.

The foregoing provisions of A110 prevent direct or pass-through recipients of Federal Funds from doing business with an entity or individual included on the debarment list, including contract purchases and sub-recipient awards.

The North Central District Health Department policy is to not procure goods or services or make contract purchases from an entity or individual included on the debarment or to make a sub-recipient award to an entity or individual included on the debarment list.

A purchase or contract greater than \$25,000.00 shall not be made from or with an entity or individual included on the debarment list. Purchases and contracts that exceed the small purchase threshold of \$25,000.00 shall be verified by one or more of the following methods: 1) cross checked to the debarment list before a purchase is made, 2) collecting a certification from the entity, or 3) adding a clause or condition to the covered transaction with that entity. The small purchase threshold applies to a contract amount and not to separate invoice amounts. Purchases for goods and services or contract purchases less than \$25,000.00 will not be cross-checked to the debarment list; however purchases will not knowingly be made from those entities or individuals.

Sub-contract awards shall not be made to an entity or individual on the debarment list. (The \$25,000.00 small purchase threshold does not apply to awards to sub-grantees.) Contracts or sub-awards made to a sub-grantee will include a certification clause regarding its exclusion status and that of its principal employees from the Federal debarment list.

The Excluded Parties List System can be accessed at www.sam.gov.



Date Created:	7/1/2010
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/1/2018
Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 6-70

Subject: Flex Time

Scope: All Employees

Flextime scheduling is not considered a direct benefit offered to employees at North Central District Health Department. However, North Central District Health Department does recognize that employees have personal or family business on occasion that might conflict with work hours and that the demands of the work week may cause for work weeks above forty hours. Through prior approval of an employee's immediate supervisor, flex time of work hours may be manipulated. Flex time hours should be used within the following week unless prior approval is provided by supervisor or Executive Director. Any reasonable request to modify office hours or an employee's workday schedule should be presented in advance to the Executive Director for approval. The Executive Director will try to accommodate reasonable requests that do not interfere with the overall operations of the Health Department.



Date Created:	09/01/2000
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	02/01/2018
Revised Date:	03/07/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 6-80

Subject: Emergency weather and/or conditions

Scope: All Employees

POLICY STATEMENT:

With the safety and welfare of North Central District Health Department employees as a concern, employees will determine for themselves their ability to drive in current weather conditions, their vehicle condition, and/or the immediate road conditions. If an employee makes a personal decision not to travel to get to work, employees may use accrued PTO hours, earned compensatory time, leave without pay, or may be allowed to make up missed work time within the work week at the Executive Director's discretion.



Date Created:	January 2018
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/2018

<u>Policy:</u> 6-90

Subject: Hours of Operation

Scope: All Employees

<u>Hours of Operation</u>: The normal operating hours of the North Central District Health Department is Monday-Friday, 8:00 a.m. to 4:30 p.m. However, work schedules may change depending upon the needs of the position.

All staff may need to work irregular or additional hours as directed by the Executive Director to assist in responding to emergency and non-emergency situations as they arise. This response may occur during unconventional hours including: evenings, nights, weekends, and holidays.

<u>On-Call (24/7 coverage)</u>: The On-Call policy covers all after-hours, holidays, and weekend hours to ensure 24/7 access to public health services is offered in a reliable and timely manner. This allows access to NCDHD for public health emergencies, environmental hazards, and occupational public health hazards.

The NCDHD executive health director is responsible for all On-Call hours regarding both general business and public health emergency situations.

On-Call Procedure: When responding to a call, the response procedures are as follows:

- 1. Return any missed calls as soon as possible (within thirty (30) minutes) after receiving a call.
- 2. Any non-emergency, consult-type of calls can be handled without reporting to the NCDHD office. Time spent consulting will be counted as work-time. The NCDHD staff on-call reserves the right to handle the immediate needs of the caller via the phone, and if appropriate, can defer onsite response to the next business day. This is only to be done if the situation is stable and will not cause damage or harm to any person, property or to the general public.
- 3. If the call is emergent in nature and requires the staff to report to the NCDHD office, they must be able to arrive at within a timely manner of receiving the phone call (two hours).
- 4. Record any on-call response time on time sheets. Note "On-Call Response" in the description line.



Date Created:	3/26/2018
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 6-95

Subject: Compliance with Local Government Miscellaneous

Expenditure Act

Scope: All Employees and Board Members

POLICY STATEMENT:

North Central District Health Department makes every effort to conduct business in compliance with the Local Government Miscellaneous Expenditure Act. In doing so, this policy has been instituted as a means of conforming to the conditions of the Act. The Act, which is set out at Neb. Rev. Stat. §§ 13-2201 through 13-2204 (Reissue 2012), establishes strict parameters for the expenditure of public funds by designated public entities.

The Board of Health has approved permission for the health director, his/her designee, or any Officer of the Board to acknowledge or recognize staff and/or Board members for various occasions or circumstances as set forth in Attachment One of this policy.

The attachment does not command that any of the occasions or events are required to be observed, but rather sets a price limit should the decision be made to recognize an occasion or event.

Section 13-2203(3) of the Act specifies that following its initial adoption, the policy shall not be amended or altered more than once in any twelve-month period.

Attachment One Compliance with Local Government Miscellaneous Expenditure Act Occasions and Recognitions and Dollar Limits

Occasion ~ Recognition	For	Dollar Value
One recognition dinner per year	Board and/or staff members	≤ \$25.00/person
NCDHD picnic or celebration	Board and/or staff members	≤ \$25.00/person
Annual meeting dinner	Board and/or staff members and guests	≤ \$25.00/person
Staff/Board meeting meals	Board and/or staff members	≤ \$25.00/person
Funeral (gift, flowers or memento) for relationships specified in bereavement policy	Current board and/or staff members	≤\$75.00
Funeral (gift, flowers or memento)	NCDHD volunteers NCDHD partners NCDHD subcontractors NCDHD past board members NCDHD past staff that left in good standing	≤\$50.00
Funeral office closure (for loss of someone in current household)	Current board and/or current staff member	Dollar amount varies by employee.
Retirement	Staff member	≤\$50.00
Retirement	Board member	<u>≤</u> \$25.00
Retirement	NCDHD volunteers NCDHD partners NCDHD subcontractors	≤ \$25.00
Miscellaneous, not specified above: Birth, adoption, wedding, wedding anniversary, graduation, birthday, retirement, funeral, miscellaneous congratulatory, farewell, showers, holidays, certificates of achievement, get well, other emergencies, etc.	Board and/or staff members	≤ \$25.00
Christmas Eve- office closure	Staff members	Dollar amount varies by employee.
Anniversary of employment (5 year increments)	Staff members	\$5/year starting at 5 years and continues in increments of 5 years thereafter
Anniversary of board involvement (10 year increments)	Board members	≤\$50.00
Wellness challenge prizes	Staff members	≤ \$25.00
Peer recognition prizes	Staff members	<u><</u> \$25.00
Miscellaneous internal challenges	Staff members	≤\$50.00
Employee Appreciation Day	Staff members	≤ \$50.00
Non-weather-related closures/early dismissals	Staff members $\leq 3x/days/year$	Dollar amount varies by employee.
NCDHD apparel/uniforms for marketing	Staff and Board members	≤\$300.00/year

^{**} Dollar value- less than or equal to the amount specified. The dollar value could include a gift card, flowers, memento, plant, plaque, commemoration, gift, or any other gift item. The prices noted do not include delivery fees; the delivery fees are to be an addition to the maximum dollar value.



Date Created:	3/23/2018
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	
Revised Date:	
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 6-100

Subject: Lactation Support

Scope: All Employees

NCDHD recognizes the importance and value of breast feeding, and supports employees' desire to breast-feed their infants. Any lactating women may use meal and rest breaks to breast-feed or express breast milk for up to one year after the child's birth. If the time provided by meal and rest breaks is not ample, more time may be permitted on a case-by-case basis with Management approval. NCDHD will provide a clean, private space, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public for employees to express breast milk.



Date Created:	7/1/2010
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/1/2018
Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 7-10

Subject: Medical Leave

Scope: All Employees

The North Central District Health Department provides medical leave of absence without pay to eligible employees who are temporarily unable to work due to a serious health condition or disability. For spouses of this policy, serious health conditions or disabilities include inpatient care in a hospital, hospice, or residential medical care facility; continuing treatment by a health care provider; and temporary disabilities associated with pregnancy, childbirth, mental, and related medical conditions.

Employees in the following employment classifications are eligible to request medical leave as described in this policy:

- (1) Regular full-time employee
- (2) Regular part-time employees

Eligible employees should make requests of medical leave to their supervisors at least 30 days in advance of foreseeable events and as soon as possible of unanticipated events. Medical leave requires approval by the Executive Director.

An appropriate health care provider's statement must be submitted verifying the need of medical leave and its beginning and expected ending dates. Any changes in this information should be promptly reported to the North Central District Health Department. Employees returning from medical leave must submit a health care provider's verification of their fitness to return to work. Eligible employees are normally granted leave for the period of the disability, up to a maximum of 12 weeks within 12 month period. Any combination of medical leave, sick leave and family leave may not exceed this maximum limit.

Employees who sustain work-related injuries are eligible for a medical leave of absence for the period of disability in accordance with all applicable laws covering occupational disabilities.

Benefit accruals, such as vacation, sick leave, or holiday benefits, will be suspended during any unpaid leave and will resume upon return to active employment.

So that an employee's return to work can be properly scheduled, an employee on medical leave is requested to provide the North Central District Health Department with at least two weeks advance notice of the date the employee intends to return to work. When medical leave ends, the employee will be reinstated to the same position, if it is available, or to an equivalent position for which the employee is qualified. If an employee fails to report to work at the designated return date or the end of the medical leave, the North Central District Health Department will assume that the employee has resigned.

Donation of leave time by other employees will be granted, subject to approval by Executive Director.



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Assigned Annual Review Period:	At least every 5 years
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Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 7-20

Subject: Family Leave

Scope: All Employees

The North Central District Health Department is not required to comply with the Family Leave Act because the staff size is under the minimum requirements. If employees wish to request a leave of absence without pay to take time off from their scheduled duties to fulfill obligations relating directly to childbirth, adoption, or placement of a foster child; or to care for a child, spouse, or parent with a serious health condition, they should submit a request to the Executive Director. The Executive Director will consider reasonable requests on a case by case basis, based upon the Health Department workload and the circumstances presented in the request. Benefit accruals, such as vacation, sick leave, and holiday benefits will be suspended during any unpaid leave and will resume upon return to active employment.

So that an employee's return to work can be properly scheduled, an employee on family leave is requested to provide the North Central District Health Department with at least two weeks advance notice of the date the employee intends to return to work. When a family leave ends, the employee will be reinstated to the same position, if it is available, or to an equivalent position for which the employee is qualified.

If an employee fails to report to work at the designated return date or at the end of the approved leave period, the North Central District Health Department will assume that the employee has resigned.



Date Created:	7/1/2010
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/1/2018
Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 7-30

Subject: Military Leave

Scope: All Employees

The Executive Director will grant a military leave of absence to employees, except those occupying temporary positions, to attend scheduled drills or training or if called to active duty with the U.S. armed services.

Employees will continue to receive full pay while on leave for two-week training assignments and shorter absences. The portion of any military leave of absence in excess of two weeks will be unpaid. However, employees may use any available paid time off for the absence.

Benefit accruals, such as vacation, sick leave, or holiday benefits, will be suspended during any unpaid military leave and will resume upon the employee's return to active employment.

Employees on two-week active duty training assignments or inactive duty training drills are required to return to work for the first regularly scheduled shift after the end of training, allowing reasonable travel time. Employees on longer military leave must apply for reinstatement in accordance with all applicable state and federal laws.

Every reasonable effort will be made to return eligible employees to their previous position or a comparable one. They will be treated as though they were continuously employed for purposes of determining benefits based on lengths of service, such as the rate of vacation accrual and job seniority rights.



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Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 7-40

Subject: Pregnancy Related Absences

Scope: All Employees

The North Central District Health Department will not discriminate against any employee who requests an excused absence for medical disabilities associated with a pregnancy. Such leave requests will be made and evaluated in accordance with the medical leave policy provisions outlined in this Manual and in accordance with all applicable federal and state laws.

Requests for time off associated with pregnancy and/or child birth (apart from medical disabilities associated with these conditions) will be considered in the same manner as any other request for sick leave or an unpaid personal or family leave.



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Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/1/2018
Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 7-50

Subject: Absence Without Leave

Scope: All Employees

Absence without leave is unauthorized and shall not be compensated. Supervisors shall report any subordinate's absence without leave as soon as possible to the Executive Director. An absence without leave may be grounds for disciplinary action. Two consecutive working days of absence without leave will be considered as the employee's resignation. If within five working days of separation the employee makes satisfactory explanation for the absence, Executive Director may reinstate the terminated employee.



Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	4/2016, 3/2018
Revised Date:	4/2016, 3/2018
Approved By:	Board of Health
Approval Date:	3/2018

Policy: 8-10

Subject: Employee Conduct

Scope: All Employees

POLICY STATEMENT:

Employees of the North Central District Health Department are expected to represent the department in a respectable manner at all times. A positive, competent and supportive employee attitude fosters confidence and respect by the North Central District Health Department staff and enhances delivery of services.

To ensure orderly operations and provide the best possible work environment, the North Central District Health Department expects employees to follow rules of conduct that will protect the interests and safety of all employees and the organization.

It is not possible to list all the forms of behavior that are considered unacceptable in the workplace. A list of infractions of rules of conduct that may result in disciplinary action is in Section 8-100, Disciplinary Action of this Personnel Policies Manual.



Date Created:	3/2002
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	4/2016, 3/2018
Revised Date:	4/2016, 3/2018
Approved By:	Board of Health
Approval Date:	3/2018

Policy: 8-20

Subject: Drug Free Workplace

Scope: All Employees

POLICY STATEMENT:

The North Central District Health Department will follow the provisions of the Drug-Free Workplace Act and Drug-Free Workplace regulations. Compliance with the law is a policy. North Central District Health Department policy prohibits the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in the workplace. Employees are also required to notify, in writing and within five days, any criminal drug statue conviction for a violation occurring in the workplace. The North Central District Health Department policy spells out disciplinary actions violating its policy.

A copy of the full statement of North Central District Health Department's Drug-Free Workplace Policy is available in the following locations:

- A. Posted in Main office area
- B. On file in main office

Employees should read the full policy statement, sign the Employee Acknowledgment Statement under the Drug-Free Workplace in this Manual and return the statement to their supervisor. This statement is kept in the personnel file.

The North Central District Health Department is concerned with the wellbeing of its employees, the successful accomplishment of its operations, and the need to maintain employee productivity. The abuse of alcohol and use of illegal drugs is inconsistent with the law-abiding behavior expected of employees.

Employees who abuse alcohol or use illegal drugs tend to be less productive, less reliable, and prove to be more prone to greater absenteeism than their fellow employees who do not do so. The abuse of alcohol and abuse of illegal drugs by North Central District Health Department employees also can pose a health and safety threat to clients and other North Central District Health Department employees.

North Central District Health Department's goal is to establish and maintain a work environment that is free from the effects of alcohol and illegal drugs or abused prescription drugs. North Central District Health Department recognizes that a successful approach to the problems accompanying alcohol or illegal drug use requires an interaction of education assistance, deterrents, and discipline.

North Central District Health Department will respect employees' personal dignity and privacy in reaching its drug-free workplace goal, consistent with legal, safety and security considerations.

The "work environment" is considered to be all North Central District Health Department facilities, any and all client and family facilities, job sites, and any location where an employee represents the North Central District Health Department, including over-the-road travel in owned or rented vehicles and circumstances where the employees is being reimbursed for expenses.

While North Central District Health Department has no intention of intruding into the private lives of its employees, it does expect employees to report for work in a condition to fully perform their duties and to refrain from the abuse of alcohol or use of illegal drugs while on duty.

The following rules of conduct apply to all employees. Violation of these rules subject employees to disciplinary action, up to and including discharge.

- A. The unlawful manufacture, distribution, dispensation, attempted sale, possession, or use of a controlled substance is prohibited in the employee's work environment.
- B. Being subject to the effects of alcohol or an illegal drug on the North Central District Health Department's property or in a North Central District Health Department vehicle does not excuse an employee's misconduct that violates any North Central District Health Department rule. For example, an assault committed while subject to the effects of alcohol or an illegal drug will subject the employee to disciplinary action, up to and including discharge, because of the misconduct.
- C. Any employee who appears to be under the influence of alcohol or drugs while in the work environment will be the subject of an immediate investigation. Similarly, any employee who is found to have any drugs in his or her possession (e.g., his or her North Central District Health Department rental vehicle or desk) will be the subject of an initial investigation. If employee use or possession is substantiated, disciplinary action will be imposed.
 - C. Off-the-job abuse of alcohol or use of illegal drugs that could adversely affect an employee's job performance may also be cause for disciplinary action. Jeopardizing the safety of the employee, other employees, clients, the public, North Central District Health Department equipment is contrary to policy.

- D. Employees who are convicted for a drug or alcohol-related offense occurring in the work place will be considered to be in violation of this policy. In deciding what action to take, management will consider the nature of the charges, the employee's record with North Central District Health Department and other factors relative to the impact of the employee's conviction upon ability to conduct business. Employees must notify the Executive Director of the conviction within five days.
- E. Employees who voluntarily request assistance in dealing with a personal alcohol or drug problem may participate in a counseling or assistance program without jeopardizing their employment with North Central District Health Department though assignment or leave of absence may be required. An employee's decision to seek voluntary help from counseling is not be used as a sole basis for disciplinary action against the employee.
- F. Employees undergoing prescribed medical treatment with a drug or controlled substance which may alter their physical or mental ability are required to have their physician make a written report to the Executive Director as to the adverse effect the medication will have on the employee. It may be necessary to change the employee's job assignment while he or she is undergoing treatment. (Immediate notification must be made by the employee to his or her immediate supervisor and to the Executive Director prior to going to work after having been prescribed medication.) Failure to report the use of prescribed drugs in the appropriate manner that may alter an employee's physical or mental ability may result in disciplinary action.
- H. North Central District Health Department will require a reimbursement of drug test costs if the testing is positive for drugs.
- I. North Central District Health Department reserves the right to do random drug testing.



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Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	4/2016, 3/2018
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Approved By:	Board of Health
Approval Date:	3/2018

Policy: 8-30

Subject: Sexual and Other Unlawful Harassment

Scope: All Employees

POLICY STATEMENT: The North Central District Health Department is committed to take reasonable steps to provide a work environment free from all forms of harassment, whether based on sex, race, color, religion, national origin, age or disability. Although this section focuses on sexual harassment, it applies equally to all forms of harassment, and the procedures described in this policy should be followed for all kinds of harassment.

PROCEDURE: Sexual Harassment is unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when one of the following conditions is met:

- A. Submission to such conduct is made either explicitly or implicitly a term or condition of employment or;
- B. Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting the individual or;
- C. Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Allegations of sexual harassment or other discriminatory conduct will be promptly and thoroughly investigated. Sexual harassment by employees of the North Central District Health Department will not be tolerated and are grounds of immediate dismissal.

If an employee believes that he or she has been subjected to sexual or other harassment, they should first confront the person or persons responsible for the offensive behavior and indicate to them that it is unwelcome and should be stopped. The employee also has an obligation to report the matter promptly to the supervisor. The supervisor will then report the incident to the Executive Director.

If an employee observes or becomes aware of harassment, but is not the victim, the employee also has an obligation to bring the matter to the attention of the Executive Director.

The North Central District Health Department will investigate all reports of alleged harassment. To the extent possible, it will keep the information confidential, consistent with its obligation to investigate promptly and thoroughly. If it is determined that harassment has occurred and that counseling, training, disciplinary measures or termination are appropriate, the Executive Director will take appropriate measure to correct the problem.

No employee will be retaliated against in any way for reporting in good faith any allegations of harassment. Such retaliation in and of itself may result in disciplinary action, up to and including termination.

All employees are required to cooperate with any investigation undertaken by the North Central District Health Department in response to an allegation of harassment. Refusal to cooperate in an investigation may result in disciplinary action, up to and including termination.

Any employee who desires information, counseling or advice regarding issues of harassment is encouraged to contact the Executive Director.

Any affected employee, who is dissatisfied with the conclusion or result of an investigation, or with any corrective measure taken, may appeal the decision in accordance with grievance procedures in Section 8-110, of this Manual. Any questions about the application or interpretation of this policy should also be directed to the Executive Director.



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Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 8-40

Subject: Attendance and Punctuality

Scope: All Employees

To maintain a safe and productive work environment, the North Central District Health Department expects employees to be reliable and to be punctual in reporting for scheduled work. Absenteeism and tardiness place a burden on other employees and on the North Central District Health Department. In the rare instance when employees cannot avoid being late to work or are unable to work as scheduled, they should notify their supervisor within 30 minutes in advance of the anticipated tardiness or absence.

Poor attendance and excessive tardiness are disruptive. Either behavior may lead to disciplinary action, up to and including termination of employment.



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Reviewed Date:	2/1/2018
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Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 8-50

Subject: Materials and Property

Scope: All Employees

Employees are responsible for all property, materials, keys, or written information issued to them and in their possession or control. Employees must return all North Central District Health Department property immediately upon request or upon termination of employment. Where permitted by applicable laws, the North Central District Health Department may withhold from the employee's check or final paycheck, the cost of any items that are not returned when required. The agency may also take all action deemed appropriate to recover or protect its property.

The North Central District Health Department wishes to maintain a work environment that is free of illegal drugs, tobacco products, alcohol, firearms, explosives, or other improper materials. To this end, the North Central District Health Department prohibits the possession, transfer, sale, or use of such materials on its premises. The North Central District Health Department requires the cooperation of all employees in administering this policy.

Desks, lockers, workstations (inclusive of computer) and other storage devices may be provided for the convenience of employees but will remain the sole property of the North Central District Health Department. Accordingly, they, as well as any articles found within them, can be inspected by any agent in a supervisory role of the North Central District Health Department at any time, either with or without prior notice.



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Approval Date:	3/28/2018

Policy: 8-80

Subject: Confidentiality

Scope: All Employees

The North Central District Health Department employees are responsible for and are to respect the privacy and hold in strict confidence all information regarding clients and families obtained in the course of employment. Employees are expected to safeguard all information of a confidential nature and refrain from disclosing any portion thereof, except in the manner and to the extent authorized.

To provide effective services, it may be necessary to collect, develop, and retain personal and highly sensitive material regarding clients and their families. Each of us has a professional responsibility to maintain the highest ethical standards regarding this information. Misuse of this knowledge and material can be extremely damaging and create serious problems.

Revealing the names and discussion of their problems outside of the workplace shall not occur. The dangers that this information will be misused and misinterpreted cannot be over emphasized. Employees should discuss with their supervisor any conflict of interest, which results from being related to, or friendly with North Central District Health Department clients or relations. Violation of privacy rights will result in disciplinary action.

Discussion of aspects of the North Central District Health Department, such as disclosure of salary or other confidential personnel matters either to another employee not entitled to the information or to a person outside the agency are prohibited.

All records relating to North Central District Health Department clients, both present and former, shall remain the property of the North Central District Health Department and will be kept on file for a period of no less than ten years after the client has left the program.

North Central District Health Department staff will have access only to those clients' records necessary to perform their jobs. Supervisors will determine if their employees need to know, and will monitor and supervise employee's access to records.

No records shall be removed from the premises without written approval from the Executive Director. This also applies to copies of these records or any portion thereof. All employees need to sign a confidentiality statement and attend annual confidentiality training. Also, a release of information must be signed for information to be transferred to other agencies as guided by state and federal laws.



Date Created:	6/25/2010
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/9/2012, 2/17/2016, 3/15/2018
Revised Date:	3/15/2018
Approved By:	Board of Health
Approval Date:	6/25/2010, 3/28/2018

Policy: 8-85

Subject: Whistleblower

Scope: All Employees

Policy

If any employee of North Central District Health Department, hereafter referred to as NCDHD, believes that some policy, practice, or activity of NCDHD and/or Board of Health is in violation of law, or a clear mandate of public policy, a written complaint must be filed by that employee with the Executive Director with a duplicate copy submitted simultaneously to the Executive Committee of the Board of Health. The complaint will be reviewed by the Executive Committee and forwarded to the Board of Health Secretary The employee will be contacted within 30 days for a review of the complaint with the Executive Committee.

NCDHD will not retaliate against an employee who, in good faith, has made a protest or raised a complaint against some practice of NCDHD, or of an employee of NCDHD, or of another individual or entity with whom NCDHD has a business relationship, on the basis of a reasonable belief that the practice is in violation of law, or a clear mandate of public policy.

NCDHD also will not retaliate against employees who disclose (or threaten to disclose) to a supervisor or a public body, any activity, policy, or practice of NCDHD that the employee reasonably believes is in violation of a law, or a rule or regulation mandated pursuant to law or is in violation of a clear mandate or public policy concerning the health, safety, welfare, or protection of the environment.

An employee is protected from retaliation only if he or she brings the alleged unlawful activity, policy, or practice to the attention of NCDHD, and provides NCDHD with a reasonable opportunity to investigate and correct the alleged unlawful activity.



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Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 8-90

Subject: Disciplinary Action

Scope: All Employees

Conformance to the North Central District Health Department policies and performance standards is expected of all employees. Failure to comply may result in disciplinary action. The specific action is determined by the seriousness of the infraction and the employee's prior discipline and performance record.

As noted earlier in this Manual, employment with the North Central District Health Department is on an "at-will" basis, meaning that either the employee or the North Central District Health Department can terminate an employee at any time, with or without reason or cause. While it is not possible to list all of the circumstances which might lead to termination of employment, certain conduct will be considered a major infraction and very likely lead to termination by the North Central District Health Department. This conduct includes, but is not limited to the following:

- Failure to meet job standards
- o Physical, sexual, emotional abuse or neglect
- o Theft of North Central District Health Department property or other acts of dishonesty
- o Immoral conduct
- Job abandonment
- o Unsafe driving practices in North Central District Health Department vehicles.
- o Leaving work without permission
- Possession or use of alcohol or controlled substances on the job, or refusal to undergo drug testing.
- o Falsification of time, travel, or other records
- Deliberate damage or destruction of employee's, or North Central District Health Department's property
- o Tardiness or absenteeism

- Discrimination
- Sexual harassment
- Insubordination
- Breach of confidentiality policy
- Other causes deemed in the discretion of the Health Department to warrant termination

The circumstances described above are examples and are not intended to be all inclusive.

The Executive Director may seek outside consultation before a decision is reached on the appropriate level of disciplinary action including suspension or discharge.

When problems of a minor nature occur, such as poor attendance or punctuality, the principle or progressive discipline will be used in most cases. Minor infractions which become habitual or chronic will be considered as major infractions.

Intervention methods of mitigating circumstances in a corrective manner may include and are not limited to the following;

<u>Verbal Communication</u>: Normally the supervisor shall counsel the employee verbally regarding minor infractions or problems and offer suggestions and/or assistance for correction. The supervisor will discuss the problem or infraction with the employee, and give him/her an opportunity to comment. Expectations of improvement will be discussed. Should the problem persist, or should the infraction be deemed major by the supervisor, the following procedures may be utilized.

<u>Written Warning</u>: If, after discussion with the employee, a written warning is indicated, the supervisor will prepare it. The written warning, in the form of a memorandum or Corrective Action, will include a description of the problem, expectations for improvements, any other disciplinary actions imposed, consequences, and review time frame. A copy of the written warning will be given to the employee within five (5) days of supervisor's knowledge or awareness of the infraction, and will be placed into the employee's personnel file.

Written Reprimand/Suspension: Should it be necessary to impose further disciplinary action but where discharge is not immediately indicated, a written reprimand with a suspension period will be used. Suspension will be imposed with the approval of the Executive Director. Copies of the document will be provided to the employee within five (5) days of the supervisor's knowledge or awareness of infraction and be placed within his/her personnel file. Suspension is always without pay. The length of a suspension will be determined by the Executive Director, but shall not exceed 14 working days. Suspension can be used without progressive discipline in cases in major infractions and in situations where it is necessary to conduct an investigation.

The Executive Director will have the authority to determine whether an employee should be referred to outside counseling services, suspended or terminated.



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Assigned Annual Review Period:	At least every 5 years
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Approval Date:	3/28/2018

Policy: 8-100

Subject: Grievance Procedure

Scope: All Employees

The complete record of the grievance and resolution plan will be placed in the personnel file of the employee who brought about the grievance. For grievances involving the Executive Director, the Executive Committee should be contacted only after such grievance has been placed in writing to the Executive Director and a written work-plan has been adopted and if resolution to the grievance via the work plan is not completed to the satisfaction of all parties involved. The Board of Directors is only authorized to take action in matters of the North Central District Health Department during an authorized meeting in which a quorum of members is present. The grievance procedure is not intended to be a review process for job performance evaluations and is not applicable after an employee has been terminated.

FINAL DECISIONS on grievances will not be precedent setting or binding on future grievances unless they are officially adopted as North Central District Health Department policy by the Board.

Information concerning an employee's grievances is to be held in strict confidence. Supervisors, and other members of management or the Grievance Committee should investigate and discuss any grievance only with those individuals directly involved or who may be able to supply necessary background information.

The employee may request an administrative review of the final decision by the Board of Health, the Executive Committee or designated Personnel Committee in writing within five (5) days of receiving the decision, and the Board or Executive Committee will designate a committee to determine only whether the decision was reasonable on the basis of record.



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Policy: 8-110

Subject: Romantic & Sexual Relations

Scope: All Employees

Consenting "romantic" or sexual relationships between a supervisor/manager and an employee may at some point lead to unhappy complications and significant difficulties for all concerned — the employee, the supervisor/manager and the company. Any such relationship may, therefore, be contrary to the best interest of the company.

Accordingly, the company strongly discourages such relationships and any conduct (such as dating between a supervisor/manager and an employee) that is designed or may reasonably be expected to lead to the formation of a "romantic" or sexual relationship.

By its discouragement of romantic and sexual relationships, the company does not intend to inhibit the social interaction (such as lunches or dinners or attendance at entertainment events) that are or should be an important part or extension of the working environment; and the policy articulated above is not to be relied upon as justification or excuse for a supervisor's/manager's refusal to engage in such social interaction with employees.

If a romantic or sexual relationship between a supervisor/manager and an employee should develop, it shall be the responsibility and mandatory obligation of the supervisor/manager promptly to disclose the existence of the relationship to the employee's department vice president. The employee may make the disclosure as well, but the burden of doing so shall be upon the supervisor/manager.

The company recognizes the ambiguity of and the variety of meanings that can be given to the term "romantic". It is assumed, or at least hoped, however, that either or both of the parties to such a relationship will appreciate the meaning of the term as it applies to either or both of them and will act in a manner consistent with this policy.

The department vice president shall inform the company's management committee and others with a need-to-know of the existence of the relationship including in all cases the person responsible for the employee's work assignments.

Upon being informed or learning of the existence of such a relationship, the company's management committee may take all steps that it, in its discretion, deems appropriate. At a minimum, the employee and supervisor/manager will not thereafter be permitted to work together on the same matters (including matters pending at the time disclosure of the relationship is made), and the supervisor/manager must withdraw from participation in activities or decisions (including, but not limited to, hiring, evaluations, promotions, compensation, work assignments and discipline) that may reward or disadvantage any employee with whom the supervisor/manager has or has had such a relationship.

In addition, and in order for the company to deal effectively with any potentially adverse consequences such a relationship may have for the working environment, any person who believes that he or she has been adversely affected by such a relationship, notwithstanding its disclosure, is encouraged to make his or her views about the matter known to the president of the company, a department vice president, the chief operating officer or any ombudsman.

This policy shall apply without regard to gender and without regard to the sexual orientation of the participants in a relationship of the kind described.



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Policy: 8-120

Subject: Workplace Violence

Scope: All Employees

The company strongly believes that all employees should be treated with dignity and respect. Acts of violence will not be tolerated. Any instances of violence must be reported to the employee's supervisor and/or the human resources department. All complaints will be fully investigated.

The company will promptly respond to any incident or suggestion of violence. Violation of this policy will result in disciplinary action, up to and including immediate discharge.



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Policy: 8-130

Subject: Accidents & Emergencies

Scope: All Employees

Maintaining a safe work environment requires the continuous cooperation of all employees. The company strongly encourages employees to communicate with fellow employees and their supervisor regarding safety issues.

Employees should contact their supervisor, the nearest supervisor, and/or 911 in the event of an accident or emergency.

If an employee is injured on the job, North Central District Health Department provides coverage and protection in accordance with the worker's compensation law. When an injury is sustained while at work, it must be reported immediately to the employee's supervisor, who in turn will notify human resources of the incident.

Failure to report accidents is a serious matter as it may preclude an employee's coverage under worker's compensation insurance.



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Approval Date:	3/28/2018

Policy: 8-150

Subject: Internal Complaint Procedures

Scope: All Employees

POLICY STATEMENT: To foster sound employee-employer relations through communication and reconciliation of work-related problems, North Central District Health Department provides employees with an established procedure for expressing employment related concerns.

PROCEDURE: In situations where employees feel a complaint is in order, the following steps should be taken:

If an employee believes that he/she has a legitimate work-related complaint, the employee is encouraged to first attempt to resolve the issue(s) through discussions with his/her co-worker and/or immediate supervisor.

If the situation is not resolved within five working days from the time the complaint is discussed with the employee's immediate supervisor, barring extenuating circumstances, it should be brought to the attention of the next level supervisor or the Director with written documentation. The company will attempt to resolve the complaint within a reasonable period of time while preserving the confidentiality and privacy of those involved to the extent feasible.



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Policy: 8-160

Subject: Solicitations

Scope: All Employees

Employees & guests may not disturb the work of others to solicit or distribute literature to them during their working time. A general means of solicitation may occur in the office building in appropriate or designated location, e.g., the employee breakroom, as to not be disruptive of an employee in their workspace. These solicitation provisions may be permissible for circumstances involving, but not limited to; Girl Scout/Boy Scout Sales and school promotional activities. The Executive Director will have the "final say" regarding what is permissible and where the designated location will be.

Bulletin boards maintained by North Central District Health Department as the "office bulletin board" are to be used only for posting or distributing material of the following nature:

- o notices containing matters directly concerning company business;
- o announcements of a business nature which are equally applicable and of interest to employees.

All posted material must have authorization from Executive Director. All employees are expected to check these bulletin boards periodically for new and/or updated information and to follow the rules set forth in all posted notices. Employees are not to remove material from the bulletin boards.



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Reviewed Date:	3/28/2018
Approved By:	Board of Health
Approval Date:	3/28/2018

Policy: 8-170

Subject: Internet Use Policy

Scope: All Employees

POLICY STATEMENT: Internet Use Policy

Certain employees may be provided with access to the Internet to assist them in performing their jobs. The Internet can be a valuable source of information and research. In addition, e-mail can provide excellent means of communicating with other employees, our customers and clients, outside vendors, and other businesses. Use of the Internet, however, must be tempered with common sense and good judgment.

If you abuse your right to use the Internet, it will be taken away from you. In addition, you may be subject to disciplinary action, including possible termination, and civil and criminal liability.

Your use of the Internet is governed by this policy and the e-mail policy.

<u>Disclaimer of liability for use of Internet</u>. North Central District Health Department is not responsible for material viewed or downloaded by users from the Internet. The Internet is a worldwide network of computers that contains millions of pages of information. Users are cautioned that many of these pages include offensive, sexually explicit, and inappropriate material. In general, it is difficult to avoid at least some contact with this material while using the Internet. Even innocuous search requests may lead to sites with highly offensive content. In addition, having an e-mail address on the Internet may lead to receipt of unsolicited e-mail containing offensive content. Users accessing the Internet do so at their own risk.

<u>Duty to not to waste computer resources</u>. Employees must not deliberately perform acts that waste computer resources or unfairly monopolize resources to the exclusion of others. These acts include, but are not limited to, sending mass mailings or chain letters, spending excessive amounts

of time on the Internet, playing games, engaging in online chat groups, printing multiple copies of documents, or otherwise creating unnecessary network traffic. Because audio, video and picture files require significant storage space, files of this or any other sort may not be downloaded unless they are business-related.

<u>No expectation of privacy</u>. The computers and computer accounts given to employees are to assist them in performance of their jobs. Employees should not have an expectation of privacy in anything they create, store, send, or receive on the computer system. The computer system belongs to the company and may only be used for business purposes.

Monitoring computer usage. The company has the right, but not the duty, to monitor any and all of the aspects of its computer system, including but not limited to, monitoring sites visited by employees on the Internet, monitoring chat groups and news groups, reviewing material downloaded or uploaded by users to the Internet, and reviewing e-mail sent and received by users.

<u>Blocking of inappropriate content</u>. The company may use software to identify inappropriate or sexually explicit Internet sites. Such sites may be blocked from access by company networks. In the event you nonetheless encounter inappropriate or sexually explicit material while browsing on the Internet, immediately disconnect from the site, regardless of whether the site was subject to company blocking software.

<u>Prohibited activities</u>. Material that is fraudulent, harassing, embarrassing, sexually explicit, profane, obscene, intimidating, defamatory or otherwise unlawful, inappropriate, offensive (including offensive material concerning sex, race, color, national origin, religion, age, disability, or other characteristic protected by law), or violative of North Central District Health Department's equal employment opportunity policy and its policies against sexual or other harassment may not be downloaded from the Internet or displayed or stored in North Central District Health Department's computers. Employees encountering or receiving this kind of material should immediately report the incident to their supervisors or the human resources department. North Central District Health Department's equal employment opportunity policy and its policies against sexual or other harassment apply fully to the use of the Internet and any violation of those policies is grounds for discipline up to and including discharge.

<u>Games and entertainment software</u>. Employees may not use the company's Internet connection to download games or other entertainment software, including wallpaper and screen savers, or to play games over the Internet.

<u>Illegal copying</u>. Employees may not illegally copy material protected under copyright law or make that material available to others for copying. You are responsible for complying with copyright law and applicable licenses that may apply to software, files, graphics, documents, messages, and other material you wish to download or copy. You may not agree to a license or download any material for which a registration fee is charged without first obtaining the express written permission of <u>(the publisher)</u>.

<u>Accessing the Internet</u>. To ensure security and to avoid the spread of viruses, employees accessing the Internet through a computer attached to North Central District Health Department's network

must do so through an approved Internet firewall. Accessing the Internet directly by modem is strictly prohibited unless the computer you are using is not connected to the company's network.

<u>Virus detection</u>. Files obtained from sources outside the company, including disks brought from home; files downloaded from the Internet, newgroups, bulletin boards, or other online services; files attached to e-mail; and files provided by customers or vendors may contain dangerous computer viruses that may damage the company's computer network. Employees should never download files from the Internet, accept e-mail attachments from outsiders, or use disks from non-company sources, without first scanning the material with company-approved virus checking software. If you suspect that a virus has been introduced into the company's network, notify the help desk immediately.

<u>Sending unsolicited e-mail (spamming)</u>. Without the express permission of their supervisors, employees may not send unsolicited e-mail to persons with whom they do not have a prior relationship.

<u>Amendments and revisions</u>. This policy may be amended or revised from time to time as the need arises. Users will be provided with copies of all amendments and revisions.

Violations of this policy will be taken seriously and may result in disciplinary action, including possible termination, and civil and criminal liability.

Use of the Internet via North Central District Health Department's computer system constitutes consent by the user to all the terms and conditions of this policy.



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Policy: 8-185

Subject: Portable Computing and Electronic Devices Policy

Scope: All Employees

<u>Purpose</u>: This policy provides guidelines for the use of personal and/or work portable computing and electronic devices (referred to as devices) by employees of North Central District Health Department (NCDHD) and to ensure the safety and security of confidential information. For purposes of this policy, the "portable computing and electronic device" is defined as laptop computers and any handheld electronic device with the ability to receive and/or transmit voice, text or data messages without a cable connection (including, but not limited to, cellular telephones, digital wireless phones, smart phones, IPods, IPads, tablets and PDA's (personal digital assistants with wireless communication capabilities).

<u>Policy</u>: Employees are not permitted to send or receive work-related emails using an email other than the official NCDHD email address.

NCDHD issued devices: NCDHD may issue devices to employees and/or permit employee's access to its network using devices to perform his/her job. Devices issued by NCDHD are the property of NCDHD. Employees must comply with NCDHD requests to make his/her NCDHD-issued devices, including electronic content, available for any reason, including returning possession to NCDHD, upgrades, replacement, or inspection. Employees who leave NCDHD for any reason must return the NCDHD-issued devices, including all electronic content contained therein to NCDHD.

NCDHD devices may be used by NCDHD employees for emails, text messaging, and local and long distance calls for personal business. Any personal use shall be kept to a minimum and shall not

interfere with the conduct of NCDHD business and shall not conflict with the NCDHD mission. If an employee's personal use of an NCDHD-owned devices results in fees or costs beyond what NCDHD would otherwise have to pay for the service, the employee will be required to reimburse NCDHD within two-weeks of notification from the fiscal manager.

NCDHD management has the ability to access, review, and inspect the device and all information stored on NCDHD's devices and network. NCDHD reserves the right to perform such an inspection at any time for any reason without notice. Employees should not expect that any files, records, or other electronic data stored on NCDHD's equipment, including devices and network, will be private, even if the employee attempts to protect its privacy (for example, by using a password or designating it as "personal").

All NCDHD policies and rules of conduct apply to employee use of NCDHD-issued devices. All communications (email, instant messaging, texting, and Internet access, etc.) on NCDHD-issued devices are subject to NCDHD policies on appropriate use, appropriate communications with business partners and the public and with other employees. This means, for example, that employees may not:

- Send messages that discredit NCDHD or NCDHD employees,
- Send harassing messages,
- Access websites that are controversial or that don't support or are contrary to the NCDHD mission, (such as pornographic or gambling websites)
- Violate any of NCDHD's other rules on appropriate communications content.

Employees are responsible for the security of NCDHD-issued devices and the security of the information stored on the device or accessed by the device. Employees must use discretion as to where/how devices are stored while out of the office and make decisions that reasonably assume the best possible outcome/storage option. If an NCDHD device is lost or stolen, employees must immediately notify his/her supervisor. Employees must be vigilant in protecting the confidentiality of NCDHD and NCDHD client information. Refer to HIPAA Policy for information regarding confidentiality and privacy.

Employees are prohibited from using any (personal and NCDHD-owned) devices for any reasons while driving (NCDHD owned, rented and personal vehicles) while on the clock. NCDHD is concerned for the safety of employees and for the safety of other drivers and pedestrians and using a device while driving can lead to accidents. The employee must wait until he/she can pull over safely and stop the vehicle before placing or receiving any phone calls or text messages or to review, receive or send emails.

Non-exempt-employees making a request to use his/her personal devices acknowledge that he/she is not to conduct any form of NCDHD business during non-work hours, including checking his/her NCDHD email while off the clock. Overtime rules for non-exempt employees apply to any type of work done after hours, including using an NCDHD-issued device or personal device to

make or receive work-related phone calls and text messages, and receive or send work-related emails. All overtime work, including such work-related calls, texts and emails, must be approved in writing, in advance.

Non-exempt employees will either leave the NCDHD-issued device at his/her desk at the end of the work day or turn off the electronic device at the end of the work day if he/she desires to take the device with them.

Personal portable computing electronic devices: Personal devices cell phones, may not be used for NCDHD business, including downloading work emails or accessing the employee's NCDHD calendar, unless prior arrangements have been made with management. Such prior arrangements will clearly outline:

- Permitted NCDHD business to be conducted;
- Permissible access to NCDHD network, if any; and
- The expectation and agreement that the employee will agree to allow NCDHD to inspect the employee's device (if the employee's request is granted and the employee has been permitted to use the personal device for NCDHD business).

Employees receiving authorization to use their personal device for NCDHD business must sign a Portable Computing and Electronic Use Agreement and comply with all conditions set forth in the Agreement.

Employees that choose to have a personal device at work (such as cell phone) regardless of the device being used, are expected to keep personal conversations and texting to a minimum while on the clock. While these occasional, brief personal phone calls or texts are acceptable when kept to a minimum, it is generally expected that employees make and receive personal phone calls and texts during breaks.

To minimize work disruption in the office and out in the field, employees must silence the ringer or text/email notification sound on all devices, regardless if the device is NCDHD-issued or personally-owned. It is inappropriate to interrupt a face-to-face conversation with a client, business partner or coworker to send or receive a personal phone call or text. Remember, other can hear your cell phone conversations.

Employees who violate this policy will be subject to discipline, up to and including termination.



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Approval Date:	3/28/2018

Policy: 8-190

Subject: Employer Information and Property

Scope: All Employees

The protection of North Central District Health Department business information, property and all other company assets are vital to the interests and success of North Central District Health Department. No North Central District Health Department related information or property, including without limitation, documents, files, records, computer files, equipment, office supplies or similar materials (except in the ordinary course of performing duties on behalf of North Central District Health Department) may, therefore, be removed from the company's premises. In addition, when an employee leaves North Central District Health Department, the employee must return to the company all North Central District Health Department related information and property that the employee has in his/her possession, including without limitation, documents, files, records, manuals, information stored on a personal computer or on a computer disc, supplies, and equipment or office supplies. Violation of this policy is serious offense and will result in appropriate disciplinary action, up to and including discharge.



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Policy: 8-195

Subject: Document Retention and Periodic Destruction Policy

Scope: All Employees

- **I. Purpose**: In accordance with the Sarbanes-Oxley Act, which makes it a crime to alter, cover up, falsify, or destroy any document with the intent of impeding or obstructing any official proceeding, this policy provides for the systematic review, retention and destruction of documents received or created by North Central District Health Department (NCDHD). This policy covers all records and documents, regardless of physical form, contains guidelines for how long certain documents should be kept and how records should be destroyed. The policy is designed to ensure compliance with federal and state laws and regulations, to eliminate accidental or innocent destruction of records and to facilitate NCDHD's operations by promoting efficiency and freeing up valuable storage space.
- **II. Document Retention**: NCDHD follows the document retention procedures outlined below. Documents that are not listed, but are substantially similar to those listed in the schedule will be retained for the appropriate length of time.

The following table provides the minimum requirements:

Type of Document	Minimum Requirement
Accounts payable ledgers and schedules	7 years
Audit reports	Permanently
Bank Reconciliations	2 years
Bank Statements	3 years
Checks (for important payments and purchases)	Permanently
Community Health Assessments and Community Health Improvement Plans	7 years
Contracts, mortgages, notes and leases (expired)	7 years
Contracts (still in effect)	Permanently
Correspondence (general)	2 years
Correspondence (legal and important matters)	Permanently
Correspondence (with customers and vendors)	2 years

Deeds, mortgages, and bills of sale	Permanently
Depreciation schedules	Permanently
Duplicate deposit slips	2 years
Employment applications	3 years
Expense Analyses/expense distribution schedules	7 years
Year-end Financial Statements	Permanently
Insurance Policies (expired)	3 years
Insurance records, current accident reports, claims, policies, etc.	Permanently
Internal audit reports	3 years
Inventories of products, materials, and supplies	7 years
Invoices (to customers, from vendors)	7 years
Minute books, bylaws and charter	Permanently
Patents and related Papers	Permanently
Payroll records and summaries	7 years
Personnel files (terminated employees)	7 years
Quality Improvement and Performance Management Records	5 years
Retirement and pension records	Permanently
Tax returns and worksheets	Permanently
Timesheets	7 years
Trademark registrations and copyrights	Permanently
Withholding tax statements	7 years

- III. Electronic Documents and Records: Electronic documents will be retained as if they were paper documents. Therefore, any electronic files, including records of donations made online, that fall into one of the document types on the above schedule will be maintained for the appropriate amount of time. If a user has sufficient reason to keep an email message, the message should be printed in hard copy and kept in the appropriate file or moved to an "archive" computer file folder. Backup and recovery methods will be tested on a regular basis.
- **IV. Emergency Planning:** NCDHD's records will be stored in a safe, secure and accessible manner. Documents and financial files that are essential to keeping NCDHD operating in an emergency will be duplicated or backed up at least every week and maintained off site.
- **V. Document Destruction:** NCDHD's Executive Director is responsible for the ongoing process of identifying its records, which have met the required retention period and overseeing their destruction. Destruction of financial and personnel-related documents will be accomplished by shredding. Document destruction will be suspended immediately, upon any indication of an official investigation or when a lawsuit is filed or appears imminent. Destruction will be reinstated upon conclusion of the investigation.
- **VI. Compliance**: Failure on the part of employees to follow this policy can result in possible civil and criminal sanctions against NCDHD and its employees and possible disciplinary action against responsible individuals. The Executive Director and Executive Committee of the Board of Health will periodically review these procedures with legal counsel or the department's certified public accountant to ensure that they are in compliance with new or revised regulations.



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Policy: 8-200

Subject: Voice Mail

Scope: All Employees

Every North Central District Health Department employee is responsible for using the voice mail system properly and in accordance with this policy. Any questions about this policy should be addressed to the Director.

The voice mail system is the property of North Central District Health Department. It has been provided by North Central District Health Department for use in conducting company business. All communications and information transmitted by, received from, or stored in this system are company records and property of North Central District Health Department. The voice mail system is to be used for company purposes only. Use of the voice mail system for personal purposes is prohibited.

Employees have no right of personal privacy in any matter stored in, created, received, or sent over the North Central District Health Department voice mail system.

North Central District Health Department, in its discretion as owner of the voice mail system reserves and may exercise the right to monitor, access, retrieve, and delete any matter stored in, created, received, or sent over the voice mail system, for any reason without the permission of the employee and without notice.

Even an employee's use a password to access the voice mail system, the confidentiality of any message stored in, created, received, or sent from the North Central District Health Department voice mail system still cannot be assured. Use of passwords or other security measures does not in any way diminish North Central District Health Department's right to access materials on its system, or create any privacy rights of employees in the messages and files on the system. Any

password used by employees must be revealed to North Central District Health Department as voice mail messages may need to be accessed by the company in an employee's absence.

Employees should be aware that deletion of any voice mail messages or files may not truly eliminate the messages from the system. All voice mail messages may be stored on a central back-up system in the normal course of data management.

Even though North Central District Health Department reserves the right to retrieve and read any voice mail messages, those messages should still be treated as confidential by other employees and accessed only by the intended recipient. Employees are not authorized to retrieve or listen to any voice mail messages that are not sent to them. Any exception to this policy must receive the prior approval of North Central District Health Department management.

North Central District Health Department's policies against sexual or other harassment apply fully to the voice mail system, and any violation of those policies is grounds for discipline up to and including discharge. Therefore, no voice mail messages should be created and/or transmitted concerning race, color, religion, sex, age, national origin, disability or any other classification protected by law.

The voice mail system may not be used to solicit for religious or political causes, commercial enterprises, outside organizations, or other non-job related solicitations.

Users should routinely delete outdated or otherwise unnecessary voice mails. These deletions will help keep the system running smoothly and effectively, as well as minimize maintenance costs.

Because of the storage space required for voice mail messages, employees should not send a voice mail message to a large number of recipients without prior approval from their supervisor.

Employees are reminded to be courteous to other users of the system and always to conduct themselves in a professional manner. Voice mails are sometimes misdirected or forwarded and may be heard by persons other than the intended recipient. Users should create voice mail communications with no less care, judgment and responsibility than they would use for letters or internal memoranda written on North Central District Health Department letterhead.

Employees should also use professional and courteous greetings on their voice mail boxes so as to properly represent North Central District Health Department to outside callers.

Because voice mail records and messages may be subject to discovery in litigation, North Central District Health Department employees are expected to avoid making statements in voice mail that would not reflect favorably on the employee or North Central District Health Department if disclosed in a litigation or otherwise.

In order to avoid accidentally disclosing message contents to unauthorized listeners, employees should not listen to voice mail messages while using the speaker phone feature.

Any employee who discovers misuse of the voice mail system should immediately contact the human resources department.

Violations of North Central District Health Department's voice mail policy may result in disciplinary action up to and including discharge.

North Central District Health Department reserves the right to modify this policy at any time, with or without notice.

1. Employees are required to sign a voice mail policy acknowledgment form as a condition of employment. The form is to be signed on acceptance of an employment offer by North Central District Health Department.



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Policy: 8-201

Subject: Voice Mail Acknowledgment

Scope: All Employees

I acknowledge that I have received this as a copy of North Central District Health Department's voice mail policy. I agree to read it thoroughly and agree that if there is any policy or provision in the policy I do not understand, I will seek clarification from the human resources department.

I understand that my use of North Central District Health Department's voice mail system constitutes my consent to all the terms and conditions of that policy.

In particular, I understand that (1) the voice mail system and all information transmitted by, received from, or stored in that system are the property of North Central District Health Department, (2) the system is to be used only for business purposes and not for personal purposes, and (3) I have no expectations of privacy in connection with the use of the voice mail system or with the transmission, receipt, or storage of information in that system.

I agree not to use a code, access a file, or retrieve stored communications unless authorized. I acknowledge and consent to North Central District Health Department monitoring my use of the voice mail system at any time at its discretion, including listening to all voice mail entering, leaving, or stored in the system.



Date Created:	7/1/2010
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/1/2018
Revised Date:	3/7/2018
Approved By:	Board of Health
Approval Date:	3/2018

Policy: 8-205

Subject: Audio Service Monitoring Practices

Scope: All Employees

In the event that communications monitoring becomes in effect, the following will serve:

It is company policy not to monitor or record any personal or confidential calls, except to the extent of determining the personal or confidential nature of such calls. The following practices are used to promote the privacy of all personal and confidential calls. Supervisors who conduct service monitoring should simply leave the line immediately if they monitor a call which for any reason seems to be personal or confidential in nature.



Date Created:	2/6/2018	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:		
Revised Date:		
Approved By:	Board of Health	
Approval Date:	3/2018	

Policy: 8-227

Subject: Human Subjects Institutional Review

Scope: All Employees

In the event that North Central District Health Department (NCDHD), as the lead agency, intends to implement a program involving human subjects, the parameters of the program will be reviewed by the NCDHD Human Subjects Institutional Review Board (HSIRB) prior to implementing the program. If NCDHD is not the lead agency on the project involving human subjects (i.e. NCDHD is acting as a subcontractor or supporting agency), then NCDHD will defer to the lead agency's human subjects protocol or practice.

<u>Federal Guidelines:</u> NCDHD's HSIRB abides by the Code of Federal Regulations, Title 45: Public Welfare, Part 46 (45 CFR 46): Protection of Human Subjects. The intent of the 45 CFR 46 is to protect individuals participating upon which research is being conducted. Although NCDHD generally does not conduct research projects, many NCDHD programs do involve human interaction (including activities such as one-on-one and/or group instruction, outcome tracking, collection of knowledge and survey data, and behavioral/opinion tracking, etc.). Thus, an internal HSIRB has been created to review proposed projects to provide approval or disapproval and guidance with regard to implementation to protect the individuals involved in the program.

<u>Important definitions:</u>

- 1. Minimal risk The probability and magnitude of harm or discomfort anticipated in the research "are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests."
- 2. Intervention Includes physical procedures by which data are gathered and manipulations of the subject or the subject's environment that are performed for *research* purposes.

- Permission to *use* the data collected, regardless of research intentions, would be evaluated on the basis of privacy concerns.
- 3. Interaction Communication or interpersonal contact between NCDHD staff and a subject.
- 4. Private information Includes information about behavior that normally occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual with which the individual can reasonably expect not to be made public (medical information, for example). Private information must be individually identifiable for the information to be considered research involving human subjects.
- 5. Human subjects A living individual whom an NCDHD staff person will obtain for research purposes, either:
 - a. Data through intervention or interaction with the individual, or
 - b. Identifiable private information.

Human Subjects Institutional Review Board (HSIRB) procedures:

- 1. NCDHD does not generally work directly with conducting <u>research</u> on human subjects and thus is not required to have a federally-registered institutional review board for non-research projects. NCDHD's HSIRB is an internally-created HSIRB that follows the parameters of the 45 CFR 46 for the protection of individuals participating in NCDHD programming.
- 2. NCDHD'S HSIRB will convene on an as-needed basis depending upon if there are human subject projects for review.
- 3. All projects under review will have an "Application for Human Subjects Review" Form completed on the project by the NCDHD staff person coordinating the project and submitted to the HSIRB for consideration. The NCDHD staff person requesting the review must be present at the corresponding HSIRB meeting to answer questions or provide additional information IF requested by the HSIRB.
- 4. The proposed intervention will be reviewed to ensure that minimal risk parameters are followed and that protections are put into place to safeguard private information.
- 5. The HSIRB includes the following members:

NCDHD Health Director

NCDHD Public Health Nurse/Accreditation Coordinator

Ionia Research representative (external representative)

At least one internal and one external member of the HSIRB must be available at the HSIRB meeting to review a project proposal.

6. The HSIRB will render a decision regarding approval or disapproval of the project and will provide applicable parameters (if any) during the HSIRB meeting. The decision outcomes will be recorded on the "Application for Human Subjects Review." If a decision is unable to be made due to the need for further information, a follow-up HSIRB meeting will be scheduled dependent upon the timeframe needed to gather additional information.



Date Created:	3/2002	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:	4/2016, 3/7/18	
Revised Date: 4/2016, 3/7/18		
Approved By:	Board of Health	
Approval Date:	3/2018	

Policy: 8-230

Subject: Use of Company Equipment & Computers

Scope: All Employees

POLICY STATEMENT:

The company provides any supplies, uniforms, equipment, automobiles and materials necessary for you to perform your job. These items are to be used solely for the company's purposes. Employees are expected to exercise care in the use of company equipment and property and use such property only for authorized purposes. Loss, damages or theft of company property should be reported at once. Negligence in the care and use of company property may be considered grounds for discipline, up to and including termination.

The company's equipment, such as telephone, postage, facsimile and copier machine, is intended to be used for business purposes. It is understood that an employee may require a need to utilize this equipment for non-business purposes. Personal usage of these or other equipment that results in a nominal charge to the company should be reported immediately to your supervisor or accounting so that reimbursement, if deemed necessary, can be structured. Personal use of this afore mentioned equipment, but not limited to this equipment, should always have prior approval from the Director.

Upon termination of employment, the employee must return all company property, uniforms, equipment, work product and documents in his or her possession or control.

Use of the Company Computer System: It is the policy of North Central District Health Department that the use of its computers and software is limited solely to appropriate business use unless employees are granted consent from supervisor. Employees are strictly forbidden from installing software on the system without consent from supervisor. Further, this policy reaffirms that the company's employees have no reasonable expectation of privacy with respect to any

computer hardware, software, electronic mail or other computer or electronic means of communication or storage, whether or not employees have private access or an entry code into the computer system. The company reserves the right to monitor the use of its computer system. Only permissible icons are allowed on the computer workstation desktop.

An employee's occasional use of North Central District Health Department's computer facilities to type a term paper for an educational course or prepare an announcement for a charitable event is acceptable. However, in order to keep these uses to a reasonable level, approval to use the system in such a manner must be given by the employee's supervisor. Moreover, please be aware that North Central District Health Department may purge files on its computer at any time, without notice.

The use of the system for such personal efforts must occur outside of business hours, and any files created are to be deleted at the end of the project. Also, because of the normal heavy load on the system, these outside projects will not receive priority over late evening operational requirements, system maintenance, or file back-up.

All "work" related documents created and/or saved for business use <u>MUST BE STORED ON</u>

<u>THE CENTRAL SERVER</u> or "system" designated as such in the office and not on an employees individual workstation computer.

Use of Company Vehicles: Only employees with an unrestricted, current driver's license and who have adequate insurance coverage may operate North Central District Health Department vehicles or use a vehicle to conduct North Central District Health Department business. An employee operating a company vehicle or a vehicle to conduct company business must provide proof of adequate insurance to the human resources department. Any employee operating a company vehicle must do so in a safe manner. Any employee operating a company vehicle under the influence of drugs or alcohol or in an unsafe or negligent manner will be immediately terminated. The company has the right to search any company vehicle at any time. Therefore, employees have no reasonable expectation of privacy with respect to company vehicles.

Telephone Use: Because a large percentage of our business is conducted over the phone, it is essential to project a professional telephone manner at all times.

Although North Central District Health Department realizes that there are times when an employee may need to use the telephone for personal reasons, it is expected that good judgment will be used in limiting the length and frequency of such calls. Additionally, no long distance personal calls may be made on company phones without prior approval from the employee's supervisor.



Date Created:	3/2002	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:	4/2016, 3/7/18	
Revised Date: 4/2016, 3/7/18		
Approved By:	Board of Health	
Approval Date:	3/2018	

Policy: 8-240

Subject: Smoking Policy

Scope: All Employees

POLICY STATEMENT:

In order to comply with government regulations, North Central District Health Department has prohibited smoking throughout its workplace. The "Workplace" of the North Central District Health Department consists of all property, considered to be both inside and outside the physical property line within which the Department operates. Thus, all NCDHD property boundaries are considered a "No Smoking Zone". Internal written smoking policies may be updated at any point in time and may go into immediate effect at the discretion of the Executive Director.

Employees are protected from retaliatory action or from being subjected to any adverse personal action for exercising or attempting to exercise his/her rights under the smoking policy. Any violation of this policy may result in appropriate corrective disciplinary action, up to and including discharge.

Any questions rewarding the smoking policy should be directed to the human resources department or Executive Director.



Date Created:	3/2002	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:	4/2016, 3/7/18	
Revised Date: 4/2016, 3/7/18		
Approved By:	Board of Health	
Approval Date:	3/2018	

Policy: 8-250

Subject: Audio Recordings

Scope: All Employees

POLICY STATEMENT:

It is a violation of North Central District Health Department policy to record conversations with a tape recorder or other recording device unless prior approval is received from your supervisor or a member of upper-level management or all parties to the conversation give their consent.

The purpose of this policy is to eliminate a chilling effect on the expression of views that may exist when one person is concerned that his or her conversation with another is being secretly recorded. This concern can inhibit spontaneous and honest dialogue especially when sensitive or confidential matters are being discussed.

Violation of this policy will result in disciplinary action, up to and including immediate termination.

Date Created:	1/01/2019	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:	2/1/2018	
Revised Date:		
Approved By:	Executive Director & BOH	
Approval Date:	1/01/2019. 3/28/2018	

Number: 3 - 020

Procedure: Production Bonus

Scope: All Eligible Employees

PROCEDURE:

For eligible employees, a production bonus may be provided to employees to assist in the personal costs of out of pocket premium expenses for individual, couple or family health insurance or catastrophic health coverage costs.

Documentation of such premium payments for health insurance/health coverage may be inquired upon.

Employee will be responsible for notifying NCDHD Executive Administration if status for out of pocket costs for premium rates have changes.

Employees not paying out of pocket premium rates are not eligible.

Employees paying out of pocket premium rates that are below the established fee structure will be offered a production bonus of up to the documented out of pocket personal expense.

Production Bonus structure (up to):

Employee \$75

Employee & Spouse \$100

Employee & Family \$150

Date Created:	6/1/2018	
Assigned Annual Review Period:	riew Period: At least every 5 years	
Reviewed Date:	9/1/2018	
Revised Date:	9/1/2018	
Approved By:	Executive Director	
Approval Date:	9/1/2018	

Number: 5 - 205

Administrative Standard Operating Procedure (ASOP):

Time Tracking; Overtime

Scope: All Employees

Accurately recording time worked is the responsibility of the employee. Federal and state laws require the North Central District Health Department (NCDHD) to keep an accurate record of time worked in order to calculate employee pay and benefits. Time worked is time spent on the job and performing assigned duties of the office. Over-time for Non-Exempt and Exempt Employees are also to be tracked.

Non-Exempt Employees are allowed to work a maximum of 40-hours per week. Anyone working over 40-hours per week must be paid for the additional time at one and a half times his/her regular hourly salary. On occasions, it may be necessary for a non-exempt employee to stay beyond regular working hours. In those cases, employees are expected to take an equivalent amount of time off prior to the end of the work week so that the total, actual hours of work are no more than 40 in any given week.

All overtime and anytime worked that will put your hours of pay over 40 for one week must be approved in advance by the Director. Working overtime without permission violates NCDHD policy and may result in disciplinary action. Staff should exercise prudent judgement in emergency or extenuating circumstances when prior approval is not possible. Electronic communication approval to the Director is permissible.

For Exempt Employees, the same standards as above applies, however Exempt Employees are allocated adjusted time at a rate of one and a half time, e.g., no additional financial compensation to payroll.

PTO hours, holiday pay, funeral leave, jury duty, military leave, voting leave and any other personal hours are not considered as hours worked and cannot be applied to the 40-hour accumulation for consideration in overtime payment. FLSA only requires overtime compensation for those hours *actually worked* over 40.

For example, if the employee has worked 35 hours during the week and then works an additional 5 hours on a holiday, he/she will receive 40 hours of regular straight pay for the hours worked, plus an additional 8 hours of regular straight pay for the holiday. If an employee has worked 40 hours during the week and then works an additional 3 hours on a holiday, he/she will receive 40 hours of regular straight pay, plus 3 hours of overtime pay at the rate of time and a half, plus 8 hours of regular straight pay for the holiday.

For purposes of calculating how many hours an employee has worked in a day or work week, NCDHD workweek begins at 12:01 AM on Sunday and ends at Midnight on Saturday. The workday begins at 12:01 AM and ends at Midnight each day.



Date Created:	7/1/2019	
Assigned Annual Review Period:	At least every 5 years	
Reviewed Date:	11/1/2019	
Approved by:	Executive Director	
Approval Date:	11/1/2019	

Number: 6 - 501

Administrative Standard Operating Procedure (ASOP):

Subject: Per Diem

Scope: All Administration and Employees

NCDHD participates in non-reportable Per Diem and is treated as taxable compensation. Per Diem will be paid for meals and incidentals— no receipts required. Per Diem will be paid at a rate less than or equal to the state's CONUS Rate*. According to the CONUS guidelines, meal rates include tips, taxes (if applicable) and beverages and must be planned accordingly; thus, prior to travelling, the traveler is responsible for referencing the CONUS rates to make him or her aware of the travel expense allowances and request a per diem accordingly.

When utilizing a per diem arrangement, Federal funded program worked meals paid for as part of a conference registration fee or hotel service (i.e., continental breakfast) or another meeting sponsor may not be requested via a per diem reimbursement request because the meal has already been paid for in the registration/hotel cost.

To request Per Diem, please use the Per Diem Claim Form located on the server under "Office Info. Expenses for meals will be paid according to the chart below. Rates for Per Diem will be completed on the Per Diem Claim Form by the Finance Department. Questions or variances must be approved by the Director.

TRAVEL PER DIEM: for travel of more than 24 hours with overnight stay:

Meal Reimbursement Qualifications for Multi-day Trips		
Breakfast	When travel begins at or before 6:30 a.m. on the first day of travel or extends beyond	
	9:00 a.m. on the last day of travel, and for any intervening days. Time taken to eat a	
	meal is not included.	
Lunch	When travel begins at or before 10:00 a.m. on the first day of travel or extends beyond	
	2:00 p.m. on the last day of travel, and for any intervening days.	
Dinner	When travel begins at or before 4:00 p.m. on the first day of travel or extends beyond	
	6:30 p.m. on the last day of travel and for any intervening days. Time taken to eat a	
	meal is not included.	

Failure to comply with this policy may result in disciplinary action, up to and including termination pursuant to the policies and procedures in the NCDHD Human Resources Policy Manual.



Date Created:	7/1/2019	
Assigned Annual Review Period: At least every 5 years		
Reviewed Date:	11/1/2019	
Approved by:	Executive Director	
Approval Date:	11/1/2019	

Number: 6 - 502

Administrative Standard Operating Procedure (ASOP):

Subject: Reimbursement

Scope: All Administration and Employees

IMPORTANT: Employees are encouraged to use their company issued credit cards for meals while traveling. If an employee receives more than \$200.00 in reimbursements a year from personal credit card use, it is considered income and will be added to their gross wages.

REIMBURSEMENT: for travel less than 24 hours and with no overnight stay:

The follow chart references meal reimbursement allocations for single day trips.

Meal Reimbursement Qualifications for Single-day Trips			
Breakfast	When travel begins at or before 6:30a.m. on the day of travel or extends beyond		
	9:00a.m. on the day of travel. Time taken to eat a meal is not included.		
Lunch	Lunch reimbursement is not permissible.		
Dinner	When travel begins at or before 4:00 p.m. on the day of travel or extends beyond		
6:30p.m. on the day of travel. Time taken to eat a meal is not included.			

TIPPING

Tips may be necessary in order to follow standard travel etiquette. The following tips, per instance, will be reimbursed to the employee for business-related travel, at a maximum rate of \$8/day for the day of travel. This should be recorded on the employee's Expense Form. If a receipt is provided, the tip must be recorded on the receipt. Handwritten is acceptable. Itemized receipts are not needed for tipping expenses. Employees are encouraged to take a receipt book with them during travel. Additional tipping allowances may be authorized at the discretion of the Director. Estimated tipping expenses may be requested in advance.

Shuttle van or bus driver	\$2 each way
Taxi driver	10% of total fare
Bellhop: only when necessary (i.e. the hotel check-out time is earlier than the ending-	\$2
time of the business event) and preauthorized	
Doorman for hailing a cab for necessary business-related travel.	\$1
Baggage Handling	\$1 per bag up to 3
	bags

Reference the following chart for applicable receipts that will need to be submitted with your Reimbursement Request. Proper documentation; agenda, sign-in sheet, etc. are required to be turned in with your reimbursement request as well as the completed reimbursement form located on the server under the Office Info folder. Rates for reimbursement on the form will be completed by the Finance Department.

Expense	Receipt	
	Yes	No
Major Transportation (airfare, rail fare, etc.)	X	
Standard Baggage Check Fees (one bag per one way trip)	X	
Lodging	X	
Parking	X	
Ground Transportation (buses, subway, shuttles, taxis, etc.)	X	
Tips (for meals)	X	
Tips for travel etiquette items	X	
Mileage		X

Failure to comply with this policy may result in disciplinary action, up to and including termination pursuant to the policies and procedures in the NCDHD Human Resources Policy Manual.

Date Created:	01/01/2017
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	08/10/2019
Revised Date:	08/10/2019
Approved By:	Director
Approval Date:	8/2019

Procedure: 8-85 Procurement Procedures

Subject: Procurement

Scope: All Employees

Standard Operating Procedure:

The following are North Central District Health Department (NCDHD) Procurement procedures:

NCDHD requires the practice of ethical, responsible and reasonable procedures related to purchasing, agreements and contracts, and related forms of commitment.

This policy provides for full and open competition for vendors working on behalf of NCDHD consistent with the Procurement Standards as specified in 2 Code of Federal Regulators (CFR) 200.317-326 following applicable State and local laws and regulations to the extent that those policies do not conflict with the Uniform Administrative Requirements (UAR) while providing good fiscal management of funds awarded to NCDHD and mitigating risks of fraud, waste, and abuse.

The Health Director may self-approve his or her own purchase requisitions. The Board of Health will review all department expenditures that are not processed with payroll by way of the current fiscal reporting put in place.

Authorizations and Purchasing Limits

Any staff member may initiate or prepare a purchase request form to be reviewed and approved by his/her manager. The following table lists required approval levels and solicitation processes:

Amount of Purchase	Required Approvals	Required Solicitation	Required Documentation (retained according to the Records Retention Policy (V-3).
<\$999	Program Manager	No bid required	For regulation regarding micro-purchases, see OMB Uniform Guidance 200.320
\$1,000-\$5,000	Program Manager	2 bids (oral, catalogue, Internet) An exception is #	 Documentation of bids received How decision was made if lowest price not used. If lowest price was not used, the Health Director, or his/her designee, must approve the decision.
\$5,000 ≤ \$25,000	 Health Director Special notification in BOH Fiscal Documents 	3 written bids (catalogue, Internet, written)	 Documentation of bids received How decision was made if lowest price not used
\$25,001 ≤ \$100,000	Board of HealthHealthDirector.	3 written bids (Request for bids or request for proposals)	 Copy of RFB or RFP Proposal scoring grids including who participated in the scoring Proposal and contract of winning bid

Procedures

The following are North Central District Health Department (NCDHD) Procurement procedures:

- 1. NCDHD shall avoid purchasing items that are not necessary for the performance of the activities required in general operations or required by a grant award. For items that are standard operational/consumable supplies, such as toilet paper, cleaning supplies, lightbulbs, hand/dish soap, paper towels, etc. can be purchased in a minimum quantity without prior approval.
- 2. Program-related materials that are needed in an emergency for the successful and quality completion of a program, service or activity, staff are authorized to make emergency purchases, in reasonable amounts, and must seek post-approval with appropriate documentation of the circumstance at the earliest convenience.
- 3. Where appropriate, an analysis shall be made of lease and purchase alternatives to determine which would be the most economical and practical procurement for the federal government or the funder. (CRF part 220). This analysis should only be made when both lease and purchase alternatives are available to the program.
- 4. Appropriate steps are taken to ensure that minority and women-owned businesses and labor surplus firms are utilized when possible including:

- a. Placing qualified small and minority businesses and women's businesses on the solicitation lists.
- b. Assuring that small, minority, and women's businesses are solicited whenever they are potential sources
- c. Dividing projects into smaller projects when economically feasible to permit maximum participation by small, minority, and women's businesses.
- d. Following the other recommendations in section 200.321.
- 5. Some form of cost or price analysis shall be made for items and services that are purchased on a regular basis annually (general office supplies, consumable supplies, etc.). Atypical items and/or services, and all items/services that cost \$5,000 or more will have a cost analysis completed each time. This may be done in various ways, including comparison of price quotations submitted or market prices. Documentation of the cost and price analysis shall be retained in files pertaining to each grant award or filed in general files when the purchase is operational in nature and independent of a specific program.
- 6. For all procurements in excess of the federally defined simplified purchase acquisition threshold (\$100,000), procurement records and files shall be maintained that include all the following:
 - a. The basis for contractor selection.
 - b. Justification for lack of competition when competitive bids or offers are not obtained.
 - c. The basis for award cost of price.
- 7. NCDHD shall make all procurement files available for inspection upon request by an awarding agency or upon request by the auditor.
- 8. NCDHD shall not utilize the cost-plus-a-percentage of costs method of contracting.

Control Grid – Purchasing and Disbursements

NCDHD strives to maintain adequate segregation of duties in its purchasing and disbursements functions. The following table illustrates how responsibilities have been assigned. In this table, personnel are identified as follows:

- A. Board of Health Executive Members
- B. Board of Health Members
- C. Health Director
- D. Program Manager
- E. Fiscal Manager
- F. Program Staff
- G. Office Manager

Duty	А	В	С	D	E	F	G	
Inputs data into vendor master file					х			
Obtains Form W-9 from new vendors			х		х			
Initiates purchases			х	х	х	х	х	
Authorizes purchases	х	х	х	х	х			
Prepares purchase order requests			х	х		х	х	
Selects vendor		х	х	х	х	х	х	
Receives vendor invoice							х	
Approves vendor invoice			х	Х	х			
Assigns Funding Source			х	Х	х			
Inputs invoice into A/P system					х			
Selects A/P to be paid			х		х			
Runs A/P checks					х			
Reviews checks	х		х	х				
Signs checks			х		х			
Mails checks					Х			
Maintains custody of unused checks					х			
Reconciles A/P to general ledger					х			
Performs bank reconciliation					х			
Reviews cancelled checks			х		х			
Reviews bank reconciliations	Х	х	х		х			



Date Created:	9/1/2019
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	9/30/2019
Approved by:	Executive Director
Execution Date:	10/1/2019

Number: 9 - 010

Administrative Standard Operating Procedure (ASOP):

Subject: Administrative Fiscal Management

Scope: All Administration

IMPORTANT: This document may be updated internally from time to time.

In efforts for the NCDHD Board of Health and NCDHD internal fiscal management adequate incorporation of segregation of duties, NCDHD Management will put into place procedures to follow.

- 1) Dual signature on outgoing checks/transactions: Signature cards at the banking institution utilized by NCDHD will be updated with those who have been designated to have signature authority on NCDHD check transactions. NCDHD will incorporate the activity of having dual signatures on check transactions.
- 2) NCDHD Management will incorporate an increase of Board of Health management of financial affairs to include, but not be limited to; providing designated Board Member(s) a review of transactions, bank reconciliations and monthly standard reports. The following process will include:
 - a) Monthly bank statements along with a fully reconciled report be sent via email and/or hard copy format(s) to the NCDHD BOH Executive Committee. Reports to be disseminated accordingly by the 20th of the respective following month.
 - b) Monthly fiscal reports will continue to include: a balance sheet, income & expense line item and income and expense detailed information. These reports will be sent via email and/or hard copy format(s) to the NCDHD BOH Executive Committee. Reports to be disseminated accordingly by the 20th of the respective following month.
 - c) Comments and questions from the Executive Committee or said Board Members will be solicited regarding said financial reports. Feedback is to be provided to the Executive Director and documented. Noteworthy corrections to be made will be followed up with by a continuance of this noted procedural process.

Date Created:	1/3/2018
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	
Revised Date:	
Approved By:	Executive Director
Approval Date:	1/3/2018

Number: 9 - 030

<u>Procedure</u>

Subject: Capital Expense and Inventory

Scope: Management

PROCEDURE

North Central District Health Department is responsible for establishing adequate controls over capital expenditures to ensure the timely procurement of these assets and accurate and timely recognition of these assets in the accounting records. The procedure requires:

- Management review and approval purchases in capital expenditures.
- Expenditures to be allocated as a fixed asset(s), if applicable, in NCDHD accounting system.
- Track and review capital projects against predefined budgets or plans.
- NCDHD to pay for capital expenditure items consistent with approved order details.
- NCDHD to secure bids as specified in the Procurement Policy.
- NCDHD to follow the procurement and purchasing limits as specified in the policy.
- New items purchased must be placed in inventory by the Fiscal Manager/accounting, and inventory reconciliation will happen annually.

NCDHD does not consider purchases below \$10,000 to be capital expenditures. Assets purchased below the \$10,000 limit are expensed as they are received.



Date Created:	1/2018
Assigned Annual Review Period:	At least every 5 years
Reviewed Date:	2/2022
Revised Date:	2/2022
Approved By:	Board of Health
Approval Date:	

Administrative Standard Operating Procedure: 9-035

Subject: Disposal of Surplus Property

Scope: Director & Board

PROCEDURE

North Central District Health Department (NCDHD) Director may be authorized to sell surplus agency property according to the terms below. Surplus property which is obsolete or not usable by NCDHD and which has no monetary value may be offered for donation through the Materials Exchange Program that is available to participating schools, nonprofits and government agencies or their students, clients, or members. Items are not to be sold directly or given to a third party whose intent it is to sell said items(s) for profit.

<u>Non-vehicles</u>: If the item is obsolete or not usable by NCDHD, and has a value of less than \$2,500.00, the Director may proceed with a sale. The Board of Health will approve the authorization to sell surplus agency property which has a value of \$2,500 and less than \$5,000 without competitive bidding. Property with a value of \$5,000 or greater will be sold through competitive bidding with the authorization of the Board of Health. In making such authorization, the Health Director and/or Board of Health may place any restriction on the type or value of property to be sold, restrict such authority to a single transaction or to a period of time, or make any other appropriate restrictions or conditions.

<u>Vehicles</u>: The Director, may be authorized to sell or trade-in surplus vehicles which may be obsolete or not usable by NCDHD and which has a Kelly Blue Book value of less than \$5,000. The determination to sell or trade-in a vehicle will be based on the overall best return on investment. Surplus vehicles which are

obsolete or not usable by NCDHD and which have a Kelly Blue Book value of \$5,000 or more shall be sold through competitive bidding.

<u>Electronic Equipment</u>: including copy and/or fax machines, computers, tablets, cell phones, etc., will have the hard drives and/or Sims cards removed and destroyed prior to disposal. Electronic equipment that is obsolete and with no monetary value may be recycled at an electronic recycling event or as directed by the Director.

When the Director is authorized to sell surplus personal property and/or surplus vehicles as described above, the Director shall make a report to Board of Health within ninety (90) days after the end of the fiscal year reflecting, for each transaction, the item sold, the name and address of the purchaser, the price paid by the purchaser for each item, and the total amount paid by the purchaser.

No person authorized by the Health Director and/or Board of Health to make such sales shall be authorized to make or imply any warranty of any kind whatsoever as to the nature, use, condition, or fitness for a particular purpose of any property sold pursuant to this section. Any person making sales authorized by this section shall inform the purchaser that such property is being sold 'as is' without any warranty or guarantee of any kind whatsoever.

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT O'NEILL, NEBRASKA FINANCIAL STATEMENTS JUNE 30, 2022

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INDEPENDENT AUDITORS' REPORT

To the Board of Directors North Central District Health Department O'Neill, NE 68763

Opinions

We have audited the accompanying cash basis financial statements of the governmental-type activity and each major fund of the North Central District Health Department (the Health Department), as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise the Health Department's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective cash basis financial position of the governmental-type activity and each major fund of the Health Department as of June 30, 2022, and the respective changes in cash basis financial position, and where applicable, cash flows thereof for the year then ended in accordance with the cash basis of accounting as described in Note A.

Basis for Opinions

We conducted our audit in accordance with auditing standards generally accepted in the United State of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Health Department, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Emphasis of Matter - Basis of Accounting

We draw attention to Note A of the financial statements, which describes the basis of accounting. The financial statements are prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinions are not modified with respect to that matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the cash basis of accounting described in Note A, and for determining that the cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Department's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Health Department's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplementary Information

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the Heath Department's basic financial statements. The Schedule of Expenditures - Cash Basis - General Fund is presented for the purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the Schedule of Expenditures - Cash Basis - General Fund is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

Other Matters

Other Information

Management is responsible for the other information included in the annual report. The other information comprises the management's discussion and analysis and budgetary comparison information but does not include the basic financial statements and our auditor's report thereon. Our opinions on the basic financial statements do not cover the other information, and we do not express an opinion or any form of assurance thereon.

In connection with our audit of the basic financial statements, our responsibility is to read the other information and consider whether a material inconsistency exists between the other information and the basic financial statements, or the other information otherwise appears to be materially misstated. If, based on the work performed, we conclude that an uncorrected material misstatement of the other information exists, we are required to describe it in our report.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated August 3, 2023, on our consideration of the Health Department's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting

and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Health Department's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the Health Department's internal control over financial reporting and compliance.

The financial statements referred to above do not include the audit of the expenditures of federal awards of the Health Department for the year ended June 30, 2022. That audit was performed by Porter and Company, P.C. Our opinion is not modified with respect to that matter.

Ord, Nebraska August 3, 2023

Lammers, abel : Kape, CP13

MANAGEMENT'S DISCUSSION AND ANALYSIS NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

This section of North Central District Health Department's (the Health Department) annual audit report presents our discussion and analysis of the Health Department's financial performance during the fiscal year that ended on June 30, 2022. Please read it in conjunction with the Health Department's financial statements, which follow this section.

OVERVIEW OF THE FINANCIAL STATEMENTS

The Health Department utilizes the provisions of Statement No. 34 ("Statement 34") of the Governmental Accounting Standards Board "Basic Financial Statements - and Management's Discussion and Analysis - for State and Local Governments." Statement 34 established standards for external financial reporting for all state and local government entities, which includes government-wide financial statements, fund financial statements, and the classification of net position into three components: (a) net investment in capital assets; (b) restricted; and (c) unrestricted.

This annual report consists of three parts: (1) Management's Discussion and Analysis (this section); (2) the Basic Financial Statements; and (3) Supplemental Schedules.

The financial statements also include notes that explain some of the information in the financial statements and provide more detailed data about the financial statements. The statements are followed by a section of supplemental information that further explains and supports the information in the financial statements.

FINANCIAL HIGHLIGHTS (Detailed Information Follows Later in this Discussion & Analysis)

The prior year financial information for the District has been restated to reflect a change in accounting basis from a modified cash basis to cash basis.

The Health Department's total net position, as compared to the prior fiscal year, increased by \$112,991.

During the year the Health Department's revenues of \$2,183,815 were \$251,253 more than the prior year's revenues of \$1,932,562.

During the year the Health Department's expenditures of \$2,070,824 were \$45,945 less than the prior year's expenditures of \$2,116,769.

FINANCIAL ANALYSIS OF THE HEALTH DEPARTMENT AS A WHOLE

TABLE 1 NET POSITION

Gover	nmental
Act	<u>ivities</u>
2022	2021

Net Position:

Restricted for Public Health Activities \$\\\ \\$315,814 \\ \\$202,823

TABLE 2 CHANGES IN NET POSITION

		nmental ivities
	2022	2021
Revenues:		
Program Revenues	\$2,170,603	\$1,929,159
General Revenues	13,212	3,403
Total Revenues	\$2,183,815	\$1,932,562
Program Expenditures: Public Health	2,070,824	2,116,769
Change in Net Position	\$ 112,991	\$ (184,207)
Beginning Net Position	202,823	_387,030
Ending Net Position	\$ <u>315,814</u>	\$ <u>202,823</u>

The largest single source of receipts for the Health Department is payments from the Nebraska Department of Health and Human Services. These payments include funding for both State and Federal programs.

The Health Department's payments from the Nebraska Department of Health and Human Services for 2021-2022 totaled \$1,150,086 and for 2020-2021 totaled \$1,591,242.

FINANCIAL ANALYSIS OF THE HEALTH DEPARTMENT'S FUNDS

Governmental Fund

The General Fund is the principal operating fund of the Health Department. The fund balance of the General Fund at June 30, 2022 was \$315,814 which increased by \$112,991 during the year ended on that date.

GENERAL FUND BUDGETARY HIGHLIGHTS

Over the course of the 2021-2022 fiscal year, the Health Department's General Fund position increased by \$112,838 over budget. The following table provides a detailed overview of the increase:

TABLE 3 BUDGETARY COMPARISON

Governmental <u>Activities</u>

	2021-2022 Budget	Year-End	D:66
	Buuget	Actual	Difference
Beginning Balance	\$ 202,976	\$ 202,823	\$(153)
Total Receipts	2,346,508	2,183,815	(162,693)
Total Expenditures	(2,346,508)	(2,070,824)	275,684
Ending Balance	\$ <u>202,976</u>	\$ _315,814	\$ <u>112,838</u>

As detailed in the table, total receipts were \$162,693 under budget, and total expenditures were \$275,684 under budget.

CAPITAL EXPENDITURES

Heath Department capital expenditures during the year ended June 30, 2022 were as follows:

Building Improvements	\$ 22,119
Office Furniture	13,000
Trailer Decals	1,683
	\$ 36,802

CONTACTING THE DEPARTMENT'S FINANCIAL MANAGEMENT

This financial report is designed to provide our citizens and taxpayers a general overview of the Health Department's finances and to demonstrate the Health Department's accountability for the money with which it is entrusted. If you have questions about this report or need additional financial information, contact the North Central District Health Department, 422 E Douglas Street, O'Neill, Nebraska 68763. Our telephone number is (402) 336-2406, our fax number is (402) 336-1768 and our email address is heidi@ncdhd.ne.gov.

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT STATEMENT OF NET POSITION - CASH BASIS GOVERNMENTAL FUND June 30, 2022

	Primary Government Governmental Activities
ASSETS	
Cash	\$315,814
NET POSITION	
Restricted for Public Health Activities	\$ 315,814

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT STATEMENT OF ACTIVITIES - CASH BASIS GOVERNMENTAL FUND

For The Year Ended June 30, 2022

]	Public Health
EXPENDITURES		
Salaries, Wages and Benefits Seminars, Training and Travel Covid-19 Funds Payback Capital Expenditures Other Program Expenses	\$	1,197,546 41,399 174,473 36,802
Other Program Expenses	_	620,604
Total Expenditures	\$_	2,070,824
PROGRAM REVENUES		
Charges for Services	\$	40,311
Operating Grants and Contributions		2,130,292
Total Program Revenues	\$_	2,170,603
Net Program (Expenditures) Revenues	\$_	99,779
GENERAL REVENUES		
Interest Income Other	\$	58 13,154
Total General Revenues	Φ.	10.010
Total General Revenues	\$_	13,212
Change in Net Position	\$	112,991
Net Position - Beginning		202,823
Net Position - Ending	\$_	315,814

NOTE A: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization

The North Central District Public Health Department (the Health Department) is a public service agency created to protect and promote health, and prevent disease and injury. Public health services are population-based B, that is services which are focused on improving the health status of the population, as opposed to primary care providers who respond to the treatment of individuals.

To accomplish this mission, public health departments balance three core government public health functions; assessment, policy development and assurance. These functions are essential to the maintenance of population-based services.

The Health Department was created in 2002 as required by Nebraska LB 692 which requires all counties to be served by a public health department serving a minimum of three contiguous counties with a population of at least 30,000 people. The Health Department serves Antelope, Boyd, Brown, Cherry, Holt, Keya Paha, Knox, Pierce and Rock Counties in north central Nebraska.

The Health Department is governed by a seventeen member Board of Directors.

Basis of Accounting

The accompanying governmental funds financial statements are presented on the cash basis of accounting. The cash basis of accounting differs from accounting principles generally accepted in the United States of America (GAAP). The cash basis of accounting recognizes assets, net position/fund equity, revenues, and expenditures when they result from cash transactions. This basis is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP).

As a result of the use of the cash basis of accounting, certain assets and their related revenues (such as accounts receivable and revenue for billed or provided services not yet collected) and certain liabilities and their related expenses (such as accounts payable and expenses for good or services received but not yet paid, and some accrued expenses and liabilities) are not recorded in these financial statements.

NOTE A: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Basis of Presentation

The Health Department utilizes the provisions of Statement No. 34 of the Government Accounting Standards board "Basic Financial Statements - and Management's Discussion and Analysis - for State and Local Governments, ("Statement 34"). Statement 34 established standards for external financial reporting for all state and local government entities, which includes government-wide financial statements, fund financial statements and the classification of net position into three components - net investment in capital assets; restricted; and unrestricted. Governments are also required to follow the pronouncements of the Financial Accounting Standards Board (FASB) issued through November 30, 1989 (when applicable), that do not conflict with or contradict GASB pronouncements. Although the Health Department has the option to apply FASB pronouncements issued after that date to its business-type activities and enterprise funds, the Health Department has no such funds.

1989 FASB and AICPA Pronouncements Those provisions require Governments to follow the pronouncements of the Financial Accounting Standards Board (FASB) issued through November 30, 1989 (when applicable), that do not conflict with or contradict GASB pronouncements.

Measurement Focus/Basis of Accounting

Statement 34 requires both government-wide and governmental fund presentation of the financial statements of the Health Department. The Health Department accounts for all activity within the General fund, thus the financial statement for the General fund also represents the government-wide financial statements.

Governmental fund financial statements are reported using the current financial resources measurement focus and the cash basis of accounting. Under the cash basis of accounting, revenues are recognized when collected rather than when earned and expenses are recognized when paid rather when incurred. Accordingly, the financial statements and supplemental schedules are not intended to present financial position and results of operation in conformity with accounting principals generally accepted in the United States of America.

NOTE A: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Fund Accounting

The accounts of the Health Department are organized on the basis of funds. A fund is a group of related accounts that is used to maintain control over resources that have been segregated for specific activities. The Health Department uses only one governmental fund to account for its activities.

Governmental Funds

Governmental funds are those through which most governmental functions typically are financed. Governmental funds reporting focuses on the sources, uses and balance of current financial resources. Expendable assets are assigned to the various governmental funds according to the purpose for which they may or must be used. Current liabilities are assigned to the fund from which they will be paid. The differences between governmental fund assets and liabilities is reported as fund balance.

The Health Department reports the following major governmental fund:

General Fund - The General Fund is used to account for all financial resources of the Health Department. The General Fund balance is available to the Health Department for any purpose provided its expendable according to the general laws of the State of Nebraska, the bylaws of the Health Department and any grant restriction that may apply.

Budget Process

The Health Department is required by state law to adopt an annual budget. State Statutes of the Nebraska Budget Act provides the prescribed budget practices and procedures that governing bodies are required to follow. The budget is presented on the cash basis of accounting, which is consistent with the requirements of the state budget act.

The Health Department Board submits a proposed operating budget for the following fiscal year commencing July 1. The operating budget includes proposed expenditures and means of financing them. Public hearings are conducted at a public meeting to obtain taxpayer comments. Prior to September 20, the budget is legally adopted by the Health Department Board through passage of a resolution.

NOTE A: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Governmental Fund Balances

In the governmental fund financial statements, fund balances are classified as follows:

Nonspendable - Amounts that cannot be spent either because they are in a nonspendable form or because they are legally or contractually required to be maintained intact. The Health Department had no nonspendable funds at June 30, 2022.

Restricted - Amounts that can be spent only for specific purposes because of state or federal laws, or externally imposed conditions by grantors or creditors.

Committed - Amounts that can be used only for specific purposes determined by a formal action by a Health Department Board resolution. The Health Department had no committed funds at June 30, 2022.

Assigned - Amounts that are designated by the Executive Director for a particular purpose but are not spendable until a budget resolution is passed or there is a majority vote approval by the Health Department Board. The Health Department had no assigned funds at June 30, 2022.

Unassigned - All amounts not included in other spendable classifications.

Restricted and Unrestricted Revenue

Grants and other funds that are restricted by the grantor are reported as increases in unrestricted net position if the restrictions expire (that is, when a stipulated time restriction ends or purpose restriction is accomplished) in the reporting period in which the revenue is recognized.

When both restricted and unrestricted resources are available for use, it is the Health Department's policy to apply the expense toward restricted resources first, then unrestricted resources as needed. In the governmental fund, the Health Department's policy is to apply the expenditures toward restricted fund balance first, then other less-restrictive (committed and then assigned fund balances) before using the unassigned fund balance.

NOTE A: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Capital Assets

Under the provisions of Statement No. 34 of the Governmental Accounting Standards Board, capital expenditures for infrastructures assets, such as building improvements, would be capitalized and the cost expensed over the estimated useful life of the assets. The Health Department prepares its financial statements under the cash basis of accounting. Under the cash basis of accounting, capital expenditures are recorded as disbursements when paid for by the Health Department and are not recorded in the governmental-type financial statements.

Compensated Absences

Compensated absences for vacation pay, sick pay and personal time are recognized by the Health Department when actually paid.

Economic Dependence

The Health Department received a majority all of its revenues from Federal and State programs through the State of Nebraska Department of Health and Human Services.

NOTE B: CASH AND INVESTMENTS

Nebraska statutes provide that the Health Department may, by and with the consent of the Board of Directors, invest the funds of the Health Department in securities, including repurchase agreements, the nature of which individuals of prudence, discretion, and intelligence acquire or retain in dealing with the property of another.

Nebraska statutes also prohibit the accumulation of funds in any financial institution in excess of the amount insured by the Federal Deposit Insurance Corporation (FDIC), unless those funds are properly collateralized.

Cash

At June 30, 2022, the Health Department had \$315,463 of cash held by various financial institutions, all of which was insured by the FDIC.

NOTE B: CASH AND INVESTMENTS (continued)

Cash for the Health Department at June 30, 2022 consisted of the following:

Checking Accounts	\$ 304,412
Savings Account	11,051
Cash on Hand	351
	\$ 315,814

Investments

The Health Department had no other investments at June 30, 2022.

NOTE C: EMPLOYEE BENEFITS

The Health Department contributes 18% of an employee's gross salary or yearly income to a cafeteria plan. Employees use this for contributions to a 457(b) plan and/or for health insurance in whatever mix they choose. The Health Department does not provide a company match to contributions to the 457(b) plan.

NOTE D: CHANES IN BEGINNING NET POSITION

For the year ended June 30, 2022, the Health District has elected to report its financial information on the cash basis of accounting. The Health District had been utilizing a modified cash basis of accounting for prior years' reporting. The following disclosures the restatement of the Health District's net position as of the beginning of the year:

Net Position, beginning of year

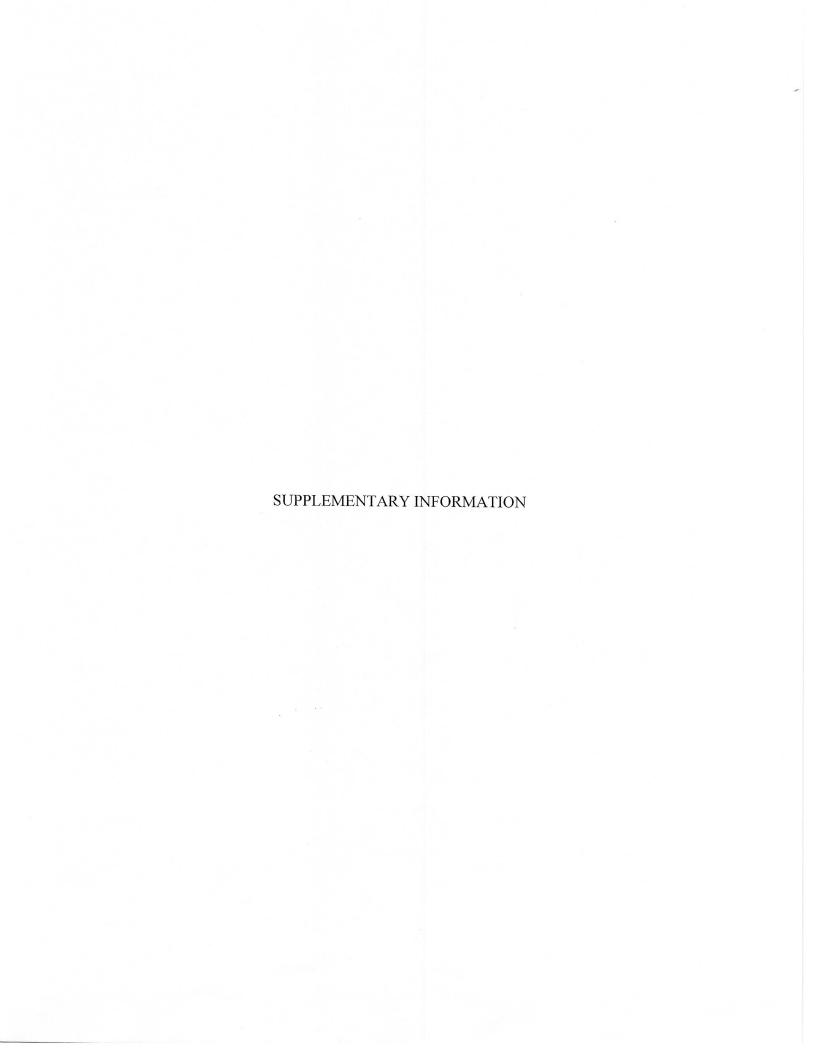
as previously reported	\$ 166,378
Increase due to elimination of liabilities reported under the	
modified cash basis of accountin	g <u>36,445</u>
Net Position, beginning of year as restated	\$ 202,823
as restated	$\Phi \angle U \angle 0 \angle 3$

NOTE E: RISK MANAGEMENT

The Health Department is exposed to various risks of loss related to torts; theft of, damage to and destruction of assets; errors and omissions; injuries to employees; and natural disasters. These risks are covered through the purchase of commercial insurance. The Health Department assumes liability for any deductibles and claims in excess of coverage limitations. Management believes that the coverage maintained is adequate to preclude any significant risk of exposure to the Health Department. Settled claims resulting from these risks have not exceeded commercial insurance coverage in any of the past three fiscal years.

NOTE F: SUBSEQUENT EVENTS

Management has evaluated subsequent events through August 3, 2023, the date on which the financial statements were available for issue.



NORTH CENTRAL DISTRICT HEALTH DEPARTMENT BUDGETARY COMPARISON SCHEDULE - CASH BASIS GENERAL FUND

For the Year Ended June 30, 2022 (Unaudited)

	geted Amount ginal and Fina		Actual Amounts		Variance With Final Budget sitive (Negative)
Fund Balance - Beginning of Year	\$ 202,976	\$.	202,823	\$_	(153)
REVENUE Federal Receipts State Receipts Local Receipts	\$ 630,000 122,000 1,594,508	\$	1,455,638 508,506 219,671	\$	825,638 386,506 (1,374,837)
Total Receipts	\$ 2,346,508	\$.	2,183,815	\$_	(162,693)
Total Available Resources	\$ 2,549,484	\$.	2,386,638	\$_	(162,846)
EXPENDITURES Public Health Other Capital Outlay	\$ 2,346,508	\$	2,034,022 36,802	\$	312,486 (36,802)
Total Expenditures	\$ 2,346,508	\$.	2,070,824	\$_	275,684
Fund Balance - End of Year	\$ 202,976	\$	315,814	\$_	112,838

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT SCHEDULE OF EXPENDITURES - CASH BASIS GENERAL FUND

For The Year Ended June 30, 2022

Bank Charges	\$ 1,843
Building Maintenance	22,801
Capital Expenditures	36,802
Communications	86,793
Contracted Services	119,955
Covid-19 Funds Payback	174,473
Dues and Subscriptions	31,042
Education and Training	3,645
Fees	7,654
Health Resources and Supplies	,
Insurance	179,282
Licenses and Permits	33,339
3 C 00/1/20 1000 100/1/20 100 100/1/20 100 100 100 100 100 100 100 100 100 1	1,457
Meetings and Conferences	8,297
Mileage	3,368
Miscellaneous	6,353
Office Expenses	82,870
Professional Services	33,719
Program Pledges	1,800
Rent	8,328
Vehicle Expenses	29,457
Wages and Benefits	1,197,546
Total Expenditures	\$_2,070,824

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INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Directors North Central District Health Department O'Neill, NE 68763

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in <u>Government Auditing Standards</u> issued by the Comptroller General of the United States, the financial statements of the governmental-type activity and each major fund of the North Central District Health Department, (the Health Department) as of and for the year ended June 30, 2022, and the related notes to the financial statements, which collectively comprise the Health Department's basic financial statements and have issued our report thereon dated August 3, 2023.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Health Department's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Health Department's internal control. Accordingly, we do not express an opinion on the effectiveness of the Health Department's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected, on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. We identified certain deficiencies in internal control, described in the accompanying Schedule of Findings and Responses as items 2022-1 and 2022-2, that we consider to be significant deficiencies.

Report on Compliance and Other Matters

Lammeis, abel : Kapy CPS

As part of obtaining reasonable assurance about whether the Health Department's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under <u>Government Auditing Standards</u>.

The North Central District Health Department's Response to Findings

The Health Department's response to the findings identified in our audit is described in the accompanying schedule of findings and responses. The Health Department's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

August 3, 2023

NORTH CENTRAL DISTRICT HEALTH DEPARTMENT SCHEDULE OF FINDINGS AND RESPONSES For The Year Ended June 30, 2022

2022-1 Segregation of Duties

Observation

Due to limited number of personnel, there is not adequate segregation of duties to ensure internal control over cash receipts, disbursements and recording of transactions.

Recommendation

The Board and Management should review all transactions and all bank reconciliations on a monthly basis to provide additional oversight.

Response

The Board and Management will review them on a monthly basis.

2022-2 Preparation of Financial Statements

Observation

The Health Department does not have an internal control system designed to provide the expertise to prepare financial statements, including note disclosures, in accordance with the modified cash basis of accounting.

Recommendation

The Board of Directors and Management should review financial statements, including note disclosures, to understand the relationship to underlying data transactions.

Response

The Board of Directors and Management will review the financial statements, including note disclosures that are being presented.

		NCDHD	NCDHD Surplus Sale August 30,	August 30, 2023	(agreeing to 'purchasing terms')
Item Description	Quantity	Subtotal	Total Due	Payment Method	Signature of Purchaser
page protectors	40		\$2B		CSlade
Switcases	S	₩ •)	
Nax cooler		9.8	9.4	1600	
Cooler dolly	2	-44-	\$2 /#	,	
Chair		* · ·	4	Cach	
peutector		55 /	6		
Chair		\$ \$		Cash	
file carrinet	***************************************	7.	\$2		
dolly	7	+	\$2		A. A. P. AMM
arrow signs	2	44-	42 A	Cash	
+(1)1 SIGN		-	1.8		11
DUALET COMYS	20X	\$2	*2		
dryevas (rome)		₩	100 /		
Sping bindurs		بر در پر			
shut pod ctors		4)\$5	Cash	Cashyfand
phone alout		*			

		NCDHD	Surplus Sale	NCDHD Surplus Sale August 30, 2023	
					(agreeing to 'purchasing terms')
Item Description	Quantity	Subtotal	Total Due	Payment Method	Signature of Purchaser
3 ping bindur	()	<u>_ر</u> _	4 .]	Pacia	auxie Hoose
Sheet prox yors	Shooks		Ç	Corre	4 miles 18 collec
Dlastic 3 drawers	-	£.,	#	Cash	hard in book
Shout pleatectors	lbox	4	4	Cash	Os Sulai
dolly		7	4	Cash	Desca Deuton
Sign Stand	_	4	7 7		I Exesalluntar
broken chair	6	4	1		
broken chair		\$ O	1	(Story E. Hutch
broken chair	2	0	1)	Post Bushall
· Passion Dicture		5)	,	· Larry WAnser
3 ring Binders		410	,	ſ	Mille Wanse
2 2Kg Page Protectors 2			((mil u banour
FLOVER binders	1		·	lash	Jolee John
Flow		W)		Cash	
laptop case				Cash	

		NCDHD:	Surplus Sale	NCDHD Surplus Sale August 30, 2023	
					(agreeing to 'purchasing terms')
Item Description	Quantity	Subtotal	Total Due	Payment Method	Signature of Purchaser
phone		P 51 147 5 144	₽	Cash	Cotrytavel
rolling trunding sign halder	70		4	Cash	
Mulemin			\$2	Cash	B. Man A.
Chairs, binders	4		10.00	Cash	Cathy Parcel
binders	Ø		<u>A</u>	cash	Lainer Hoter
Dindu/s	Œ		*		
Shill propertors	2601		\$\ \ \)#	*2 (.Q.X)	NOMO TUNON.
Chair			1 4		
3 Ring Binder	4		\$2	l vash	Donne On chean
top interest Birders	is P		4	()	
hair	7		4	Ca&h	De layer
				55 55 55 55 55 55 55	

		NCDHD :	iurplus Sale	NCDHD Surplus Sale August 30, 2023	
Item Description	Ouantity	Subtotal	Total Due	Payment Method	(agreeing to 'purchasing terms')
SWING DUCKERS)	7			Wash 1	
smaydpyny (thorn)				trash	7
DOWNEY remnants	(D	: 		trash	こく
Rubbermaid woiler			1	truch	
discolored brown courtain	panel			trass	Mr.
Empty CD Cases	5			trush	
laptop bags	multiple			trash	
funuy folder	multiple			trasn	
broken shredder				trash	
3 ping bindurs	<i>5</i>			Abnocka	
stray may of flat	5			donated	
ESU 817	30			donateci	
Pock Cty Courthouse	20		ţ	donated	