



Health Department

BOH Packet

**NORTH CENTRAL DISTRICT HEALTH DEPARTMENT (NCDHD)
BOARD OF HEALTH MEETING AGENDA
NCDHD 422 East Douglas Street, O'Neill, Nebraska 68763**

*(Agenda kept current up to Twenty-Four hours at the NCDHD office)
(Open Meeting Law Act is available during the meeting)*

Friday, January 27, 2023 – 10:30 AM

- I. Call to order and roll call (introductions of non-Board Members in attendance).**
- II. Notification of Open Meeting Law**
- III. Comments or additions to the agenda**
- IV. Approval of Agenda**
The board of Health reserves the right to add items to this agenda that are emergency in nature as described in Nebraska Revised Statute § 84-1411.
- V. Approval of previous meeting minutes**
- VI. Financial Reports**
 - a. July
 - b. August
 - c. September
 - d. October
 - e. November
 - f. December
- VII. Previous Business**
 - a. ARPA Funds
 - b. 2021 Single Audit
 - c. BOH request for Audit
- VIII. New Business**
 - a. Annual Meeting
 - b. PTO/ accrual policy Review
 - c. Statement letter requesting change of status for state/federal funders
 - d. By Laws
 - e. Program Updates
 - f. Review and Approve Community Health Assessment/Community Health Improvement Plan
 - g. Invoices
- IX. Comments from the Board/Public**

X. Adjournment

*This meeting is open to the public as directed by the open meeting laws of Nebraska.
A current agenda may be viewed at North Central District Health Department, 422
East Douglas Street, O'Neill, Nebraska.*

Questions: Please contact Elizabeth Parks, Interim Director (402)336-2406

North Central District Health Department

Board of Health Meeting Minutes

Thursday, December 22, 2022

The special meeting of the North Central district Health Department (NCDHD) Board of Health (BoH) was held at NCDHD, located at 422 East Douglas Street, O’Neill, NE at 1:00 p.m. on the 22nd day of December 2022.

Notice of the meeting was given in advance thereof to the County Clerks, local newspapers and simultaneously given to all board members with the agenda communicated in advance. All proceedings hereafter shown were taken while the convened meeting was open to the attendance of the public.

I. Call to order and roll call (introductions of non-Board members in attendance)

Called to order at 1:33 p.m.

Roll Call Vote:

In person- Kelly Kalkowski-BOH, Denise Pribil-BOH, Elizabeth Parks-Interim Director, Charissa Sladek-Office Manager

Virtual- Dennis Bauer-BOH, Dustin Breiner-BOH, Doug Fox-BOH, Gary Hilkemann-BOH, Wade Hollenbeck-BOH, Kevin Mackeprang-BOH, Dr. Ron Morse-BOH, Carol Plate-BOH, Dean Smith-BOH, James Ward-BOH, Jennifer Booker-Public Health Nurse

II. Notification of Open Meeting Law

III. Comments or additions to the agenda

IV. Approval of Agenda *(The Board of Health reserves the right to add items to this agenda that are emergency in nature as described in Nebraska Revised Statute.)*

Dean Smith made a motion to approve the agenda

Doug Fox seconded the motion

Roll Call Vote:

All in favor- aye- D. Bauer, D. Breiner, D. Fox, G. Hilkemann, K. Kalkowski, K. Mackeprang, Dr. Morse, C. Plate, D. Pribil, D. Smith, J. Ward

Nay- none

V. Approval of previous meeting minutes

Friday, Oct 28 meeting minutes.

Carol Plate motioned to approve October 28 meeting minutes.

Dustin Breiner seconded the motion.

Roll Call vote-

All in favor - Aye- D. Bauer, D. Breiner, D. Fox, G. Hilkemann, K. Kalkowski, K. Mackeprang, Dr. Morse, C. Plate, D. Pribil, D. Smith, J. Ward.

Nay- none

Abstain- Wade Hollenbeck

VI. Previous Business

a. Discussion/action on Health Director position

Discussion was held regarding candidates from the December 9th interviews.

Overview of candidates discussed.

James Ward motioned to offer NCDHD Health Director position to Heidi Kuklis with base salary to include full benefits, with a probationary period with raise possible following discussed. Douglas Fox seconded the motion. Also granted authorization to Board President K. Kalkowski, to allow a 5% leeway if counteroffer is given by candidate. The original motion was amended to include the 5% negotiable power.

Roll Call vote:

Aye-D. Bauer, D. Breiner, D. Fox, G. Hilkemann, W. Hollenbeck, K. Kalkowski, K. Mackeprang, Dr. Morse, C. Plate, D. Pribil, D. Smith, J. Ward

Nay- none

Abstain- none

VII. Comments from the Board/Public

VIII. Adjournment

G. Hilkemann motioned to adjourn the meeting at 1:25 p.m.

J. Ward seconded the motion.

All in favor- aye: All

Nay- none

Abstain- none

Present	Board Member	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Yes	Dean Smith, Antelope County Supervisor	A	A	A	A
	Antelope County Citizen-Vacant				
	Les Purviance, Boyd County Supervisor				
Yes	Kelly Kalkowski, Boyd County Citizen	A	A	A	A
Yes	Dennis Bauer, Brown County Commissioner	A	A	A	A
Yes	Carol Plate, Brown County Citizen	A	A	A	A
Yes	James Ward, Cherry County Commissioner	A	A	A	A
	Kyle Kellum, Cherry County Citizen				
Yes	Dustin Breiner, Holt County Supervisor	A	A	A	A
Yes	Denise Pribil, Holt County Citizen	A	A	A	A

	Corey Nilson, Keya Paya County Commissioner				
	Keya Paha County Citizen-Vacant				
Yes	Kevin Mackeprang, Knox County Supervisor	A	A	A	A
	Knox County Citizen-Vacant				
	Tom Kuther, Pierce County Commissioner				
Yes	Gary Hilkemann, Pierce County Spirited Citizen	A	A	A	A
Yes	Wade Hollenbeck, Rock County Commissioner	A	X	A	A
Yes	Doug Fox, Rock County Citizen	A	A	A	A
	Kenneth Tusha, DDS				
Yes	Ronald Morse, MD	A	A	A	A
	<u>Guests</u>				

Elizabeth Parks-NCDHD Interim Director, Jennifer Booker-NCDHD Public Health Nurse, Charissa Sladek-NCDHD Office Manager

Motion 1: Approval of agenda

Motion 2: Approval of previous minutes

Motion 3: Approval of new NCDHD Health Director

Motion 4: Meeting Adjournment

A=Aye

N=Nye

X=Abstain



Monthly Financial Package

North Central District Health Department
July 2022

Balance Sheet

BALANCE SHEET (\$)	Jul 2022	Jul 2021	Change
ASSETS			
Cash & Equivalents	391,846	95,441	296,406
Total Current Assets	391,846	95,441	296,406
Fixed Assets	383,347	369,442	13,905
Total Non-Current Assets	383,347	369,442	13,905
Total Assets	775,193	464,883	310,310
LIABILITIES			
Accounts Payable	1,662	22,381	(20,719)
Other Current Liabilities	34,211	17,634	16,577
Total Current Liabilities	35,873	40,015	(4,142)
Total Non-Current Liabilities	0	0	0
Total Liabilities	35,873	40,015	(4,142)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	68,215	(88,055)	156,270
Other Equity	208,476	210,248	(1,772)
Total Equity	739,320	424,868	314,452
Total Liabilities & Equity	775,193	464,883	310,310

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

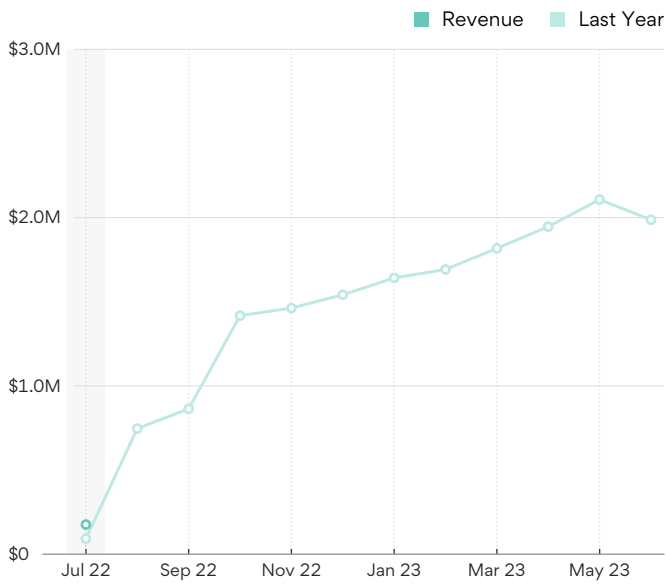
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable.

Income Statement

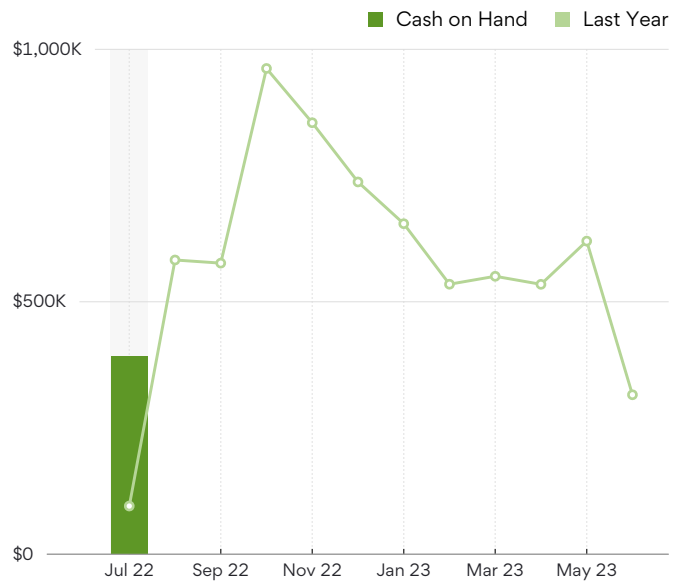
PROFIT & LOSS	Jul 2022	Jul 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$176,243	\$92,319	\$176,243	\$92,319
Other	\$13	\$0	\$13	\$0
Total Revenue	\$176,256	\$92,319	\$176,256	\$92,319
Expenses				
Payroll Expenses	\$70,019	\$92,825	\$70,019	\$92,825
Equipment & Maintenance	\$3,076	\$1,105	\$3,076	\$1,105
Communications	\$14,522	\$24,238	\$14,522	\$24,238
Contracts & Services	\$4,395	\$9,885	\$4,395	\$9,885
Health Resources & Supplies	\$3,391	\$21,634	\$3,391	\$21,634
Insurance	\$1,575	\$4,108	\$1,575	\$4,108
Office	\$2,470	\$17,092	\$2,470	\$17,092
Professional Services	\$8,878	\$110	\$8,878	\$110
Rent	\$375	\$877	\$375	\$877
Travel	(\$2,098)	\$2,225	(\$2,098)	\$2,225
Other	\$1,437	\$6,276	\$1,437	\$6,276
Total Expenses	\$108,041	\$180,374	\$108,041	\$180,374
Operating Profit	\$68,215	(\$88,055)	\$68,215	(\$88,055)
Net Income	\$68,215	(\$88,055)	\$68,215	(\$88,055)

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$106,716
General Funds	\$25,502
Region 4 Behavioral Health	\$11,513
Infrastructure Funds	\$11,343
Miscellaneous Reimbursements	\$8,253
Per Capita Funds	\$6,083
United Health Care	\$3,333
BlueCross BlueShield of NE	\$1,136
Flu Vaccinations 803	\$951
TestNE Income	\$790

Top 10 Expenses (2022/2023 YTD)

Wages	\$56,909
Media Advertising	\$12,124
18% Benefit / 403 B-7	\$8,173
Professional Services	\$4,857
Contracts & Services	\$4,395
Accounting Services	\$4,000
Social Security Company	\$3,658
Leased Vehicle	\$2,956
Health Resources & Supplies	\$2,164
Communications	\$1,733



Monthly Financial Package

North Central District Health Department
August 2022

Balance Sheet

BALANCE SHEET (\$)	Aug 2022	Aug 2021	Change
ASSETS			
Cash & Equivalents	372,707	582,766	(210,059)
Total Current Assets	372,707	582,766	(210,059)
Fixed Assets	383,347	377,895	5,452
Total Non-Current Assets	383,347	377,895	5,452
Total Assets	756,054	960,661	(204,607)
LIABILITIES			
Accounts Payable	3,710	5,164	(1,454)
Other Current Liabilities	5,732	6,726	(994)
Total Current Liabilities	9,442	11,891	(2,449)
Total Non-Current Liabilities	0	0	0
Total Liabilities	9,442	11,891	(2,449)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	76,393	435,848	(359,455)
Other Equity	207,590	210,248	(2,658)
Total Equity	746,612	948,771	(202,159)
Total Liabilities & Equity	756,054	960,661	(204,607)

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

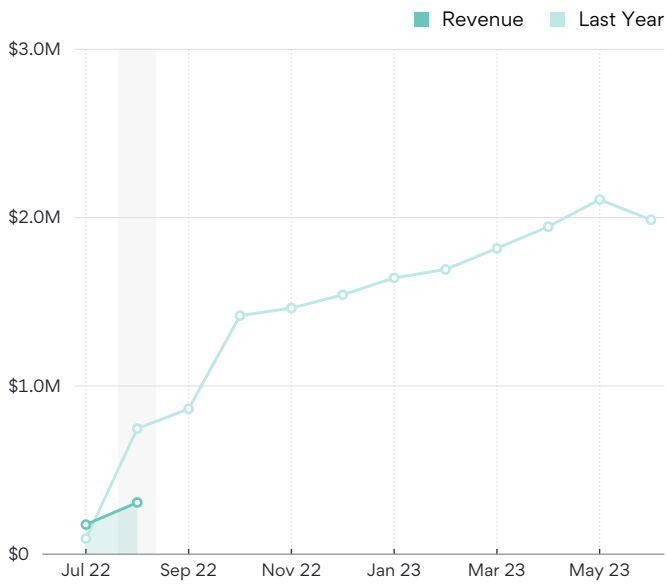
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable.

Income Statement

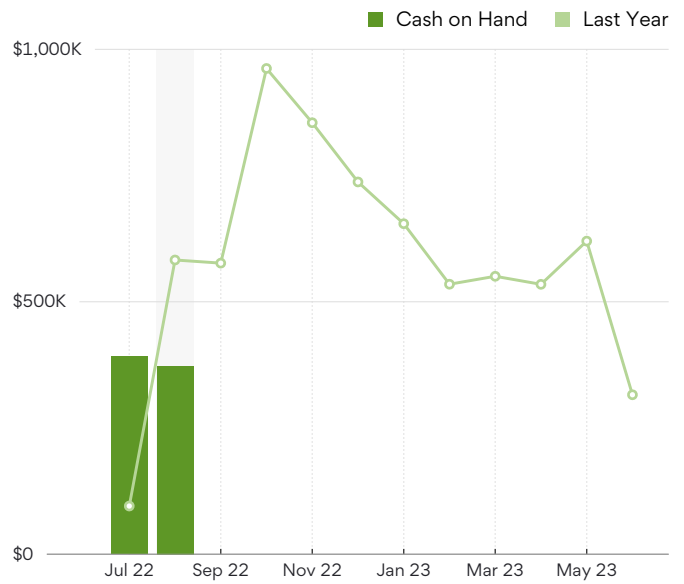
PROFIT & LOSS	Aug 2022	Aug 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$131,104	\$654,360	\$307,347	\$746,679
Other	\$23	\$0	\$36	\$0
Total Revenue	\$131,126	\$654,360	\$307,383	\$746,679
Expenses				
Payroll Expenses	\$59,669	\$81,624	\$129,689	\$174,449
Equipment & Maintenance	\$607	\$2,442	\$3,683	\$3,547
Communications	\$4,713	\$6,152	\$19,235	\$30,390
Contracts & Services	\$43,900	\$12,641	\$48,294	\$22,525
Health Resources & Supplies	\$0	\$8,583	\$3,391	\$30,217
Program Pledges	\$0	\$400	\$0	\$400
Insurance	\$4,182	\$0	\$5,757	\$4,108
Office	\$3,192	\$7,940	\$5,662	\$25,032
Professional Services	\$2,200	\$4,080	\$11,078	\$4,190
Rent	\$75	\$375	\$450	\$1,252
Travel	\$2,907	\$1,734	\$809	\$3,959
Other	\$1,504	\$4,487	\$2,941	\$10,763
Total Expenses	\$122,949	\$130,457	\$230,990	\$310,831
Operating Profit	\$8,178	\$523,903	\$76,393	\$435,848
Net Income	\$8,178	\$523,903	\$76,393	\$435,848

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$233,104
General Funds	\$51,004
Infrastructure Funds	\$22,685
Per Capita Funds	\$12,166
Region 4 Behavioral Health	\$11,513
Miscellaneous Reimbursements	\$8,253
United Health Care	\$3,333
BlueCross BlueShield of NE	\$1,136
Flu Vaccinations 803	\$951
TestNE Income	\$790

Top 10 Expenses (2022/2023 YTD)

Wages	\$105,138
Contracts & Services	\$48,294
Media Advertising	\$16,693
18% Benefit / 403 B-7	\$15,087
Social Security Company	\$6,768
Professional Services	\$6,407
Accounting Services	\$4,650
Insurance	\$3,277
Leased Vehicle	\$2,956
Commercial Auto	\$2,480



Monthly Financial Package

North Central District Health Department
September 2022

Balance Sheet

BALANCE SHEET (\$)	Sep 2022	Sep 2021	Change
ASSETS			
Cash & Equivalents	348,944	576,550	(227,607)
Total Current Assets	348,944	576,550	(227,607)
Fixed Assets	383,347	381,795	1,551
Total Non-Current Assets	383,347	381,795	1,551
Total Assets	732,290	958,345	(226,055)
LIABILITIES			
Accounts Payable	3,280	3,349	(69)
Other Current Liabilities	78	6,960	(6,882)
Total Current Liabilities	3,359	10,309	(6,951)
Total Non-Current Liabilities	0	0	0
Total Liabilities	3,359	10,309	(6,951)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	58,713	435,113	(376,400)
Other Equity	207,590	210,248	(2,658)
Total Equity	728,931	948,036	(219,105)
Total Liabilities & Equity	732,290	958,345	(226,055)

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

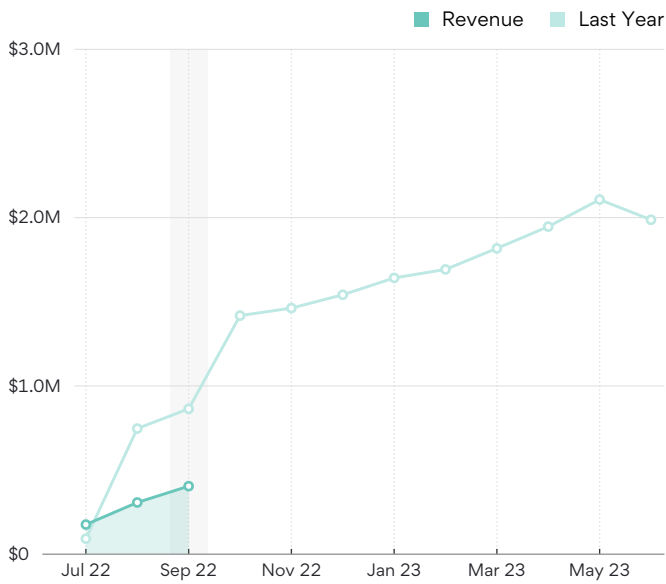
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable.

Income Statement

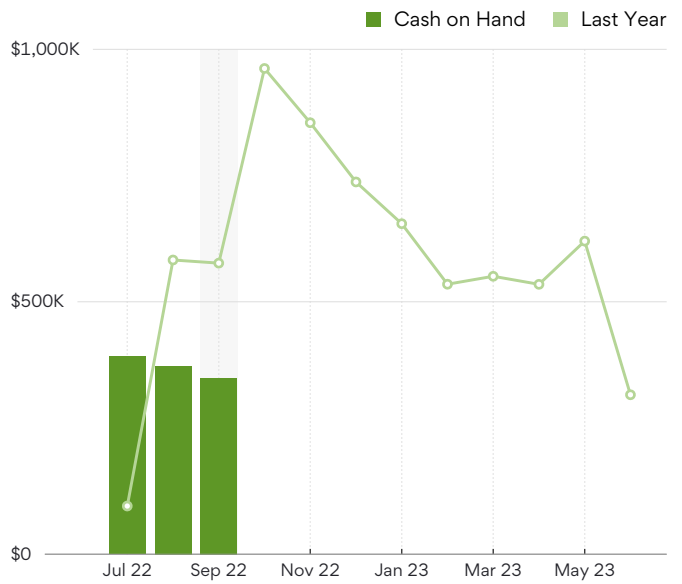
PROFIT & LOSS	Sep 2022	Sep 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$96,911	\$117,087	\$404,258	\$863,766
Other	\$0	\$21	\$36	\$21
Total Revenue	\$96,911	\$117,108	\$404,294	\$863,787
Expenses				
Payroll Expenses	\$71,279	\$86,696	\$200,967	\$261,145
Equipment & Maintenance	\$2,079	\$4,545	\$5,763	\$8,092
Communications	\$7,449	\$2,127	\$26,684	\$32,517
Contracts & Services	\$14,083	\$15,771	\$62,378	\$38,297
Health Resources & Supplies	\$1,526	(\$4,359)	\$4,917	\$25,858
Program Pledges	\$0	\$0	\$0	\$400
Insurance	\$1,264	\$0	\$7,022	\$4,108
Office	\$3,624	\$6,783	\$9,287	\$31,816
Professional Services	\$2,063	\$1,279	\$13,140	\$5,469
Rent	\$75	\$550	\$525	\$1,802
Travel	\$9,409	\$3,234	\$10,218	\$7,193
Other	\$1,740	\$1,215	\$4,681	\$11,978
Total Expenses	\$114,592	\$117,843	\$345,582	\$428,674
Operating Profit	(\$17,680)	(\$735)	\$58,713	\$435,113
Net Income	(\$17,680)	(\$735)	\$58,713	\$435,113

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$277,924
General Funds	\$76,506
Infrastructure Funds	\$34,028
Per Capita Funds	\$18,249
HRSA Grant Funds	\$13,530
Region 4 Behavioral Health	\$11,513
Miscellaneous Reimbursements	\$8,253
United Health Care	\$3,333
Nebraska DHHS Funding	\$1,396
BlueCross BlueShield of NE	\$1,176

Top 10 Expenses (2022/2023 YTD)

Wages	\$159,586
Contracts & Services	\$62,378
18% Benefit / 403 B-7	\$22,116
Media Advertising	\$21,488
Social Security Company	\$10,460
Professional Services	\$8,470
Lodging	\$8,092
Accounting Services	\$4,650
Payroll Expenses	\$4,544
Insurance	\$4,542



Monthly Financial Package

North Central District Health Department
October 2022

Balance Sheet

BALANCE SHEET (\$)	Oct 2022	Oct 2021	Change
ASSETS			
Cash & Equivalents	377,096	962,096	(585,000)
Total Current Assets	377,096	962,096	(585,000)
Fixed Assets	383,347	384,997	(1,651)
Total Non-Current Assets	383,347	384,997	(1,651)
Total Assets	760,442	1,347,093	(586,651)
LIABILITIES			
Accounts Payable	(6,466)	12,135	(18,602)
Other Current Liabilities	(1,044)	7,498	(8,542)
Total Current Liabilities	(7,510)	19,634	(27,144)
Total Non-Current Liabilities	0	0	0
Total Liabilities	(7,510)	19,634	(27,144)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	97,734	814,536	(716,803)
Other Equity	207,590	210,248	(2,658)
Total Equity	767,953	1,327,459	(559,507)
Total Liabilities & Equity	760,442	1,347,093	(586,651)

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

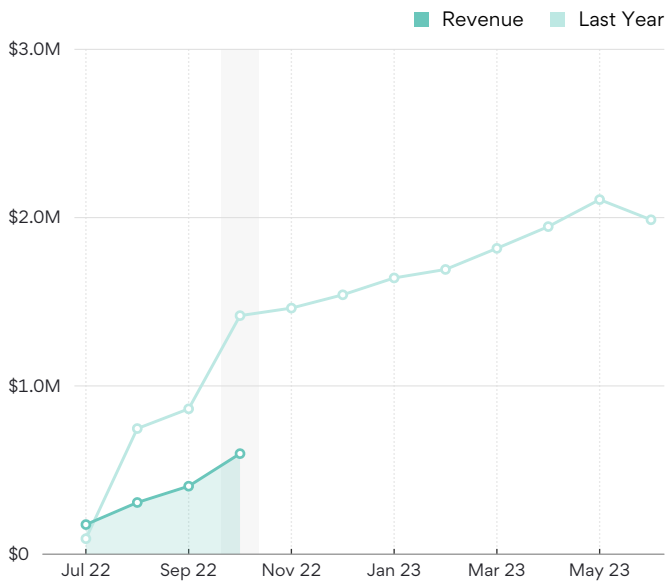
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable.

Income Statement

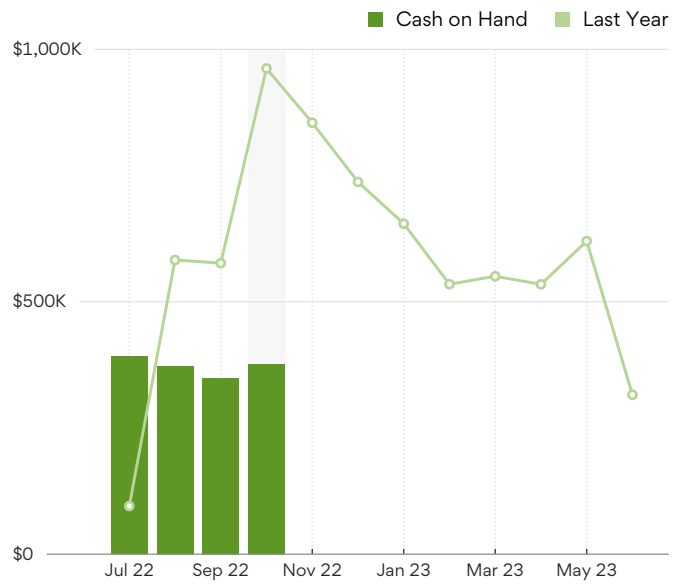
PROFIT & LOSS	Oct 2022	Oct 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$193,285	\$553,843	\$597,543	\$1,417,609
Other	\$65	\$0	\$101	\$21
Total Revenue	\$193,350	\$553,843	\$597,644	\$1,417,631
Expenses				
Payroll Expenses	\$81,696	\$89,505	\$282,663	\$350,650
Equipment & Maintenance	\$17,551	\$3,258	\$23,313	\$11,350
Communications	\$9,422	\$11,081	\$36,106	\$43,598
Contracts & Services	\$30,635	\$11,099	\$93,013	\$49,396
Health Resources & Supplies	\$432	\$40,175	\$5,349	\$66,032
Program Pledges	\$0	\$0	\$0	\$400
Insurance	\$2,309	\$0	\$9,331	\$4,108
Office	\$4,236	\$5,896	\$13,522	\$37,712
Professional Services	\$0	\$4,362	\$13,140	\$9,831
Rent	\$0	\$1,275	\$525	\$3,077
Travel	\$2,344	\$1,785	\$12,562	\$8,979
Other	\$5,704	\$5,984	\$10,385	\$17,962
Total Expenses	\$154,329	\$174,420	\$499,910	\$603,094
Operating Profit	\$39,021	\$379,423	\$97,734	\$814,536
Net Income	\$39,021	\$379,423	\$97,734	\$814,536

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$427,531
General Funds	\$102,008
Infrastructure Funds	\$45,370
Per Capita Funds	\$24,332
HRSA Grant Funds	\$13,530
Region 4 Behavioral Health	\$11,513
Miscellaneous Reimbursements	\$8,253
United Health Care	\$3,333
Nebraska DHHS Funding	\$1,396
BlueCross BlueShield of NE	\$1,176

Top 10 Expenses (2022/2023 YTD)

Wages	\$227,727
Contracts & Services	\$93,013
18% Benefit / 403 B-7	\$29,585
Media Advertising	\$28,415
Building Maintenance	\$17,307
Social Security Company	\$14,879
Lodging	\$8,586
Professional Services	\$8,470
Insurance	\$6,851
Communications	\$6,231



Monthly Financial Package

North Central District Health Department
November 2022

Balance Sheet

BALANCE SHEET (\$)	Nov 2022	Nov 2021	Change
ASSETS			
Cash & Equivalents	546,120	854,634	(308,514)
Total Current Assets	546,120	854,634	(308,514)
Fixed Assets	383,347	384,997	(1,651)
Total Non-Current Assets	383,347	384,997	(1,651)
Total Assets	929,467	1,239,631	(310,164)
LIABILITIES			
Accounts Payable	(4,348)	14,012	(18,360)
Other Current Liabilities	0	14,207	(14,207)
Total Current Liabilities	(4,349)	28,219	(32,567)
Total Non-Current Liabilities	0	0	0
Total Liabilities	(4,349)	28,219	(32,567)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	263,597	698,490	(434,893)
Other Equity	207,590	210,248	(2,658)
Total Equity	933,816	1,211,413	(277,597)
Total Liabilities & Equity	929,467	1,239,631	(310,164)

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

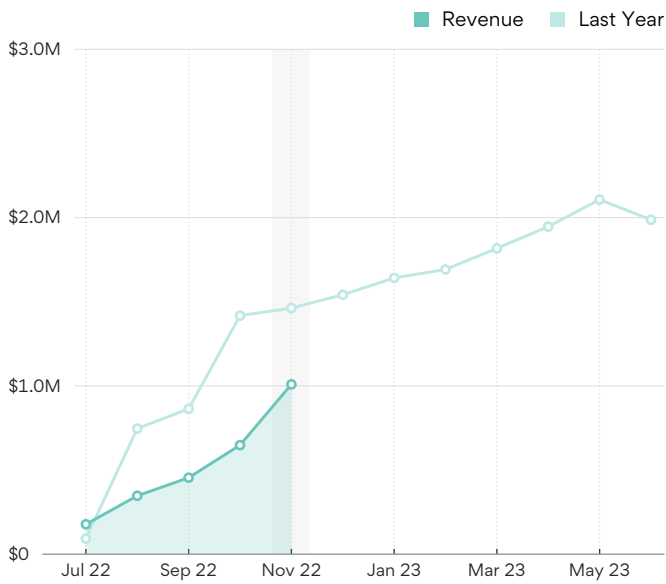
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable (negative due to overpayment).

Income Statement

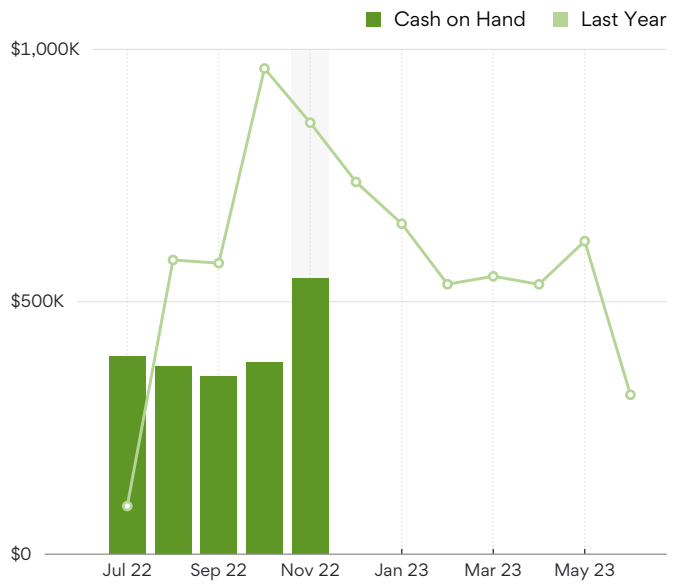
PROFIT & LOSS	Nov 2022	Nov 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$360,884	\$44,787	\$1,009,004	\$1,462,396
Other	\$44	\$4	\$145	\$25
Total Revenue	\$360,928	\$44,790	\$1,009,149	\$1,462,421
Expenses				
Payroll Expenses	\$98,192	\$108,662	\$380,855	\$459,313
Equipment & Maintenance	\$3,278	\$2,835	\$26,592	\$14,185
Communications	\$12,434	\$7,750	\$48,371	\$51,348
Contracts & Services	\$49,521	\$7,212	\$142,534	\$56,607
Health Resources & Supplies	\$22,773	\$14,639	\$75,872	\$80,671
Program Pledges	\$0	\$0	\$0	\$400
Insurance	\$4,004	\$7,336	\$13,335	\$11,444
Office	\$4,392	\$7,107	\$17,914	\$44,818
Professional Services	\$0	\$1,580	\$13,140	\$11,411
Rent	\$0	\$75	\$525	\$3,152
Travel	\$2,268	\$1,420	\$14,879	\$10,398
Other	\$1,150	\$2,221	\$11,536	\$20,183
Total Expenses	\$198,012	\$160,837	\$745,552	\$763,931
Operating Profit	\$162,915	(\$116,047)	\$263,597	\$698,490
Net Income	\$162,915	(\$116,047)	\$263,597	\$698,490

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$631,343
General Funds	\$127,510
Vaccinations and Immunizations	\$114,165
Infrastructure Funds	\$56,713
Per Capita Funds	\$30,415
DFC Funds 745	\$13,530
Region 4 Behavioral Health	\$11,513
Miscellaneous Reimbursements	\$8,277
Miles of Smiles	\$5,750
United Health Care	\$3,333

Top 10 Expenses (2022/2023 YTD)

Wages	\$302,821
Contracts & Services	\$142,534
Media Advertising	\$40,401
18% Benefit / 403 B-7	\$39,811
Tire Disposal Resources and Mat	\$38,164
Social Security Company	\$19,671
Building Maintenance	\$19,107
Health Resources & Supplies	\$14,743
Program Materials	\$13,247
Insurance	\$10,855



Monthly Financial Package

North Central District Health Department
December 2022

Balance Sheet

BALANCE SHEET (\$)	Dec 2022	Dec 2021	Change
ASSETS			
Cash & Equivalents	769,201	737,328	31,873
Total Current Assets	769,201	737,328	31,873
Fixed Assets	383,347	383,205	142
Total Non-Current Assets	383,347	383,205	142
Total Assets	1,152,548	1,120,533	32,015
LIABILITIES			
Accounts Payable	(3,797)	9,027	(12,824)
Other Current Liabilities	3,316	9,294	(5,978)
Total Current Liabilities	(481)	18,321	(18,802)
Total Non-Current Liabilities	0	0	0
Total Liabilities	(481)	18,321	(18,802)
EQUITY			
Retained Earnings	462,629	302,675	159,954
Current Earnings	482,810	589,289	(106,479)
Other Equity	207,590	210,248	(2,658)
Total Equity	1,153,029	1,102,212	50,817
Total Liabilities & Equity	1,152,548	1,120,533	32,015

NOTE: Full detail is available upon request. Email Elizabeth or Natalie (nmiller@eidebailly.com)

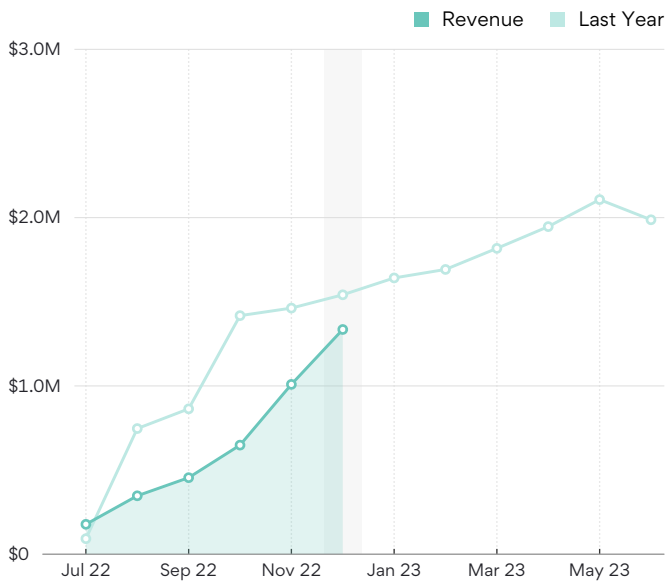
Other current liabilities include payroll liabilities. Accounts payable is the credit card payable (negative due to overpayment).

Income Statement

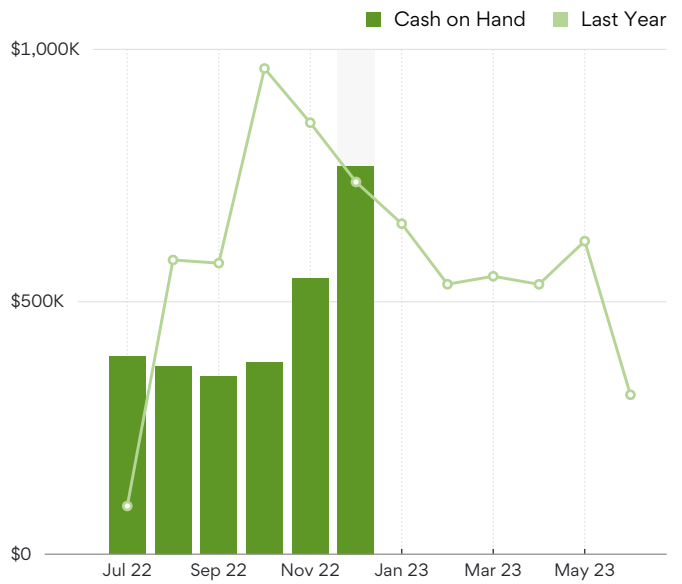
PROFIT & LOSS	Dec 2022	Dec 2021	2022/2023 (YTD)	YTD last year
Revenue				
Program Income	\$326,155	\$79,031	\$1,335,160	\$1,541,427
Other	\$44	\$13	\$189	\$38
Total Revenue	\$326,199	\$79,045	\$1,335,349	\$1,541,466
Expenses				
Payroll Expenses	\$62,867	\$141,354	\$413,534	\$600,667
Equipment & Maintenance	\$1,966	\$3,663	\$28,557	\$17,848
Communications	\$2,361	(\$39)	\$50,732	\$51,309
Contracts & Services	\$21,807	\$15,036	\$188,880	\$71,644
Health Resources & Supplies	\$8,459	\$20,180	\$84,331	\$100,851
Program Pledges	\$0	\$0	\$0	\$400
Insurance	\$1,238	\$0	\$12,264	\$11,444
Office	\$4,310	\$5,518	\$22,225	\$50,336
Professional Services	\$3,249	\$0	\$22,717	\$11,411
Rent	\$0	\$75	\$525	\$3,227
Travel	\$1,004	\$1,497	\$15,882	\$11,895
Other	\$1,356	\$961	\$12,892	\$21,144
Total Expenses	\$108,617	\$188,245	\$852,539	\$952,177
Operating Profit	\$217,582	(\$109,201)	\$482,810	\$589,289
Net Income	\$217,582	(\$109,201)	\$482,810	\$589,289

Charts & Graphics

Cumulative Revenue this financial year



Cash on Hand



Revenue breakdown (2022/2023 YTD)

Program Income	\$914,574
General Funds	\$127,510
Vaccinations and Immunizations	\$114,165
Infrastructure Funds	\$56,713
Nebraska DHHS Funding	\$44,324
Per Capita Funds	\$30,415
DFC Funds 745	\$13,530
Region 4 Behavioral Health	\$11,513
Miscellaneous Reimbursements	\$8,277
Miles of Smiles	\$5,750

Top 10 Expenses (2022/2023 YTD)

Wages	\$327,965
Contracts & Services	\$188,880
18% Benefit / 403 B-7	\$46,628
Media Advertising	\$42,777
Tire Disposal Resources and Mat	\$38,164
Social Security Company	\$22,818
Health Resources & Supplies	\$21,599
Building Maintenance	\$19,595
Professional Services	\$18,047
Program Materials	\$14,129

**North Central NCDHD Health Department
O'Neill, Nebraska
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
AND INDEPENDENT AUDITOR'S REPORTS
For the Year Ended June 30, 2021**

**North Central NCDHD Health Department
O'Neill, Nebraska
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For the Year Ended June 30, 2021**

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INDEPENDENT AUDITOR'S REPORT

Board of Directors
North Central District Health Department

Report on the Schedule of Expenditures of Federal Awards

We have audited the accompanying schedule of expenditures of federal awards of North Central District Health Department for the year ended June 30, 2021, and the related notes.

Management's Responsibility

Management is responsible for the preparation and fair presentation of this financial statement in accordance with the modified cash basis of accounting, which is comprehensive basis of accounting other than generally accepted accounting principles, this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of a financial statement that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on this financial statement based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statement, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statement 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 entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statement.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statement referred to above presents fairly, in all material respects, the expenditures of federal awards of the North Central District Health Department for the year ended June 30, 2021, in accordance with the modified cash basis of accounting.

Porter & Company, PC

Porter & Company, PC
Sioux City, Iowa
March 28, 2022

North Central District Health Department
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the Year Ended June 30, 2021

<u>Federal Grantor/Pass-through Grantor/Program Title</u>	<u>Federal CFDA Number</u>	<u>Federal Expenditures</u>
<u>U.S. Department of the Treasury</u>		
Pass-through Nebraska Emergency Management Agency COVID Relief Funds	21.019	1,181,960
<u>U.S. Environmental Protection Agency</u>		
Pass-through Nebraska Department of Health and Human Services State Indoor Radon Program	66.032	2,848
<u>U.S. Department of Health and Human Resources</u>		
Pass-through Nebraska Department of Health and Human Services Human Resources		
Immunization and Vaccines for Children Programs	93.268	26,445
Public Health Emergency Preparedness	93.069	99,289
Drug-Free Communities Support Program Grants	93.276	78,939
Injury Provention and Control Research State and Community Based Prog	93.136	13,313
Childhood Lead Poisoning Prevention Projects	93.197	2,476
Preventative Health and Health Services Block Grant	93.991	642
National Initiative to Address COVID 19 Disparities	93.391	-
COVID Vaccine Administration	93.U01	64,883
Epidemiology and Laboratory Capacity for Infectious Diseases - West Nile	93.323	4,038
Epidemiology and Laboratory Capacity for Infectious Diseases - Case Man	93.323	11,746
Medical Reserve Corps Small Program Grants	93.008	108,406
Total Pass-through Nebraska Department of Health and Human Services		410,177
Pass-through Community Access to Coordinated Healthcare, Inc. Rural Health Network Development Program	93.912	17,500
Total U.S. Department of Health and Human Services		427,677
Total Expenditures of Federal Awards		\$ 1,612,485

The notes are integral part of the schedule of expenditures of federal awards.

North Central NCDHD Health Department
O'Neil, Nebraska
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
For the year ended June 30, 2021

NOTE A. BASIS OF PRESENTATION

The accompanying schedule of expenditures of federal awards (the Schedule) includes the federal grant activity of North Central NCDHD Health Department under programs of the federal government for the year ended June 30, 2021. The information in this schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of North Central NCDHD Health Department, it is not intended to and does not present the financial position, changes in net assets, or cash flows of NCDHD

NOTE B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. The cash basis of accounting only recognizes cash and no liabilities are recognized. All transactions are recognized as either cash receipts or cash disbursements, and noncash transactions are not recognized. The modifications to the cash basis are to recognize transactions from credit cards and payroll liabilities.

NOTE C. EXPENDITURES

The federal expenditures listed in the Schedule generally are the expenditures recorded to that program with the accounting records except for the following:

Immunization and Vaccines for Children: The expenditures recognized were \$30,744, the expenditures reported was limited to the award amount of \$26,445.

Public Health Emergency Preparedness: The expenditures recognized were \$99,825, the expenditures reported was limited to the award amount of \$99,289.

Drug-Free Communities Support Program: The expenditures recognized were \$105,381, the expenditures reported were \$78,939, which was the amount of reimbursement requested by NCDHD through June 30, 2021.

Injury Prevention and Control Research: The expenditures recognized were \$33,185, the expenditures reported were \$13,313 which was the amount of reimbursement received by NCHDC through June 30, 2021.

Preventative Health and Health Services Block Grant: The expenditures recognized were \$538, the expenditures reported were \$642, which was the amount of reimbursement received by NCHDC through June 30, 2021.

COVID Vaccine Administration: The expenditures recognized were \$5,340, the expenditures reported were \$64,883 which was the amount received by NCDHD for June 30, 2021.

COVID Relief Funds: The expenditures recognized were \$1,286,827, the expenditures reported were limited to the award amount of \$1,181,960.

Rural Health Network Development Program: The expenditures recognized were \$0, the expenditures reported were \$17,500, which was the amount of reimbursements received by NCDHD for June 30, 2021.

North Central NCDHD Health Department
O'Neill, Nebraska
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
For the year ended June 30, 2021

SUMMARY OF AUDIT RESULTS

Federal Awards

Internal control over major programs

Material weakness(es) identified? No

Significant deficiencies identified? No

Type of auditor's report issued on compliance for major programs: Unmodified

Any findings disclosed that are required to be reported in accordance 2 CFR section 200.516(a)? No

Major Programs:

COVID Relief Funds (21.019)

Dollar threshold used to distinguish between type A and type B programs: \$750,000

Auditee qualified as low-risk auditee? No

FINDINGS – FINANCIAL STATEMENT AUDIT

None

FINDINGS AND QUESTIONED COSTS – MAJOR FEDERAL AWARD PROGRAMS AUDIT

None



INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM
AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

North Central NCDHD Health Department,
O'Neill, Nebraska

Report on Compliance for Each Major Federal Program

We have audited North Central NCDHD Health Department's (NCDHD) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on NCDHD's major federal program for the year ended June 30, 2021. The NCDHD's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of NCDHD's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance).¹ Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about NCDHD's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of NCDHD's compliance.

Opinion on Each Major Federal Program

In our opinion, NCDHD complied in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended June 30, 2021.

Report on Internal Control over Compliance

Management of NCDHD is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered NCDHD's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of NCDHD's internal control over compliance.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Porter & Company, PC



Sioux City, Iowa

March 28, 2022

North Central District Health Department -new

Profit and Loss

July - December, 2022

	TOTAL
Income	
4150 Program Income	914,573.95
4150.04 Mileage Reimbursement	112.52
4150.09 Miles of Smiles	5,750.00
4150.12 Fit Testing	375.00
4150.13 Personnel ID Badges 410	24.93
4150.15 Miscellaneous Reimbursments	8,276.72
4150.41 Radon Kits	8.47
4150.69 Vaccinations and Immunizations	114,164.62
4150.72 General Immunizations	98.04
Total 4150.69 Vaccinations and Immunizations	114,262.66
4152 BlueCross BlueShield of NE	1,175.82
4156 Medica	780.74
4160 Nebraska DHHS Funding	44,323.70
4160.05 Infrastructure Funds	56,712.97
4160.06 Per Capita Funds	30,415.14
4160.07 General Funds	127,510.00
4203 TestNE Income	790.00
Total 4160 Nebraska DHHS Funding	259,751.81
4161 Region 4 Behavioral Health	11,512.55
4162 SAMHSA Funds	
4162.01 DFC Funds 745	13,530.25
Total 4162 SAMHSA Funds	13,530.25
4163 UMR	
4163.02 General Immunizations	542.12
Total 4163 UMR	542.12
4164 United Health Care	3,333.00
4164.01 Flu Vaccinations 803	951.31
Total 4164 United Health Care	4,284.31
Total 4150 Program Income	1,334,961.85
4173 Indirect Cost Reimbursement	198.50
4200 Interest Income	188.65
Total Income	\$1,335,349.00
GROSS PROFIT	\$1,335,349.00
Expenses	
6001 Bank Service Charges	1,785.73
6020 Communications	5,893.92
6021 Media Advertising	42,777.39
6022 Postage	345.16
6023 Phone	665.29

North Central District Health Department -new

Profit and Loss
July - December, 2022

	TOTAL
6024 Publications & Marketing	1,050.00
Total 6020 Communications	50,731.76
6030 Contracts & Services	188,879.60
6031 Dues and Subscriptions	1,520.21
6032 Health Resources & Supplies	21,599.13
6032.01 Flu Vaccination Clinics	
6032.12 Flu Vaccination Health Resource	9,391.40
Total 6032.01 Flu Vaccination Clinics	9,391.40
6032.06 Private Vaccinations	-125.74
6032.09 Miles of Smiles Health Resource	
6032.91 Miles of Smiles Supplies	1,173.37
Total 6032.09 Miles of Smiles Health Resource	1,173.37
6032.18 Tire Disposal Resources and Mat	38,163.88
Total 6032 Health Resources & Supplies	70,202.04
6034 Fees	2,255.14
6035 Building Maintenance	19,594.86
6036 Program Materials	14,129.27
6040 Education & Training	385.00
6050 Unrestricted Funds	
6050.01 Cost Allocation	0.00
Total 6050 Unrestricted Funds	0.00
6055 Insurance	9,783.50
6057 Commercial Auto	2,480.00
Total 6055 Insurance	12,263.50
6061 Leased Vehicle	8,869.14
6070 Office	10,068.95
6071 Copies and Prints	772.66
6073 Consumable Supplies	5,875.77
6076 Utilities	5,507.21
Total 6070 Office	22,224.59
6080 Personnel	45.00
6081 Professional Services	18,046.81
6081.01 Accounting Services	4,650.32
6081.06 Background Checks	20.33
Total 6081 Professional Services	22,717.46
6082 Rent	
6082.02 Rental Expense	225.00
6082.04 Building Rent	300.00
Total 6082 Rent	525.00
6087 Subscriptions	4,927.77

North Central District Health Department -new

Profit and Loss

July - December, 2022

	TOTAL
6090 Travel	2,063.74
6091 Department Vehicle	
6091.01 Fuel	679.14
6091.03 Repairs and Maintenance	-855.81
Total 6091 Department Vehicle	-176.67
6092 Personal Mileage	621.27
6093 Meeting & Conference	2,345.74
6093.01 Lodging	8,585.81
6093.02 Meals	1,659.12
6093.03 Registration Fees	450.00
6093.05 Airfare	333.20
Total 6093 Meeting & Conference	13,373.87
6095 Rental Vehicle	93.20
Total 6090 Travel	15,975.41
6560 Payroll Expenses	4,544.16
6560.00 Federal Unemployment	184.41
6560.01 Social Security Company	22,818.49
6560.02 Medicare - Company	5,336.50
6560.03 Nebraska Unemployment	495.11
6560.04 Wages	327,965.40
6560.49 18% Benefit / 403 B-7	46,628.16
6560.60 Payroll Processing Fee	1,892.65
Total 6560.04 Wages	376,486.21
6560.06 Benefits	297.50
6560.61 Dental/Life - Employer	2,951.71
6560.62 Wellness Benefits	375.00
Total 6560.06 Benefits	3,624.21
Total 6560 Payroll Expenses	413,489.09
99999 Miscellaneous Expenses	1,603.05
Unapplied Cash Bill Payment Expense	375.00
Total Expenses	\$852,498.62
NET OPERATING INCOME	\$482,850.38
Other Expenses	
8010 Other Expenses	40.00
Total Other Expenses	\$40.00
NET OTHER INCOME	\$ -40.00
NET INCOME	\$482,810.38



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

<u>Policy:</u>	4-90
<u>Subject:</u>	Paid Time Off (PTO)
<u>Scope:</u>	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 <u>Service</u>	PTO Hours <u>per Year</u>	Accrual Hours <u>Per Pay Period</u>	Maximum PTO <u>Accrual Balance</u>
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.



Program Updates

➤ Program Reporting:

- Since 12/6/2022, \$295,221.98 dollars have been billed.

<u>TOTAL:</u>	<u>CLASS:</u>	<u>DATE BILLED:</u>
▪ \$4,579.47	620	12/22/2022
▪ \$12,356.73	726	1/5/2023
▪ \$23,726.18	896	1/11/2023
▪ \$8,717.82	741	1/13/2023
▪ \$2,948.32	736	1/13/2023
▪ \$1,425.19	315	1/16/2023
▪ \$34,169.24	400	1/18/2023
▪ \$145,871.97	449	1/23/2023
▪ \$7,335.73	895	1/23/2023
▪ \$54,091.33	745	1/24/2023

➤ 315 Accreditation:

- NCDHD's Annual Report is due to E-PHAB 3/31/23
- The Community Health Assessment Final Draft is ready to be approved by the Board



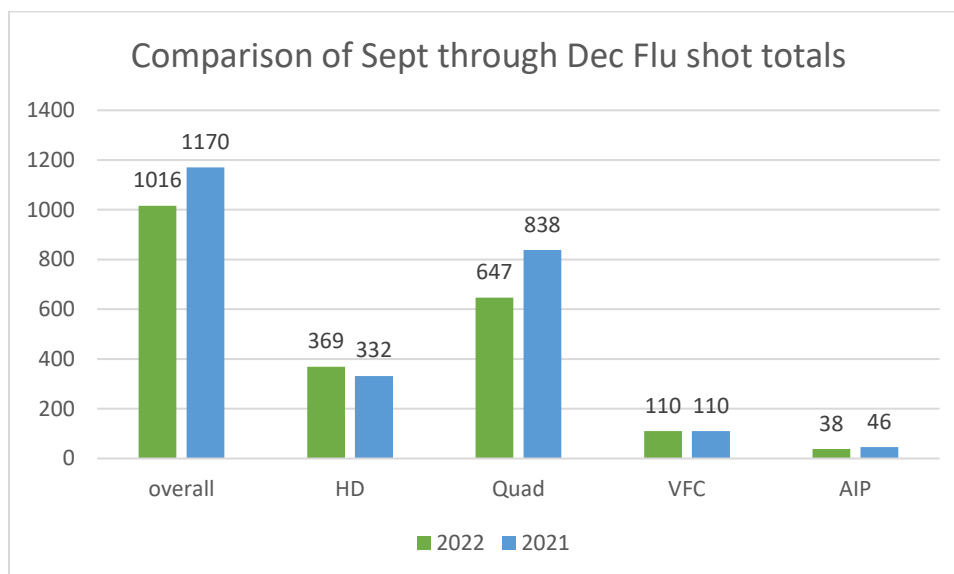
2022 Immunization Program Report for Board of Health, January 2023



Immunization Program Staff: Carolyn Gotsch, RN-Public Health Nurse, Deb Thrasher, LPN-Public Health Nurse, Kari Moeller-Health Billing (not pictured), Jennifer L. Booker, RN/BSN-Vaccination Coordinator

Influenza vaccine season

51 Flu Shot clinics were held in the fall of 2022, 4 clinics were canceled in December due to the weather. Although flu shot season usually lasts September through November for NCDHD, with the continuation of COVID-19 clinics, flu shots were offered at all NCDHD clinics from September through April. A snapshot of clinic numbers for fall compared with 2021 can be seen in the graph.



Numbers overall are down again this year; this is a trend seen nationally. We have given more HD so far this year than we have in the past 5 years.

Vaccine is reserved for 2023, with most of the vaccine coming from GSK (Glaxo Smith Kline) for the regular Quad vaccine (what is given to everyone 6 mon to 64 years), and High Dose (HD) from Sanofi Pasteur. The amount of HD was increased from last year, we did allow ELVPHD to purchase 60 doses from us when they were short, but we have had to order an extra 20 doses twice this year due to increased numbers. We did reserve a small amount of regular Quad from Sanofi Pasteur again this year, although we did decrease the reservation from 300 doses to 200 doses. This worked out for us in 2022 as our Sanofi order came earlier than GSK, so we were able to start carrying both vaccines at all clinics the second week of September. The decision to reserve and purchase some Quad from Sanofi came about in 2021 when we were notified of changes in the amount of vaccine that could be returned for full credit from GSK. This allowed us to have enough vaccine to run clinics as planned but not have a huge amount of overage that would need returned.

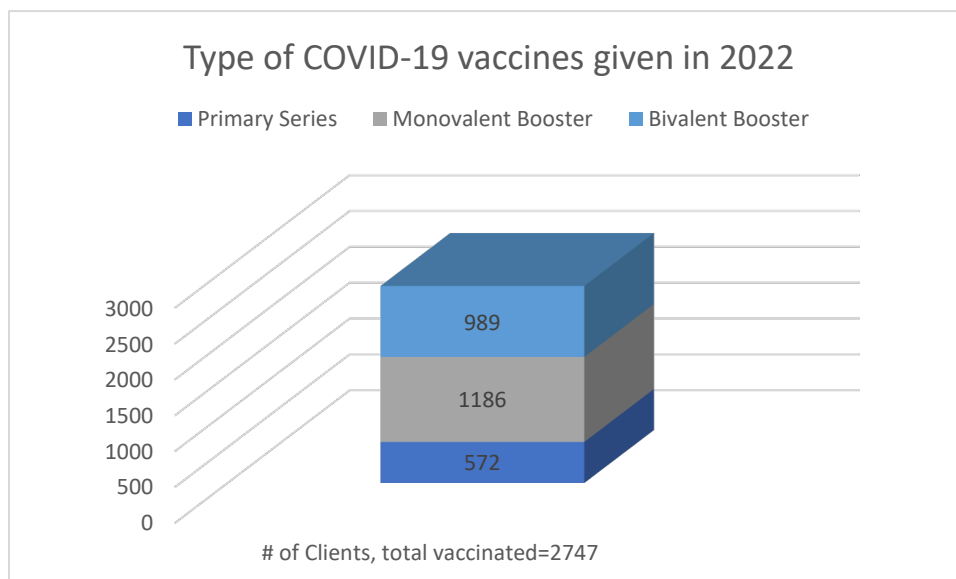
COVID-19 Vaccinations

NCDHD also continued with COVID-19 vaccinations in 2022. There were several changes to the vaccine schedule and new vaccines approved by the FDA:

- January-Booster doses were expanded to include children 12-15 years, booster time limit was shortened to 5 months, and a 3rd primary dose was added for children 5-11 years that are immunocompromised.

- March/April-a 2nd booster dose was approved for older people and immunocompromised people
- May-a Pfizer booster for 5-11 year old category
- June-a Moderna primary vaccine series for 6-11 year old's and those over 12, and both a Moderna and Pfizer vaccine series for 6 mon-4/5 year old's
- September-a Bivalent Booster for people over 18 for both Pfizer and Moderna.
- October-a Bivalent Booster for the 5–18 year category
- December-a Bivalent Booster for the 6 mon-4/5 year category

These changes have made it sometimes challenging for staff to keep up with current recommendations, and adjustments to our clinic procedures have had to be made to prevent medication errors. These adjustments have culminated in our current system of a divided tray with cards that detail all the information needed to administer these vaccines to the correct ages with the correct dose.



NCDHD has continued to support the nursing homes and assisted living facilities in our district in their efforts to vaccinate staff and residents through our relinquishment program. Nursing homes, assisted living facilities, home health agencies and other entities with qualified personal that serve our homebound residents can request COVID-19 vaccines through our department on days that there is a clinic scheduled. NCDHD staff then relinquishes vials or individual doses or a combination, depending on how many are needed, to the facility for their staff to administer. NCDHD provides the vaccinations, paperwork and follow up support for these operations. This program has been utilized by 7 entities consistently the last year allowing 216 persons to be up to date on their vaccines. NCDHD also worked with 2 of our Assisted Living Facilities to provide flu vaccinations and COVID-19 vaccinations to their residents on site.

Mobile clinics were continued at several sites based on numbers at clinic and vaccine availability in the communities. Clinics were decreased to every other month in some areas due to declining or inconsistent numbers.

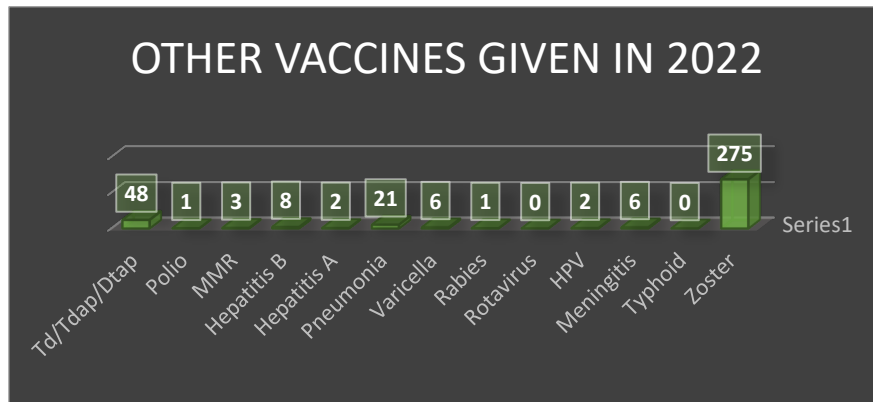
NCDHD Mobile Clinic schedule	
Town/Community	Frequency in 2022
Ainsworth	Monthly
Butte	Monthly
Bloomfield	Every other month
Niobrara	Every other month
Pierce	Every other month
Neligh	Monthly to every other month
Santee	Every other month
Valentine	Monthly

O’Neill clinics were scheduled for Thursdays in the office consistently, this has been very well received by both our staff and the public.

General Immunizations

Mobile clinics were held indoors from January through June 16, then held outdoors at all locations except O’Neill and Ainsworth through the summer and early fall. On October 18, clinics were moved to all indoors again through the end of the year. Outdoor clinics were held utilizing the trailer, making it easy to setup and teardown. This allows us to have some flexibility with scheduling and clinics are run as drive through with participants remaining in their vehicles for the most part. Some locations where an indoor option is not available or the options available do not suit our needs, having the outdoor option makes a huge difference.

In addition to COVID-19 vaccines, all recommended vaccinations for adults and children are offered at O’Neill clinic. At mobile clinics, Shingles, pneumonia, Tdap and flu vaccines are routinely offered, other vaccinations are offered but prior notification is needed. We have been giving a steady number of other vaccinations, with Shingles being the most popular. We have had a handful of children getting caught up on vaccinations that were put on hold during the pandemic.

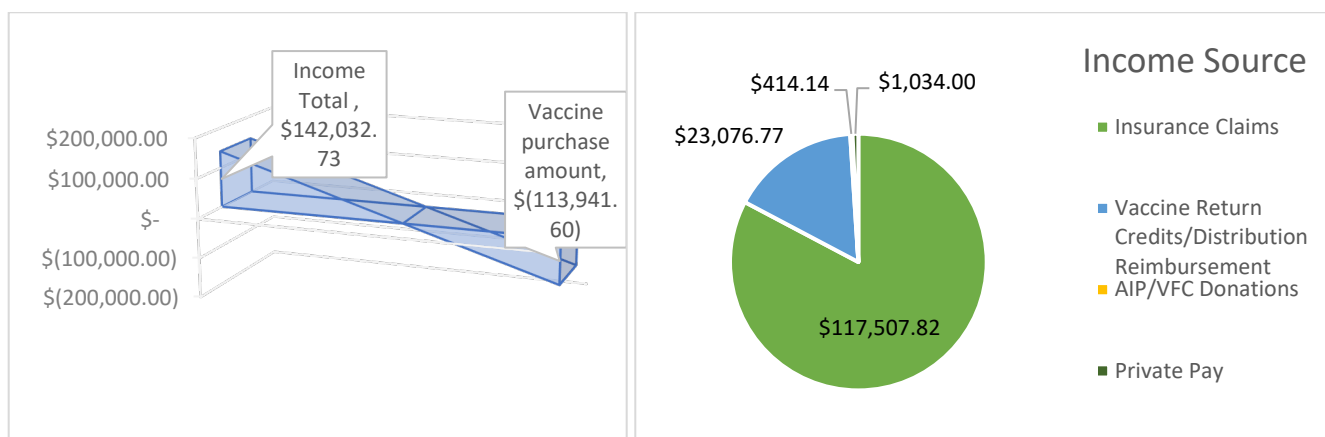


As part of the United Healthcare Funding our program has received, Blood Pressure awareness was offered at our clinics in Valentine and Ainsworth in November and Valentine in December. Cherry County Clinic provided informational handouts and a station was setup to do blood pressure checks for those that were interested. A grant was received from UNMC in October for radio ads that ran on 5 local radio stations through December 15 to raise awareness and combat COVID-19 vaccine hesitancy. Coloring pages with statements to promote

vaccinations of all types were made available at clinics with colors for children and adults. These are provided as a distraction, for children especially, when at clinic while they are waiting before and after their vaccinations.

Another funding opportunity that NCDHD was able to utilize was through the VAC5 funding from the Northeast Nebraska Area Agency on Aging. This funding was contingent on providing credible information about COVID-19 vaccines aimed at persons that were 60 years and older via radio, newspaper, and social media at least once a week and holding COVID-19 vaccination clinics at least 2 times a month that included people 60 years and older in July, August and September. This funding brought in \$18,252.50 for the vaccine program.

Health Billing has been getting through the back log of vaccine claims and is now caught up through September 28, 2022. See below for income amounts and amount of vaccine purchased in 2022, this does not include any grant or subaward monies, only income from vaccine claims and only expenditures for vaccine. NCDHD continues to be a provider for the Vaccines for Children and Adult Immunization Program. These programs allow us to vaccinate persons without insurance or with insurance that does not cover vaccinations for free/reduced cost. Insurance claims for services after September 28 and claims for those that were denied and reprocessed are still coming through, so we expect the amount of positive revenue to continue to increase. Funding through the COVID-19 DHHS Immunization Subaward continued through June and restarted in July of 2022, all personal, media, supplies (not including vaccine) and equipment is funded through this subaward.



Program Goals for 2023:

For 2023, the Immunization Program is continuing with COVID-19 focused immunization clinics in our area. As of January, all sites and clinic schedule have been confirmed through June 2023 when the subaward funding runs out. There has not been any word yet if this funding will continue. Except for O’Neill weekly clinics, all mobile clinics have been decreased to every other month starting in January. Vaccinations offered will continue as they were in 2022, flu shots will be offered at all clinics until April 30. If the DHHS funding is renewed, clinics will continue every other month and be supplemented with flu shot clinics from September through November. If funding is not renewed, clinics will be completed by June 30 and flu shot clinics will resume in September and run through November/December. NCDHD is looking at partnering more with the food banks to hold flu shot clinics in those locations to increase access and awareness in our underserved populations.

Thank you for your support in our efforts to continue to provide vaccinations throughout our district!

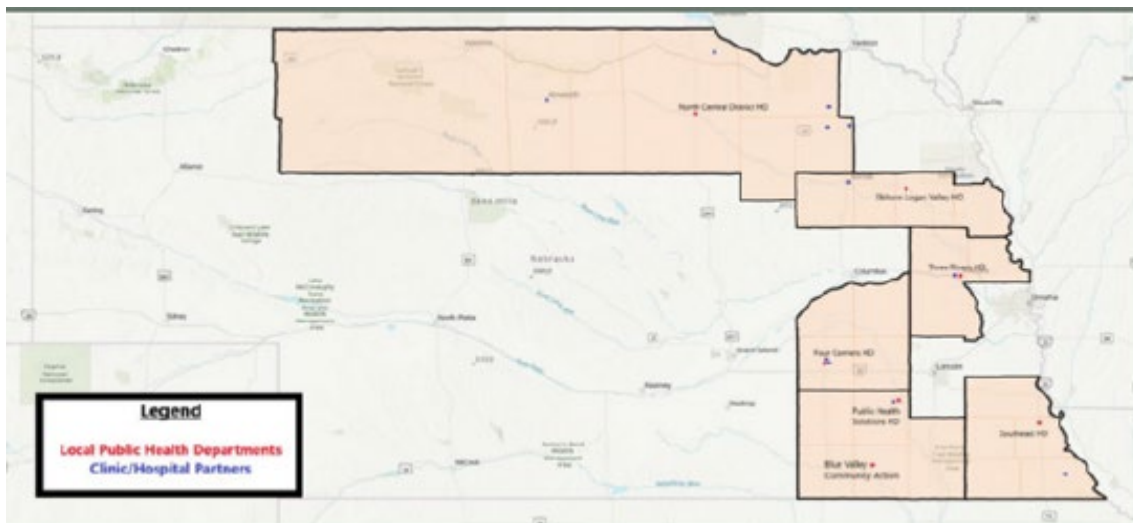
Jennifer L. Booker, RN/BSN-Vaccination Coordinator

CATCH, INC/ HRSA

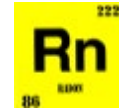
Community Access to Coordinated Healthcare, Inc. (CATCH) is a service delivery system made up of six local health departments and one Community Action Agency in Southeast Nebraska. CATCH is designed to foster improved health outcomes through health education, training, outreach, and referral services including case management and access to care. Incorporated in 1997 as a 501(c)3 non-profit membership organization, CATCH is governed by a board of directors and is a membership network of six local health departments (LHDs) and a multi-county community action agency (CAA).

NCDHD contract with Osmond General Hospital - Wausa Clinic - and developed a data-tracking document and has given referrals to NCDHD. We are continuing to work with the clinic and have monthly meetings and follow ups to stay connected.

Cherry County Hospital has identified a staff member who has had struggles within the clinic due to staffing issues, but continues to meet regularly and has had a few referrals as well.

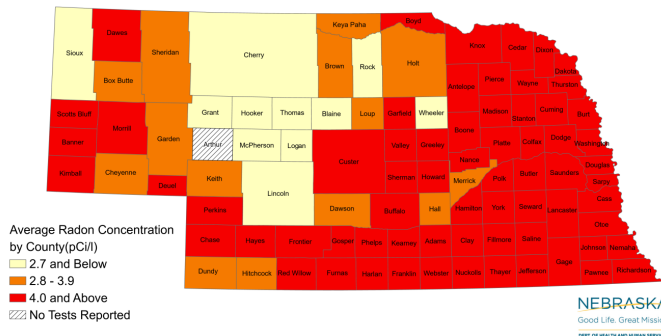


Radon

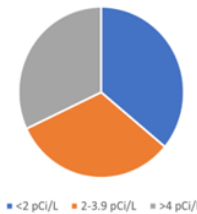


Average Radon Concentrations by County

Data Collections Reported to the Nebraska Radon Program for October 1, 2016 to September 30, 2021



The average radon concentration measured by short-term radon test kit results by NCDHD in 2021



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.

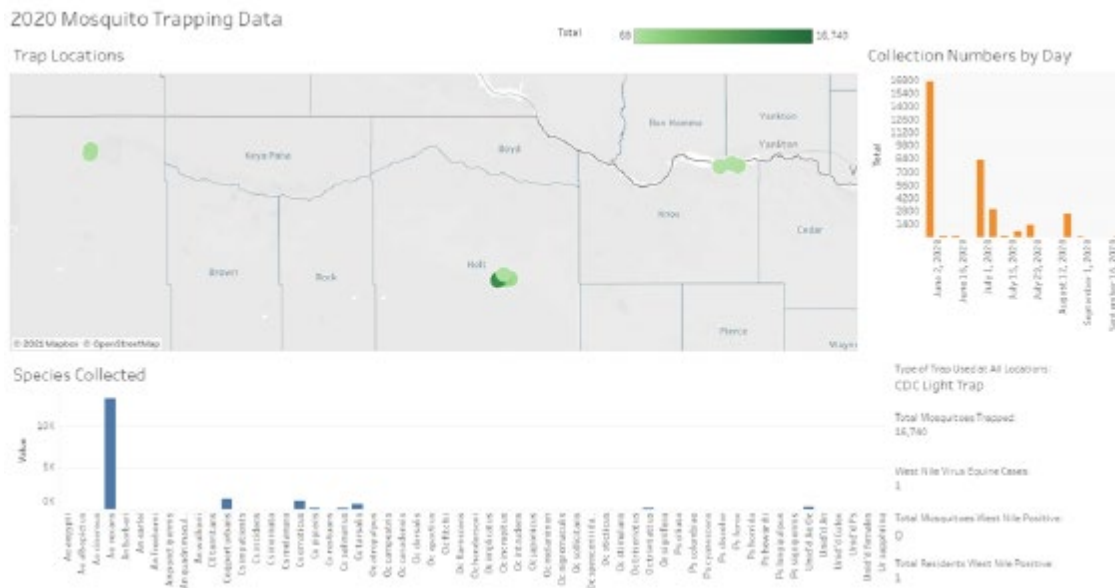
Testing your home is the only way to know if radon levels are high. You and your family could be at risk for lung cancer from radon. NCDHD makes short-term Radon testing kits available for a reduced cost of \$10/kit.

<p>Purchasing a Radon Test Kit</p> 	<p>Testing Your Home or Office</p> 	<p>Sending the Kit to An Approved Laboratory to Determine Radon Levels</p> 	<p>Fixing Your Home If Radon Levels Are High</p> 
			

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.

44 Test kits were distributed from the NCDHD office in 2022. All tests with above 4.0 results received a letter with their results and follow up education on mitigation.

Vector-Borne Illness



NCDHD MOSQUITO TRAPPING DASHBOARD (ABOVE):

NCDHD CONTINUES TO USE THE DATA DASHBOARD TO ALLOW THE PUBLIC TO TRACK POSITIVE POOLS OF MOSQUITOS. THIS DATA IS USED BY THE COMMUNITY MEMBERS AND APPLICATORS. LINK IS AVAILABLE ON THE NCDHD WEBSITE.

NCDHD CONTINUES TO PRODUCE A NEWSLETTER FOR AREA APPLICATORS THAT CONTAINS UPDATED INFORMATION ON TICK AND MOSQUITO-BORNE ILLNESSES, UPCOMING TRAINING, AND OTHER PROGRAM INFORMATION.

33 WNV cases (including one death) have been reported in humans for the 2022 season through week 39 (week ending 01 October 2022). 88 positive mosquito pools were detected for the 2022 season, 1 within the NCDHD district.

Lead - WIIN Grant

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.

Local health departments and participating childcare facilities, preschools, and public elementary schools are eligible. Grant funds will be used to pay for sample kits and laboratory analysis of drinking water samples and to pay local health departments for coordination assistance.

NCDHD continues to reach out to licensed daycares and schools within our district to encourage free testing. 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.





RE: Community Impact Coordinator Program
 Wednesday January 18, 2023
 Contact: Cassie Ottman health10@ncdhd.ne.gov

Wednesday January 18, 2023 – Hello to all! My name is Cassie Ottman, and I am the Community Impact Coordinator for NCDHD. I have worked for NCDHD since December 2020, originally starting out as a contact tracer for COVID. I transitioned into my new role in September 2022. I work fully remote from Pierce, NE.

The CIC currently works from two grants: CDC COVID Health Disparities and Minority Health Initiative. The main goal for the CIC is to help the minority population within the NCDHD district, with a heavy emphasis on Native Americans.

Prior to my obtaining this position, work was done to establish task force, or talking groups, between NCDHD and the Native Americans. This proved and still proves to be a point that we struggle with. While individuals did attend the talking groups, the attendance was low. To date, the relationship between NCDHD and the Native Americans is strained. I am slowly working on building back this relationship, although it's been a tough process.

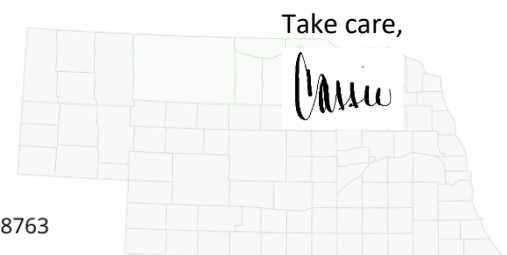
Diabetes health, mental health, and cardiac health are the main stars in my grants. You will see frequently on our website and social media pages information relating to these items. In the minority population, these are some of the top concerns Native Americans have voiced when speaking about health.

I have put focus and time towards creating a program for our entire district while primarily focusing on serving our minority population. Keep your eyes out for documents relating to the Care Connection Program. So many people here at NCDHD have been working alongside me to get this program developed. We're hoping by mid to late spring we can have our first program. I will include the letter and entities requested in order to make this program as successful as possible. Please feel free to share this information with anyone you may think would be interested in volunteering.

I also received training in Youth Mental Health First Aid with endorsements in Tribal & Indigenous Peoples. This is a great program that teaches individuals about the signs of mental health. If you or someone you know is interested in taking this 8-hour course, please reach out to me. Also, if you or someone you know is a registered Native American interested in becoming a Mental Health First Aid Trainer, reach out to me. I have funding available to pay for this course.

The prevention coordinator and I have done a lot of collaborating recently when it comes to mental health. New media resources are in the works. We are super focused this coming year on building positive connections with our communities, showing our communities we do more than just COVID-19 work.

Here's to positive progress in 2023!



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

RE: NCDHD Care Connection
Monday December 19, 2022

Contact: Cassie Ottman health10@ncdhd.ne.gov



Monday December 19, 2022 – Cassie with the North Central District Health Department (NCDHD) is reaching out regarding a developing program within the department.

Background information as to the idea process behind this program. In September 2022, I became the Community Impact Coordinator for NCDHD. I run two programs under this title. One program focuses on COVID-19 outreach and the other program focuses on Minority Health Initiative outreach. When I first came onto this program the main focus was how I am going to work at creating a relationship with our minority communities. I think we can all agree that those relationships are strained, and I really want to work at creating those. Positive & trusting relationships are so important for effective community outreach.

I'm unsure who is aware of this program but Norfolk, NE has a program called "Project Homeless Connect Norfolk" (PHCN) <https://www.projecthomelessconnectnorfolk.org>. With this program the focus is to connect individuals in need with immediate services that provide for their basic needs as well as help these individuals become empowered to continue on providing for themselves and their basic needs. While PHCN is a one day, all day event, my focus would be on 4 different events, all day, in different service areas of the NCDHD service area. Cherry, Holt, Knox counties would be 3 areas for sure that this program would be held in.

As of now, I am reaching out to you all to ask for assistance. The goal of providing services to individuals in need would come from their local service area to help continue relationship building. It is crucial that registered Tribal members also participate in this program. I am requesting that services volunteer their time to this event. I know this is a big request and please do not feel obligated to do so but know if this is something you choose, you will have a positive impact on your community and those in your community who are in need.

I've also included a Volunteer Service Agreement Form. Please feel free to pass this email and information along to anyone you feel would be an asset in this program. If this is something that you or your organization decide to help me with, please complete the volunteer form and either email or fax it to the information listed on the bottom of the form.

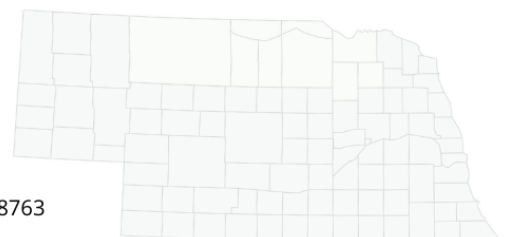
I'm so excited to get this program running and I'm so excited to work with you all, building more positive relationships. I appreciate you all!

Take care,

A handwritten signature in black ink that reads "Cassie".

Cassie Ottman

Community Impact Coordinator
North Central District Health Department
health10@ncdhd.ne.gov | ncdhd.ne.gov



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



Resources needed for the success of this program are listed below:

- Telephone Assistance Programs
- Public Libraries
- DHHS – Economic Development
- DHHS – Medicaid
- Nebraska Dept. of Labor: job & training services/veterans services
- Toys for Tots (or something similar)
- Community Action Partnerships / Food for the Heartland
- Head Start
- Healthy Families
- Weatherization
- WIC
- Rescue Missions
- Counseling services / Bright Horizons / Parent to Parent Network
- Behavioral Health Services
- Local Coalitions
- Haircare / Barbers
- Local hospitals / medical doctors / eye doctors / physical therapists
- Local business owners in need of employees
- Local housing agencies
- Ponca Tribe of Nebraska
- Rosebud Sioux Tribe
- Santee Sioux Tribe
- Centro Hispano Comunitario de Nebraska
- Legal Aid of Nebraska
- ESU's
- NECC Adult Education
- Local insurance companies

Having a meeting with all these representatives would help us brainstorm any other providers that could be missing but be essential. If you are interested in attending a virtual meeting (Zoom), please email me and I will set one up!

I look forward to talking with you all very soon.



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Miles of Smiles (MOS) is a school-based oral screening and fluoride varnish program available to preschool, elementary, and middle school-age students within the nine-county health district. This past year The MOS program contracts with 2 Public Health Authorized Registered Dental Hygienists to conduct oral screening examinations and apply fluoride varnish. In 2022 Miles of Smiles averaged a 56% participation rate for Miles of Smiles and an average of 39% of students receiving the fluoride varnish. Which is up from the past years. We had 73 children needing immediate referrals to a dentist down from 118 in 2021 and saw 22% Medicaid clientele. I am so excited to see the number of immediate referrals down. A total of 8 sealant programs were held in 8 different schools this year.

Our 5-year partnership with the Nebraska Community Foundation ended this year on December 31st. The partnership was a match fund grant per say that the Miles of Smiles program was to raise match funding of at least \$25,000. I am proud to say the program went well above the expected amount and raised an average of about \$46,000 per year through community foundation funds, the districts county support, private funders and parent donations towards the program. The connections we made through the Nebraska community foundation were amazing and I am sure contributed to the programs growing numbers!



From: [Kelli Dempster](#)
To: [Elizabeth Parks](#)
Cc: [Whitney Abbott](#); [Jamie Rodriguez](#)
Subject: Prevention Action Items for BOH
Date: Friday, January 20, 2023 12:42:53 PM
Attachments: [image001.png](#)
[image003.png](#)

Here are the prevention items I am working on:

Saturation, Alcohol, and compliance check letters have been mailed out
Prevention coordinator attending parent/teacher conferences to set up stash compartment table and other prevention materials in February (Cherry County)
Prevention coordinator will be attending Family Night (Cherry County) in March
Prevention Coordinator is working with the schools to organize a elementary/middle/high school presentations(all NCDHD area)
Prevention is also organizing RBST trainings for beginning on summer(all NCDHD area)
Prevention coordinator is working on restructuring coalition to run more cohesively with the community and schools. (all coalitions)
All mini coalitions have been invited to Tall Cop webinar January 31.
Partnering with Region 4 and Community Impact Coordinator to offer MHFA (Adult & Youth) trainings for NCDHD area
Working with Oneill High School and St Marys on their human performance project (HPP) action plans. Creating video content raising awareness on benefits of not doing drugs and alcohol and living a drug free life.
Working on Human Performance Project implementation for other service areas at NCDHD.

Kelli Dempster

Substance Abuse Prevention Coordinator

North Central District Health Department

PO Box 191 | 422 East Douglas Street, O'Neill, NE 68763

Office Phone 402.336.2406 x123 | Toll Free 877.336.2406 | Fax 402.336.1768

24/7 Emergency Line: 402.961.1718

kelli@ncdhd.ne.gov | ncdhd.ne.gov



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ATTACHMENT "A"

BYLAWS
OF
NORTH CENTRAL DISTRICT HEALTH DEPARTMENT

ARTICLE I

PURPOSES

The North Central District Health Department ("Health Department") is created pursuant to the Interlocal Agreement for the Joint Establishment and operation of a Health Department ("Interlocal Agreement") between those Counties set forth in the Interlocal Agreement. These Bylaws are established to govern the Board of Health established by the Interlocal Agreement.

ARTICLE II

MEMBERS

Section 1. General Powers. The business, property, and affairs of the department shall be managed by the Board of Health, which shall have and shall exercise all the powers of the Board, subject to the authorizations, responsibilities and limitations imposed by Nebraska law and by these Bylaws.

Section 22. Appointment. Members of the Board of Health shall be appointed in the manner set forth in the Interlocal Agreement. The Board of Health shall govern the affairs of the Health Department. Any member appointed to fill a vacancy shall serve the unexpired term of his or her predecessor. ~~After the initial term, Board terms will be for three years with all terms starting January of 2005 and first term ending January, 2006, second term ending January, 2007 and third term ending January, 2008.~~

Section 33. Term. Initially, one-third of the members shall be appointed for terms of one year, one-third for terms of two years, and one-third for terms of three years. Appointments to fill any vacancies shall be for the unexpired terms. After their terms of office expire, each new appointment shall be for a term of three years or until a successor shall be selected. No board member shall be eligible to serve more than two consecutive three-year terms.

~~Section 2. Resignation and Removal. Members may resign at any time by delivering written notice to the Board of Health, its President or Secretary. A resignation is effective when the notice is received, unless the notice specifies a later effective date.~~

~~A Member who has been inactive for a period of 1 year can be placed on the inactive list or removed from the board upon the act of a majority of the Members present at which quorum in present. Inactive Members voting rights are suspended and does not account for calculating~~

~~percentage of quorum. A member can be taken off the inactive list with approval of the Members in which majority in present.~~

Section 45. Resignation and Removal. Members may resign at any time by delivering written notice to the Board of Health, its President or Secretary and the director of the Department. A resignation is effective when the notice is received, unless the notice specifies a later effective date. Absence from three consecutive, unexcused meetings shall be grounds for removal from the Board. Any Member not appointed by his/her respective county may be removed by a vote of two-thirds of the entire Board of Health whenever in its judgment the best interests of the Health Department will be served. For any member who is appointed by his/her respective county, he/she may be removed by a vote of two-thirds of the entire Board of Health whenever in its judgment the best interests of the Health Department will be served.

Section 53. Quorum and Actions. Quorum shall constitute fifty percent (50%) of current and listed as active, approved and appointed Board of Health Members for the transaction of any business at any meeting of the Board of Health. If less than a quorum is present at any meeting, the majority of those Members present may adjourn the meeting from time to time, without notice other than announcement at the meeting, until a quorum is present. The act of a majority of the Members present at a meeting at which a quorum is present shall be the act of the Board of Health.

The sale, assignment, or transfer of any assets of the Health Department shall require a vote of two-thirds of the entire board. This vote may be accomplished in person, electronically, by mail, or by phone and recorded as such in the minutes of the Board of Health.

- ~~A. the incurring of indebtedness in excess of \$5,000;~~
- ~~B. the commitment for capital expenditures in excess of \$5,000; or~~
- ~~C. the sale, assignment, or transfer of substantially all assets of the Health Department.~~

Section 64. Annual and Quarterly Meetings. The annual meeting of the Board of Health shall be held in January of each year at the call of the President, or if the President shall not have called the meeting by December 15, then at the call of at least two Members. Quarterly meetings (minimum) shall be held every three months at such times approved by the Board of Health.

Section 75. Special Meetings. Special meetings of the Board of Health may be called by the President or by any two Members upon a written request signed and filed with the Secretary.

Section 86. Member Notice of Meetings. In addition to any notice as may be required to be given the public, notice of the date, time and place of special meetings shall be mailed to each Member at his or her last known resident address at least ten (10) days prior to the date of such meeting, unless the meeting to be called is an "emergency meeting" as described in Section 9. Any Member may waive notice of any meeting. The attendance of a Member at a meeting shall constitute a waiver of notice of such meeting, except where a Member attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at, nor the purpose of, any

regular or special meeting of the Board of Health need be specified in the notice or waiver of notice of such meeting.

Section 97. Public Notice of Meetings. The Health Department shall adhere to all requirements of Nebraska's Open Meetings Act, Neb. Rev. Stat. § 84-1408 et seq public meetings laws. The Health Department shall give reasonable advance publicized notice of the time and place of each meeting by a method approved by the Board of Health and recorded in its minutes. Such notice shall be transmitted to all members of the public body and to the public. Such notice shall contain an agenda of subjects known at the time of the publicized notice or a statement that the agenda, which shall be kept continually current, shall be readily available for public inspection at the principal office of the Health Department during normal business hours. Except for items of an emergency nature, the agenda shall not be altered later than twenty-four hours before the scheduled commencement of the meeting. The Board of Health shall have the right to modify the agenda to include items of an emergency nature only at such public meeting.

Section 108. News Media Notice of Meetings. The Secretary or other designee of the Board of Health shall maintain a list of the news media requesting notice of meetings and shall make reasonable efforts to provide advance notice to them of the time and place of each meeting and the subjects to be discussed at that meeting.

Section 119. Emergency Meeting. When it is necessary to hold an emergency meeting without reasonable advance public notice, the nature of the emergency shall be stated in the minutes and any formal action taken in such meeting shall pertain only to the emergency. Such emergency meetings may be held by means of electronic or telecommunication equipment. Notice of the emergency meeting shall be given to the news media as provided by Section 10Section 8. Complete minutes of such emergency meetings specifying the nature of the emergency and any formal action taken at the meeting shall be made available to the public no later than the end of the next regular business day.

Section 120. Voting. At all meetings of the Board of Health, each Member shall have one vote. A Member of the Board of Health who is present at a meeting of the Board of Health at which action on any matter is taken shall be presumed to have assented to the action taken unless his or her dissent shall be entered in the minutes of the meeting or unless he or she shall file his written dissent to such action with the Secretary of the meeting before the adjournment thereof or forward such dissent by registered mail to the Secretary within three business days following the adjournment of the meeting. Such right to dissent shall not apply to a Member who voted in favor of such action.

~~The Department shall, as far as practicable, provide for the conducting of business of the Board of Health by mail, after such Board of Health Meeting. Any official action or vote of the members of the Board of Health taken by mail shall be preserved in the records of the Department and shall be recorded in the Board of Health Minutes by the Department.~~

Section 134. Committees and Task Groups. The Board of Health shall appoint an Executive Committee which shall include: the President, Vice President, the Secretary and the

Treasurer. The Executive Committee shall have the power to transact necessary business between regular meetings. The Board of Health may, by resolution or resolutions passed by the Board of Health, appoint one or more committees, with each committee to consist of at least one or more Members of the Board of Health. The Committees shall, to the extent permitted by law, have and may exercise such powers of the Board of Health in the management of the business and affairs of the Health Department as shall be delegated to them. The Board of Health may, by resolution or resolutions passed by the Board of Health, also appoint individuals to serve on one or more task groups, which may or may not consist of Members. The task groups shall not exercise any powers vested in the Board of Health and any actions recommended by a task group shall first be submitted to the Board of Health or committee appointed by the Board of Health for consideration.

Section 142. Video and Telephonic Conference Meetings. Members of the Board of Health, or any committee appointed by the Board of Health, may participate in a meeting of such Board or committee by means of a videoconference or telephone conference in the manner hereinafter provided, and as permitted by the Nebraska Open Meetings Act. Participation by such means shall constitute presence in person at a meeting. For any meeting designated as an in-person meeting, Members appearing virtually will be counted absent and will not be permitted to vote, and may only participate to the same extent as a member of the public attending the meeting.

Procedures governing videoconference and telephone conference are as follows:

A. A. Videoconference.

- (a) Reasonable advance publicized notice is given;
- (b) Reasonable arrangements are made to accommodate the public's right to attend, hear, and speak at the meeting, including seating, recordation by audio or visual recording devices, and a reasonable opportunity for input such as public comment or questions to at least the same extent as would be provided if videoconferencing was not used;
- (c) At least one copy of all documents being considered is available to the public at each site of the videoconference or telephone conference;
- (d) At least one Member of the Board of Health is present at each site of the videoconference; and
- (e) No more than one-half of the Board of Health's required quarterly meetings in a calendar year are held by videoconference or telephone conference.

B. B. Teleconference.

- (a) Reasonable advance publicized notice is given which identifies each telephone

conference location at which a Member of the Board of Health will be present;

(b) All telephone conference meeting sites identified in the notice are located at a place which will accommodate the anticipated audience;

(c) Reasonable arrangements are made to accommodate the public's right to attend, hear, and speak at the meeting, including seating, recordation by audio recording devices, and a reasonable opportunity for input such as public comment or questions to at least the same extent as would be provided if a telephone conference call was not used;

(d) At least one copy of all documents being considered is available to the public at each site of the telephone conference call;

(e) At least one Member of the Board of Health is present at each site of the telephone conference call identified in the public notice;

(f) The telephone conference call lasts no more than one hour; and

(g) No more than one-half of the Board of Health's required quarterly meetings in a calendar year are held by telephone conference call.

ARTICLE III

OFFICERS

Section 1. Number and Qualification. The officers of the Health District shall elect a President, a Vice President, a Secretary, and, either from its own Members or otherwise, a Treasurer. The Board of Health may elect other officers with those duties specified. The same person may hold any two or more offices.

Section 2. Election and Tenure. The Board of Health, at its annual meeting, shall elect the officers. Each officer shall hold office for a term of one year or until his or her successor shall have been duly elected and shall have become qualified, unless his or her service is terminated sooner because of death, resignation or otherwise.

Section 3. Removal. Any officer or agent of the Health Department elected or appointed by the Board of Health may be removed by the Board of Health whenever in its judgment the best interests of the Health Department will be served thereby, but such removal shall be without prejudice to the contract rights, if any, of the person so removed. Election or appointment of an officer or agent shall not of itself create contract rights.

Section 4. Vacancies. Vacancies occurring in any office by reason of death, resignation or otherwise may be filled by the Board of Health at any meeting.

Section 5. Duties and Authorities of Officers.

A. President. The President shall, when present, preside at all meetings of the Members of the Board of Health. The President may sign, with the Secretary or any other proper officer of the Board of Health so authorized, deeds, mortgages, contracts or other instruments which the Board of Health has authorized to be executed, except in cases where the signing and execution thereof shall be expressly delegated by the Board of Health or by these Bylaws to some other officer or agent of the Health Department or shall be required by law to be otherwise signed or executed. The President in general, shall perform all duties incident to the office of President and such other duties as may be prescribed by the Board of Health from time to time.

B. Vice President. In the absence of the President or in the event of his or her death, inability or refusal to act, the Vice shall perform the duties of the President, and when so acting, shall have all the powers of and be subject to all the restrictions upon the President. Any Vice President may sign and shall perform such other duties as from time to time may be assigned by the President or by the Board of Health.

C. Secretary. The Secretary shall attend and keep minutes of the meetings of the Board of Health in one or more books provided for that purpose, see that all notices are duly given in accordance with the provisions of these Bylaws or as required by law, be the custodian of the corporate records, keep a register of the post office address of each Member which shall be furnished to the Secretary by such Member, have general charge of the corporate minute books of the Health Department, and in general perform all duties incident to the office of Secretary and such other duties as from time to time may be assigned by the President or by the Board of Health. The Board of Health or the President may delegate all or part of the authority of the duties of the Secretary to staff, thus relieving the Secretary of these duties.

D. Treasurer. The Treasurer shall have charge and custody and be responsible for all funds and securities of the Health Department, receive and give receipts for all securities and monies due and payable to the Health Department from any source whatsoever, deposit all such monies in the name of the Health Department in such banks, trust companies, or other depositories as shall be collected in accordance with the provisions of these Bylaws, and in general perform all of the duties incident to the office of Treasurer and such other duties as from time to time may be assigned by the Board of Health. The Board of Health or the President may delegate all or part of the authority of the duties of the Treasurer to staff, thus relieving the Treasurer of these duties. ~~– If required by the Board of Health, the Treasurer shall give bond for the faithful discharge of his or her duties in such sum and with such surety or sureties as the Board of Health shall determine.~~

ARTICLE IV

BANK ACCOUNT

~~The funds of the Health Department shall be deposited in such banks, trust funds or~~

~~depositories as the Board of Health may designate. The Board of Health may from time to time authorize the opening and maintenance of general and special and custodial accounts with such banks, trust companies, and other depositories as it may select. Rule, regulations, and agreements applicable to such accounts may be made, and changed from time to time, by the Board of Health.~~ No funds shall be disbursed except upon vouchers approved by the Health Director and/or the President of the Board of Health. In the absence of the Health Director, the President and the Vice President or, in his or her absence, the Secretary is authorized to approve such vouchers before any funds are disbursed. In the absence of the president, the Health Director and/or the Vice President or, in his or her absence, the Secretary is authorized to approve such vouchers before any funds are disbursed. In the absence of the President and Health Director, the Vice President and the Secretary are authorized to approve such vouchers before any funds are disbursed.

ARTICLE V

AMENDMENT

~~Except as otherwise provided by the Interlocal Agreement, the Bylaws may be amended or repealed by the Board of Health by a majority vote at any duly constituted annual, regular or special meeting. Except as otherwise provided by the Interlocal Agreement, the Bylaws may be amended or repealed by the Board of Health by a majority vote at any duly constituted annual, regular or special meeting, provided however, that if any County is not represented at the meeting, then any amendment or repeal shall require the vote of at least a two-thirds majority of the Members present.~~

ARTICLE VI

INDEMNIFICATION OF MEMBERS, OFFICERS, EMPLOYEES AND AGENTS

A. To the extent permitted by law, the Health Department shall indemnify any person who was or is a party or is threatened to be made a party to any threatened, pending or completed action, suit or proceeding, whether civil, criminal, administrative or investigative, other than an action by or in the right of the Health Department, by reason of the fact that he or she is or was a Member, officer, employee or agent of the Health Department against expenses, including attorney fees, judgments, fines and amounts paid in settlement actually and reasonably incurred by him or her in connection with such action, suit or proceeding if he acted in good faith and in a manner he reasonably believed to be in or not opposed to the best interests of the Health Department, and, with respect to any criminal action or proceeding, had no reasonable cause to believe his or her conduct was unlawful.

B. To the extent permitted by law, the Health Department shall indemnify any

person who was or is a party or is threatened to be made a party to any threatened, pending or completed action or suit by or in the right of the Health Department to procure a judgment in its favor by reason of the fact that he or she is or was a Member, officer, employee or agent of the Health Department, or is or was serving at the request of the Health Department as a Member, officer, employee or agent of another Health Department, partnership, joint venture or other enterprise or as a trustee, officer, employee or agent of an employee benefit plan, against expenses, including attorney fees, actually and reasonably incurred by him or her in connection with the defense or settlement of such action or suit if he or she acted in good faith and in a manner he or she reasonably believed to be in or not opposed to the best interests of the Health Department.

C. The indemnity provided for by this Article shall not be deemed to be exclusive of any other rights to which those indemnified may be otherwise entitled, nor shall the provisions of this Article be deemed to prohibit the Health Department from extending its indemnification to cover other persons or activities to the extent permitted by law or pursuant to any provision in the Bylaws.

D. The Health Department shall indemnify a Member who was wholly successful, on the merits or otherwise, in the defense of any proceeding to which the Member was a party because he or she is or was a Member of the Health Department.

E. To the extent permitted by law, the Health Department shall have the power to purchase and maintain insurance on behalf of any person who is or was a Member, officer, employee or agent of the Health Department against any liability asserted against him or her and incurred in such capacity or arising out of his or her status as such, whether or not the Health Department would have the power to indemnify him or her against such liability.

F. The termination of a proceeding by judgment, order, settlement, conviction, or upon a plea of *nolo contendere* or its equivalent is not, of itself, determinative that the Member did not meet the standard of conduct described in this section.

G. The Health Department may not indemnify a Member under this Article:

- (1) In connection with a proceeding by or in the right of the Health Department in which the Member was adjudicated liable to the Health Department; or
- (2) In connection with any other proceeding charging improper personal benefit to the Member, whether or not involving action in his or her official capacity, in which the Member was adjudged liable on the basis that personal benefit was improperly received by the Member.

H. Indemnification permitted under this Article in connection with a proceeding by or in the right of the Health Department is limited to reasonable expenses incurred in connection with the proceeding.

ARTICLE VII
CONFLICT OF INTEREST

Section 1. A conflict of interest arises when any member, the Director, or any other Officer in the discharge of that person's official duties to the Department would be required to take any action or make any decision that may cause financial benefit to that person, a member of the person's immediate family, or a business with which that person is associated, and which is distinguishable from the effects of the action or decision on the general public or a broad segment of the public.

Section 2. All conflicts of interest shall be treated in the manner set forth in Neb. Rev. Stat. §49-14,102 through 49-14,103.02 as amended from time to time.

Section 3. For purposes of this article, the employment contract or salary agreement between the Department and an Officer or the Director is not deemed subject to this article, except as follows:

- a. The Officer or Director shall not have a vote on the contract or salary agreement.
- b. The Board may require the Director or Officer to be absent from the room while the other Members and Officer discuss the same.
- c. The final vote shall be made at a meeting open to the public with the normal public notice provided.
- d. The data set forth in Neb. Rev. Stat. § 49-14,103.02 shall be provided to and maintained by the secretary.

ARTICLE VIII
COMPENSATION & EXPENSES

Members and Officers shall not be compensated for their services, but may be reimbursed their reasonable expenses incurred for Health Department business, to include mileage at the then current rate established by the State of Nebraska for county employees and Officers. No expenses shall be paid without a statement of expenses incurred being first submitted by the Member or Officer and approved by the Director or President. No member or Officer shall approve their own expenses, and no expenses shall be reimbursed if also subject to reimbursement by or already reimbursed by another entity.

ARTICLE IX
OFFICE WITHIN DISTRICT

The principal office of the Department shall be a place within the district as established from time to time by a majority vote of the Members. In addition to the principal office, such additional offices as deemed necessary may be established within the district in the same manner. If no other office has been established, the office or residence of the Director or President may be designated as the principal office.

The forgoing By-Laws are hereby approved and adopted by the Board of Directors of the North Central District Health Department effective this 2nd 4th day of January, 2014.

President
North Central District Health Department

NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

January 17, 2023

Kelly Kalkowski-Boyd
Board President
North Central District Health Department
422 East Douglas Street, O'Neill, NE 68763

Dear Mr. Kalkowski-Boyd:

We received notification on January 10, 2023, that Heidi Kuklis (Hostert) has accepted the position of Executive Director of the North Central District Health Department. Please accept this letter as the Department's approval of this appointment, in accordance with Nebraska Revised Statute §71-1631(1)(c).

Ms. Kuklis's experience and education in public health will be an asset to the North Central District Health Department. Her previous work for several years at the North Central District Health Department as the Emergency Response Coordinator will give her insight into public health programming and collaboration in Nebraska. I look forward to working with Ms. Kuklis.

Please feel free to contact Brianna Cowell-Cochran of my staff if you have any questions or concerns. Brianna's contact information is 402-471-0709 and brianna.cowell@nebraska.gov.

Sincerely,

A handwritten signature in blue ink that reads "Charity Menefee".

Charity Menefee
Director, Division of Public Health
Department of Health and Human Services

Remit To:
SANOPI PASTEUR INC
 12458 Collections Center Dr
 Chicago, IL 60693

Discount Due Date	Customer #	Invoice Number	Invoice Date
12/28/2022	74031223	919429134	09/29/2022
Payment By Discount Due Date	Payment After Discount Due Date		
(\$)17,900.20	(\$)18,260.92		

INVOICE

Amount Paid (\$) _____

Billed To: 74031223

N CENTRAL DISTRICT HEALTH DEPT
 422 E DOUGLAS ST
 ONEILL NE 68763-1852

Shipped To: 74031223

Attn: Jennifer Booker
 N CENTRAL DISTRICT HEALTH DEPT
 422 E DOUGLAS ST
 ONEILL NE 68763-1852



PLEASE DETACH AND RETURN THIS PORTION WITH YOUR PAYMENT TO ENSURE PROPER CREDIT

Sanofi Pasteur Inc: For inquiries, please call 1-800-VACCINE (1-800-822-2463) 8:30AM-6PM ET, Mon-Fri or visit us at www.VaccineShoppes.com

DELIVERY NUMBER	ORDER NUMBER	SHIPPING METHOD	CARTONS	PAGE
819287882	14841010	1 Day FEDEX Prior-Air 10:30 AM	00001	1 of 1
CUSTOMER NUMBER	CUSTOMER P.O. NUMBER	INVOICE DATE	INVOICE NUMBER	
74031223	699	09/29/2022	919429134	

Item Number	Quantity	UoM	Description	Unit Price(\$)			Amount(\$)
				List	This Order*	Allocated**	Qty x This Order
122-65	30	PAC	Fluzone HD QIV 22-23 240 mcg/0.7mL SUS SYR 10	607.27	607.27	607.27	18,218.10
UJ925AB			NON-RETURNABLE Excise Tax Surcharge		7.50		225.00

Total Savings	182.18	Subtotal of Items	18,443.10
VaccineShoppes.com Savings	182.18	Invoice Summary	
<small>As part of the cost reporting process or otherwise, Purchaser may be required to disclose discounts or rebates pursuant to 42 U.S.C. 1320a-7b (b) (3) (A), 42 C.F.R. 1001.852(h) (1), other federal or state laws, or agreements with other payors. *Prices are net of all discounts, except VaccineShoppes.com and prompt pay discounts (if any), listed in the Invoice Summary. **May be used for reporting and other purposes, as applicable.</small>		Subtotal of Products	18,218.10
		VaccineShoppes.com Savings	182.18 -
		Net Subject to Prompt Pay Discount	18,035.92
		Federal Excise Tax Surcharge	225.00
		Amount Due On 12/29/2022	18,260.92
		Prompt Pay Discount	360.72 -
		Amount Due if Paid by 12/28/2022	17,900.20

Please call within 48 hours of receipt if discrepancies are noted. **Amount Due** 18,260.92



INVOICE

Nebraska Association of Local Health Directors

INVOICE #: INV0986
DATE: 12/16/2022
DUE DATE: 01/15/2023

800 S. 13th St. Suite 100
Lincoln, NE 68508
Phone 402.904.7946 Fax
susanbockrath@nalhd.org

TOTAL AMOUNT: \$5,325.00
TOTAL DUE: \$5,325.00

BILL North Central District Health Dept.
TO: ATTN: Elizabeth Parks
422 E Douglas
O'Neill, NE 68763

DESCRIPTION / MEMO	AMOUNT
NALHD Annual Dues	\$2,725.00
Friends Dues	\$2,600.00
TOTAL AMOUNT:	\$5,325.00

Nebraska Association of Local Health Directors
800 S. 13th St. Suite 100
Lincoln, NE 68508
Phone 402.904.7946 Fax
susanbockrath@nalhd.org

TOTAL DUE: \$5,325.00

AMOUNT ENCLOSED:

Customer ID - Name: C0042 - North Central District Health Dept.
Invoice #: INV0986

BILL North Central District Health Dept.
TO: ATTN: Elizabeth Parks
422 E Douglas
O'Neill, NE 68763

REMIT TO: Nebraska Association of Local Health Directors
800 S. 13th St. Suite 100
Lincoln, NE 68508

NEBRASKA

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NEBRASKA MILITARY DEPARTMENT



PETE RICKETTS, GOVERNOR

NGNE-DD

9 Nov 2022

MEMORANDUM FOR North Central District Health Department, P.O. Box 191, O'Neill,
NE 68763-0191

SUBJECT: Reimbursement for COVID Usage of the O'Neill Readiness Center

1. The Nebraska Army National Guard requests reimbursement for all public works expenses for the O'Neill Readiness Center (RC).

2. Timeline:

a. 16 Mar 20 – 10 Apr 20 (25 days): North Central District Health Department (NCDHD) utilized the RC through verbal agreement with Nebraska National Guard (NENG) Joint Operations Officer (J-3) until 10 Apr 20 when NENG Joint Task Force Heartland conducted personal protective equipment (PPE) distribution from the RC and other sites across the state through 6 Aug 20.

b. 7 Aug 20 – 16 Feb 21 (193 days): NCDHD utilized entire RC for PPE distribution, testing and inoculations.

c. 17 Feb 21 – 28 Feb 22 (376 days): NCDHD reduced usage to the cold storage and drill floor areas of RC.

d. 1 Mar 22 – 30 Jun 22 (122 days): Cold storage and drill floor areas of RC.

e. 1 Jul 22 – 31 Aug 22 (61 days): Cold storage and drill floor areas of RC.

f. 1 Sep 22 – 31 Oct 22 (61 days): Cold storage and drill floor areas of RC

MAJOR GENERAL DARYL L. BOHAG, DIRECTOR
NEBRASKA MILITARY DEPARTMENT | JOINT FORCE HEADQUARTERS
2433 N.W. 24th Street | 402-309-6210
Lincoln, Nebraska 68524-1801 | ne.ng.mil

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NGNE-FMO

SUBJECT: Federal Reimbursement for COVID Usage of the O'Neill Readiness Center

3. Reimbursement Method and Calculations:

a. The National Guard Armory Rental Regulation (01 OCT 2014) lists the drill floor and/or classroom employee rental rate as \$75/day. The classroom and drill floor of the O'Neill RC total 5,726 square feet (sf). Therefore, $\$75/\text{day}/5,726 \text{ sf} = \$0.013/\text{sf day}$ (1.3 cents/sf days).

b. 16 Mar 20 – 10 Apr 20: Previously billed

c. 7 Aug 20 – 16 Feb 21: Previously billed

d. 17 Feb 21 – 28 Feb 22: Previously billed

e. 1 Mar 22 – 30 Jun 22: Previously billed

f. 1 Jul 22 – 31 Aug 22: Previously billed

g. 1 Sep 22 – 31 Oct 22: \$5,187.81 for 6,542 sf for 61 days at \$0.013/sf days

h. Total: \$5,187.81 Sept through Oct

i. Outstanding balance \$94,229.63

4. Point of contact for this memorandum is the undersigned at 402-309-8106.

Richard Dahlman

RICHARD H. DAHLMAN
Deputy Director
Nebraska Military Department