The Governance Functions

NALBOH is the national voice for the boards that govern health departments and shape public health policy. Since its inception, NALBOH has connected with board of health members and elected officials from across the country to inform, guide, and help them fulfill their public health responsibilities in their states and communities. Driven by a mission to strengthen and improve public health governance, NALBOH worked with CDC and other national partners to identify, review, and develop the following model of six functions of public health governance.

Policy development: Lead and contribute to the development of policies that protect, promote, and improve public health while ensuring that the agency and its components remain consistent with the laws and rules (local, state, and federal) to which it is subject. These may include, but are not limited to:

- Developing internal and external policies that support public health agency goals and utilize the best available evidence;
- Adopting and ensuring enforcement of regulations that protect the health of the community;
- Developing and regularly updating vision, mission, goals, measurable outcomes, and values statements;
- Setting short- and long-term priorities and strategic plans;
- Ensuring that necessary policies exist, new policies are proposed/implemented where needed, and existing policies reflect evidence-based public health practices; and
- Evaluating existing policies on a regular basis to ensure that they are based on the best available evidence for public health practice.

Resource stewardship: Assure the availability of adequate resources (legal, financial, human, technological, and material) to perform essential public health services. These may include, but are not limited to:

- Ensuring adequate facilities and legal resources;
- Developing agreements to streamline cross-jurisdictional sharing of resources with neighboring governing entities;
- Developing or approving a budget that is aligned with identified agency needs;
- Engaging in sound long-range fiscal planning as part of strategic planning efforts;
- Exercising fiduciary care of the funds entrusted to the agency for its use; and
- Advocating for necessary funding to sustain public health agency activities, when appropriate, from approving/appropriating authorities.

Legal authority: Exercise legal authority as applicable by law and understand the roles, responsibilities, obligations, and functions of the governing body, health officer, and agency staff. These may include, but are not limited to:

- Ensuring that the governing body and its agency act ethically within the laws and rules (local, state, and federal) to which it is subject;
- Providing or arranging for the provision of quality core services to the population as mandated by law, through the public health agency or other implementing body; and
- Engaging legal counsel when appropriate.

Partner engagement: Build and strengthen community partnerships through education and engagement to ensure the collaboration of all relevant stakeholders in promoting and protecting the community's health. These may include, but are not limited to:

- Representing a broad cross-section of the community;
- Leading and fully participating in open, constructive dialogue with a broad cross-section of members of the community regarding public health issues;
- Serving as a strong link between the public health agency, the community, and other stakeholder organizations; and
- Building linkages between the public and partners that can mitigate negative impacts and emphasize positive impacts of current health trends.

Continuous improvement: Routinely evaluate, monitor, and set measurable outcomes for improving community health status and the public health agency's/governing body's own ability to meet its responsibilities. These may include, but are not limited to:

- Assessing the health status of the community and achievement of the public health agency's mission, including setting targets for quality and performance improvement;
- Supporting a culture of quality improvement within the governing body and at the public health agency;
- Holding governing body members and the health director/health officer to high performance standards and evaluating their effectiveness;
- Examining structure, compensation, and core functions and roles of the governing body and the public health agency on a regular basis; and
- Providing orientation and ongoing professional development for governing body members.

Oversight: Assume ultimate responsibility for public health performance in the community by providing necessary leadership and guidance in order to support the public health agency in achieving measurable outcomes. These may include, but are not limited to:

- Assuming individual responsibility, as members of the governing body, for actively participating in governing entity activities to fulfill the core functions;
- Evaluating professional competencies and job descriptions of the health director/health officer to ensure that mandates are being met and quality services are being provided for fair compensation;
- Maintaining a good relationship with health director/health officer in a culture of mutual trust to ensure that public health rules are administered/enforced appropriately;
- Hiring and regularly evaluating the performance of the health director; and
- Acting as a go-between for the public health agency and elected officials when appropriate.

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

Approved by the NALBOH Board of Directors – November 2012



National Association of Local Boards of Health www.nalboh.org



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Check list for your Board of Health and the Six Functions of Board Governance

NALBOH is the national voice for the boards that govern health departments and shape public health policy. Since its inception, NALBOH has connected with board of health members and elected officials from across the country to inform, guide, and help them fulfill their public health responsibilities in their states and communities. Driven by a mission to strengthen and improve public health governance, NALBOH worked with CDC and other national partners to identify, review, and develop the following model of six functions of public health governance.

All public health governing entities are responsible for some aspects of each function. No one function is more important than another. For more information about the Six Governance Functions, please visit <u>www.nalboh.org</u>. *Approved by the NALBOH Board of Directors – November 2012*

Using the information regarding the Six Functions of Board Governance, use this simple check list to give your board an opportunity to acknowledge your work as a board of health.

Policy Development : Lead and contribute to the development of policies that protect, promote, and improve public health while ensuring that the agency and its components remain consistent with the laws and rules (local, state, and federal) to which it is subject. These may include, but are not limited to: • Developing internal and external policies that support public health agency goals and utilize the best available evidence; NoYesexample:
• Adopting and ensuring enforcement of regulations that protect the health of the community; NoYesexample:
• Developing and regularly updating vision, mission, goals, measurable outcomes, and values statements; NoYesexample:
• Setting short- and long-term priorities and strategic plans; NoYesexample:
• Ensuring that necessary policies exist, new policies are proposed/implemented where needed, and existing policies reflect evidence-based public health practices; NoYesexample:
• Evaluating existing policies on a regular basis to ensure that they are based on the best available evidence for public health practice. NoYesexample:

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Resource Stewardship: Assure the availability of adequate resources (legal, financial, human, technological, and material) to perform essential public health services. These may include, but are not limited to:

• Ensuring adequate facilities and legal resources

No res example:	No	Yes	example:	
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• Developing agreements to streamline cross-jurisdictional sharing of resources with neighboring governing entities No____Yes____example:____

• Developing or approving a budget that is aligned with identified agency needs No____Yes___example:_____

• Engaging in sound long-range fiscal planning as part of strategic planning efforts No Yes example:

• Exe	rcising fi	duciary car	e of the funds entrusted to	the agency for its use
No	Yes	example:_		

• Advocating for necessary funding to sustain public health agency activities, when appropriate, from
approving/appropriating authorities
NoYesexample:

Legal Authority: Exercise legal authority as applicable by law and understand the roles, responsibilities, obligations, and functions of the governing body, health officer, and agency staff. These may include, but are not limited to:

• Ensı	iring tha	t the governing body and its agency act ethically within the laws and rules (local, state,
and fee	deral) to	which it is subject
No	_Yes	_example:

• P	oviding or	r arranging f	or the provision of quality core services to the population as mandated by
law	through t	he public hea	alth agency or other implementing body
No_	Yes	example:	·

• Engaging legal counsel when appropriate No____Yes____example:_____

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Partner Engagement: Build and strengthen community partnerships through education and engagement to ensure the collaboration of all relevant stakeholders in promoting and protecting the community's health. These may include, but are not limited to:

• Representing a broad cross-section of the community No____Yes___example:_____

• Leading and fully participating in open, constructive dialogue with a broad cross-section of members of the community regarding public health issues No____ Yes____example:_____

• Serving as a strong link between the public health agency, the community, and other stakeholder organizations No____Yes___example:_____

• Building linkages between the public and partners that can mitigate negative impacts and emphasize positive impacts of current health trends No___Yes___example:_____

Continuous Improvement: Routinely evaluate, monitor, and set measurable outcomes for improving community health status and the public health agency's/governing body's own ability to meet its responsibilities. These may include, but are not limited to:

• Assessing the health status of the community and achievement of the public health agency's mission, including setting targets for quality and performance improvement No____Yes___example:_____

• Supporting a culture of quality improvement within the governing body and at the public health agency

No Yes example:

• Holdi	ng govei	rning body	members and th	ne health	director	/health	officer to	o high p	erforman	ce
standar	ds and e	evaluating	their effectivene	SS						
No	Yes	_example:								

• Examining structure, compensation, and core functions and roles of the governing body and the public health agency on a regular basis

No____Yes____example:_____

• Provi	iding ori	ientation and	d ongoing professional development for governing body r	nembers
No	_Yes	_example:		

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Oversight: Assume ultimate responsibility for public health performance in the community by providing necessary leadership and guidance in order to support the public health agency in achieving measurable outcomes. These may include, but are not limited to:

• Assuming individual responsibility, as members of the governing body, for actively participating in governing entity activities to fulfill the core functions No____ Yes____example:_____

• Evaluating professional competencies and job descriptions of the health director/health officer to ensure that mandates are being met and quality services are being provided for fair compensation No____ Yes____example:______

• Maintaining a good relationship with health director/health officer in a culture of mutual trust to ensure that public health rules are administered/enforced appropriately No____Yes___example:_____

• Hiring and regularly evaluating the performance of the health director No____ Yes____example:_____

• Acting as a go-between for the public health agency and elected officials when appropriate No____ Yes____example:_____

How has the board been functioning? Policy Development : (5) Yes/ Example	Indicate No and Yes No Yes
Resource Stewardship : (6) Yes/ Example	No Yes
Legal Authority : (3) Yes/ Example	No Yes
Partner Engagement : (4) Yes/ Example	No Yes
Continuous Improvement : (5) Yes/ Example	No Yes
Oversight : (5) Yes/ Example	No Yes

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