CALL TO ORDER; INTRODUCTIONS & APPROVAL OF AGENDA
Director Molly Gutilla called the meeting to order at 4:08 p.m.
MOTION: To approve the agenda as Presented
Motion by Celeste Holder Kling / Second by Joseph Prows / Carried Unanimously

PUBLIC COMMENT
None
DISCUSSION & ACTIONS

- **Internal Policy Changes, Dana Turner**
  Staff requests approval to retire the current COVID-19 policy and integrate that into the internal policy on infection control. The Health District has a capable infection control team providing direction for employees based on best practices. Leadership determined that this Infection Control Policy should be a Board-level policy.

  **MOTION: Retire the existing COVID-19 Policy and include changing the requirement for COVID-19 vaccinations to a recommendation within the Infection Control Policy.**
  
  Motion by Joseph Prows, Second by Celeste Holder Kling, Carried Unanimously

Discussion ensued about the very low risk of COVID-19 in our community. A Board member pointed out that the Health District could be justifiably criticized for retiring this policy but asks the question whether it is truly for public health. Internally, a few candidates for open positions pulled their application based on this policy and the Health District is out of alignment with other community health organizations. The policy needs to change as the landscape changes and to align with peer organizations in this community. Staff noted that the current Infection Control Policy is in draft with a statement of encouragement for all employees to be vaccinated. With a regrouping of staff, a review of the different exposure categories is underway. Kudos to Maggie Mueller who has done a lot of work around this policy.

- **Employee Culture/Climate Survey Update, Julie Kunce Field**
  The staff climate and culture survey was fielded in conjunction with the contracted six-month evaluation of the Executive Director. The Executive Director has since resigned. The Board has received results from Julia Novak at Raftelis. It is clear that there are things to work on and some extraordinary strengths within the staff. These results will be passed on to future leaders of the organization. It was announced that there will be focus groups with Julia Novak on December 6 and 7, likely at the Health District. It needs to be recognized that this is a snapshot in time in early October. Response was terrific – 98 employees. The highest level of agreement, at 92%, agree that they have a positive work environment. The lowest level was on professional development.

  Categories covered included the work environment, engagement, organizational values, organizational effectiveness, accountability, communication, and professional development. Areas of focus include communication, transparency, and engagement. Key themes:
  
  (1) Employees have strong relationships with coworkers and supervisors, 100% indicated they are comfortable among peers; (2) staff is dedicated to their work but have concerns about the organization’s operations and future; (3) coworkers generally communicate well with each other, top down communication needs improvement (36% indicated information from the Health District is disseminated in a timely manner). Other highlights include supervisors holding staff accountable for achieving goals; diversity and inclusion are valued, and a belief that there is opportunity for more innovation but feeling overwhelmed by rapid organizational changes. More than half (53%) of staff would like to see more opportunities for professional advancement. Directors tend to have lower levels of agreement than seen across the organization at the staff level. The Board felt it was important for the staff and community to know that the decision to take this on was concurrent with other ongoing investigations. The Board encourages staff to continue with the dialogue and information-sharing through the focus groups. It is an opportunity to take a deeper dive in a different format. Gratitude to the Board was expressed for engaging in this exercise. This is meant to set the stage for incorporating these metrics into normal practices going forward.

  This is rich information that can be built upon and is important information in identifying new leadership. Participants will receive feedback in the form of key take-aways from Raftelis. It was uplifting for some of the Board to receive positive feedback about the culture. The process ensured anonymity with an outside organization conducting the evaluation. There is a limit to who sees the
outcome and no comments are shared. Next step is to determine goals and metrics to reflect improvement over time and to maintain the positivity that exists today. There will be opportunities for staff to give input about utilization of the information.

- **Update on Interim ED Plans and Permanent Search**
  The Board chair noted that a lot has changed in the past six months and more changes are yet to come. With the departure of Robert Williams, the Board appointed Karen Spink as the acting ED before her mid-November departure. In the meantime, the Board has been doing due diligence, quickly and thoughtfully, to find the right person to fill this role as an Interim ED while they begin anew the search for a permanent ED. An announcement will be coming very soon. The plethora of changes in the last month were noted and the Board is focused on providing some stability to the organization.

**PRESENTATION**

**2022 Community Health Survey Key Findings and Dissemination Plan, Sue Hewitt**

The Health District had 2700 people respond to the survey (in the field from April 15 to July 15, 2022), more than any previous surveys. The team has already filled three data requests and have five more in the pipeline. This survey has been fielded ten times over the past 27 years and something has been learned every time. Utilizing the expertise from outside organizations provided a lot of opportunity for professional development amongst the team. Survey method uses a random sampling of addresses with an over-sampling in harder to reach populations. The survey went out in both English and Spanish with incentives to complete the survey, as well as an incentive to complete the survey online. The data is weighted demographically and geographic balance is pretty close to 78% online with 24 completed in Spanish. There were greater numbers of response from women and educated individuals while the team tried to reach those with lower incomes and people of color. Larimer Health Connect was asked to reach out to Medicaid users. The team has developed a draft of key findings and shared the data with Larimer County. Key finds: (1) A decline in overall health status (lowest levels in the history of the survey). (2) Health status income disparity grows – lower income households are more likely to have fair to poor health status. Data is being modeled to graphic representations. Sixty-one percent of the surveys returned are from within our boundaries.

Looking at the data with a health equity lens, chronic conditions come into focus. While under-represented populations have lower rates of hypertension and high cholesterol, it may be due to a lack of access to care. The percent of respondents in the range of obesity on their BMI increased by 7%. Among those in the Obese category, we are seeing much higher rates of high blood pressure, high cholesterol, and diabetes. Mental health concerns saw a significant uptick, with an increase in mental health diagnoses – depression and anxiety, as well as current mental health concerns. Age disparity is clear, with the 18 – 29 age group reporting mental health issues at more than double the rate.

Substance use, in some forms, saw a significant decrease including drinking less alcohol – 27% less now than before the start of the pandemic. Thirty-five percent report using cannabis on a daily basis. Vaping and other forms of nicotine are replacing cigarettes with an increase of 2 - 3%. Seventy percent of cigarette smokers and vapers indicated they are seriously considering quitting. Reports for dental health needs and access by income level are generally positive. The need for care continues across the community.

Ms. Hewitt shared a recommended dissemination plan including data sharing agreements, finalizing key findings, and making the report ADA compliant. Without any promotion, staff is already getting data requests. It is staff’s intention to promote availability of custom data requests and presentations. Staff is now developing in-depth summaries and hope to have a data dashboard live for 2023. A Board member inquired about how much of what the Health District assesses overlaps with the County and UCHealth. Each of those entities create assessments specific to their needs including emergency management and the health department. Staff coordinated with the City of Fort Collins to make certain one household doesn’t
get both surveys. Given the low response compared to state or national level surveys, are we overdoing the mailing? The data can be reported as randomized accurately. Staff feels confident in the precision of their data collection process.

While surveys were readily used to define priorities in the past, that has been less the case in the last ten years. Questions raised included whether we need to continue the surveys, do we push it to five years, and could we use probability based panels? It is important to look at the data and identify gaps in the community to determine the Health District role in filling those gaps. The information could be used to inform policy direction/decisions. Granularity is better with the Health District survey.

UPDATES & REPORTS

Executive Director Updates – Karen Spink
Staff is busy creating up an internal structure that will help support the new interim ED, as well as for the permanent ED. Lorraine Haywood has been appointed Interim Deputy Director; Dana Turner will oversee health services, and Jessica Shannon is helping with CIT. This is a team that has knowledge and the ability to keep things going through the transition. Appointed positions are limited to six months. The Health District will be losing Mike Ruttenberg and James Stewart in the next couple of weeks. They have been great assets to the Health District and this will be a loss. Leadership is seeing other resignations happening, impacting staff availability. Service levels may be significantly lower than the past. Staff has been reviewing positions to determine which should be filled now and which should wait for the Interim ED. Karen Spink has a meeting with Kevin Unger to discuss the agenda for the November 16 Joint Board Meeting. The primary purpose is to have the Boards meet each other and provide updates on UCH and the Health District as well as other projects they have been working on. Thank you to Molly Gutilla and Celeste Holder Kling for joining us at the all-staff luncheon. Staff enjoyed the time to connect with each other sans an agenda.

CONSENT AGENDA

• Approval of the September 27, 2022 Regular Meeting Minutes and the October 5, 13, and 19 Special Meeting Minutes
• August Financials and Amended January – July Financials
• Approval of Amendment to Policy 10-01: Financial Accounts Signature Policy
• Approval of Resolutions 2022-34 through 2022-44 updating signature authority

MOTION: To approve the consent agenda as presented

Motion by Celeste Holder Kling / Second by Ann Yanagi / Carried Unanimously

PUBLIC COMMENT (2nd opportunity)
Fabiana DiCamillo, an employee of the Health District, noted that she was struck with the results of the climate survey, particularly related to professional development, transparency, and engagement. She is wondering how the Board will ensure those three things will be addressed. How will the Board set measures to ensure recovery from recent occurrences? And how will the Board make certain this doesn’t happen again?

ANNOUNCEMENTS
• November 14, 4:00 pm – Board of Directors Regular Meeting and Budget Hearing
• November 16, 4:00 pm – Joint Board Meeting with UCH
• December 13, 4:00 pm – Board of Directors Regular Meeting

ADJOURN TO EXECUTIVE SESSION

MOTION: To adjourn to Executive Session for the purposes of discussion of a personnel matter not involving any specific employees who have requested discussion of the matter in
open session, any member of this body or any elected official, the appointment of any person to fill an office of this body or of an elected official, or personnel policies that do not require the discussion of matters personal to particular employees, pursuant to C.R.S. § 24-6-402(4)(f), regarding the Executive Director.

Motion by Julie Kunce Field / Second by Joseph Prows / Carried Unanimously

The Regular Board Meeting was adjourned at 5:25 pm.

Executive Session opened at 5:28 pm and closed at 6:15 pm.

**ACTION AS A RESULT OF EXECUTIVE SESSION**

The Board of Directors returned to the regular meeting at 6:26 pm.

MOTION: To appoint Lee Thielen as the Interim Executive Director for a period of six months.

Motion by Julie Kunce Field / Second by Joseph Prows / Carried Unanimously

A Board member noted excitement about Ms. Thielen’s appointment as Interim ED. Her resume is extensive with great related experience working in a government or non-profit setting, public health expertise and her experience as a Board member for the Health District. We are fortunate to have her join the team. It was noted that Ms. Thielen does not have an interest in the permanent position. Another Board member noted working with her on the Health District and hospital boards and is confident in Ms. Thielen’s neutrality and her passion about public health.

**ADJOURN**

MOTION: To adjourn the Regular Meeting

Motion by Ann Yanagi / Second by Julie Kunce Field / Carried Unanimously

The Regular Board Meeting was adjourned at 6:45 pm.

Respectfully submitted:

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Anita Benavidez, Assistant to the Board of Directors

Molly Gutilla, MS, DrPH, Board President

Julie Kunce Field, JD, Board Vice President

Celeste Holder Kling, JD, Liaison to UCH-North and PVHS Board

Joseph Prows, MD MPH, Board Treasurer

Ann Yanagi, MD, Board Secretary