

BOARD OF HEALTH MINUTES

TAMA COUNTY PUBLIC HEALTH & HOME CARE

Monday June 1, 2026 – 12:00 P.M.

Meeting held at Tama County Annex Building and via Zoom

**Members
Present:**

Micki Ferris
Lori Johnson
Kelly Purk
Sherri Vesely

Sherry Parks – via Zoom
Jolynn Harger
Kylee Cibula and kids
LeeAnna Kriegel

Chris Behrens
Richard Arp
Sally Custer
Heather Bombei – via Zoom

Members Absent: Curt Hilmer

The meeting was called to order by Sherry Parks, Chairman at 12:02 p.m.

Lori Johnson asked to add two items to the Agenda – they would be #13 - Approval for Agency Logo to Return to Public Health Logo and #14 - Approval to Cancel Contract with Cityscape Wound Services. Motion by Micki Ferris to approve adding these two items to the Agenda. Sherri Vesely seconded. Motion carried unanimously.

Micki Ferris moved to approve the minutes from the April 28, 2026 meeting as presented. Sally Custer seconded the motion. Motion carried unanimously.

Lori requested that Item #3 on the agenda be moved ahead of the reports so that Kylee Cibula could leave the meeting earlier. The Board reached a consensus to approve the agenda change.

Kylee Cibula introduced herself to the Board and shared that she is interested in potentially renting and/or purchasing the agency's RV to provide mobile mental health services in Tama County. She stated that she is nearing completion of her schooling to become a Psychiatric Mental Health Practitioner and expects to graduate in August. Kylee explained that she would be able to serve individuals from ages 1 to 100 and would like to establish her practice in Tama County due to the limited availability of mental health resources and the significant need for these services. She noted that transportation barriers in the county make a mobile clinic an appealing option.

The Board asked about her anticipated timeline for renting the RV. Kylee responded that she would complete her schooling in August and was currently exploring available options. She stated that while Tama County would be her primary focus, she may also provide services in neighboring counties, including Marshall County, as needed to support her practice and generate revenue.

Richard Arp commented that, based on the Board's support for expanding mental health services, he believed the concept would be well received. Sally Custer asked what costs, if any, would be incurred by the Board of Health, and Sherry Parks inquired about the potential income versus expenses associated with the arrangement. Lori stated that she would discuss the matter with the Board of Supervisors to gather their input. Kylee also expressed interest in viewing the RV in person. Discussion was tabled until a later date.

Reports:

Environmental Report:

Chris reported that he has been busy attending trainings and continuing work on an ongoing issue at Union Grove Lake that he has been addressing for several years. He also received a scholarship to attend Certified Pool Operator training.

Chris informed the Board that new legislation, effective July 1, will require all new construction projects to include a radon mitigation system. He stated that he is still awaiting guidance regarding his role in enforcing the new requirements.

Director's Report - 10 Essential Public Health Services Framework – Lori Johnson

1. Assess and monitor population health status, factors that influence health and community needs and assets.

- A continued issue in Tama County is food insecurity.
 - i. Food Pantry: Mobile food pantry continues monthly in Tama. The Mobile food pantry currently services 150 to 200 households a month.
 - ii. 5 Loaves Community Meal is held every Thursday at the Tama Civic Center from 4:30 – 6 p.m. They have been serving 210-220 people each week and are anticipating averaging 250 each week during the summer.
 - iii. South Tama County Food Pantry continues to serve the area.
 - iv. North Tama Food Pantry and Chrisitan Hands Across Traer (CHAT) serves Traer area.
 - v. Northwest Tama County Food Pantry serves Gladbrook.
 - vi. Meskwaki Senior Food Pantry serves Meskwaki.

2. Investigate, diagnose, and address health problems and hazards affecting the population.

- Communicable Disease Investigations: 0
- Active & Latent TB Cases: 3 latent
- Animal Bites: 1 dog bite in April
- Immunizations Given: 0 for April

3. Communicate effectively to inform and educate people about health, factors that influence it and how to improve it.

- Social Media Strategy: Facebook posts were regarding Emergency PHEP exercise, several severe weather posts/warnings, septic tank health, BOH award, Public Notice for termination of Medicare HH services, maternal health program, planting season awareness, moment of laughter day, American Heart Association – Heart Health, job ad for RN, maternal health survey, and mental health posts. Most popular was Public Notice for termination of HH Services.
- Posted educational information regarding the Avian Flu. Monthly posts will be done to meet grant requirements, along with fliers and billboards from now until the end of October.
- Coffee Talks: 1 scheduled at the Traer Library; 12 attended. Topic was Stress/Stress management, Skin Care and Dementia Alzheimer's.

4. Strengthen, support and mobilize communities and partnerships to improve health.

- Maternal Health: 4 visits provided in April
- Maternal & Child Health: April topic was Breastfeeding; 12 attended.
- SKIP: Meeting was cancelled
- NEI3A/COA: No April meeting
- Head Start Contract –0 Children seen
- ESA Council Meeting on 04/23– Lori and Stacy attended.

5. Create, champion and implement policies, plans and laws that impact health.

- Maternal Health & Child Wellness classes are now available via Zoom as well as continuing to be in person.
- The Family Cabinet has been getting some donations and items have been distributed. Clothes are available as needed. The Family Cabinet has been put on hold with the changes in staff.

6. Utilize legal and regulatory actions designed to improve and protect public's health.

- JIS 4/7 was attended by Lori
- FY 27 Private Well Grants Site Setup Webinar on 04/13 was attended by Lori and Stacy
- CIHCC Meeting on 04/16, Lori & Stacy attended
- 04/30 – Public Health Emergency Preparedness Exercise was held and our office was the facilitator for the County. EMA and local nursing home administrator joined the exercise.
- Lori, Gloria and Stacy attended the Public Health Office Hours via Zoom on 04/07.

- HHS Alignment meeting was attended 04/21 in Cedar Rapids. Information was emailed regarding beginning stages of this alignment.

7. Assure an effective system that enables access to the individual services and care needed to be healthy.

- Foot Clinics: 4 office clinics were held for 4 people.
- Home Health: Our referrals have dropped significantly. We had 3 Maternal Health admissions and 6 home health admissions. Announcements on Facebook/Newspaper/Zoom meetings directly impacted our referrals.
- We went live with Mosai 3/11. It is being reviewed with decertifying and the need to continue. Looking at other avenues for faxing capability that would be more cost effective.

8. Build and support a diverse and skilled public health workforce.

- Trying to retain the current staff. We currently have 2 RN's (Kelly & LeeAnna), 2 Home Care Aides (Gayle & Gina), 1 Home Helper (Robin), Environmental Health Office (Chris), 2 support staff (Jolynn & Missy), 1 Interim Director (Lori). Gloria is part-time Public Health Nurse, and due to budget cuts that position will be eliminated 6/30/26.
- We celebrated Brody Stoneking's graduation for High School (son of Jolynn and Travis Harger) and Nurses Day!

9. Improve and innovate public health functions through ongoing evaluation, research and continuous quality improvement.

- QAPI: Current processes/policies are being reviewed. These will go to the Advisory Board for their review and recommendations to the Board of Health. There can be no reference to our Medicare Certification

10. Build and maintain a strong organizational infrastructure for public health.

- Kelly and Gayle will be taking over the foot care clinics with Missy assisting with the scheduling. These will be held in 3 main locations with possible in-home cares to those in need.
- Gloria's, part-time public health nurse, last day will be 6/30/26.
- Attended May 11th BOS Meeting due to agenda item "regarding Public Health & Home Care Budget".
- Attended May 11th BOS Meeting due to agenda item "appropriate last 10% of budgets to designated departments". Our department was one of them listed. This was approved.
- FY 26 Budget Amendment Hearing is set for June 8th.
- Have asked to be on the June 1 BOS Meeting agenda to provide them with our voluntary decertification update.
- Request was received 5/19/26 – regarding office space for Nicki Hartwig, Child Health Adolescent Services. Want to move all the public health staff to 1 hallway instead of split between the two hallways.
- Attended Department Head Meeting 5/19 – items discussed were:
 - County Vehicles being taking home and if this is a taxable expense to the employee or now.
 - "Modified duty" when someone returns after FMLA leave
 - If an employee is off more than 3 days, they are to be given FMLA paperwork.
 - Can request Dr slip if off 1 or 2 days from work.
 - Talked about Brady Giglio list for law enforcement
 - Need 50 + 1 vote to keep union
 - Talked about possibility of sharing documents/forms

New HHS Alignment Focus – Public Health Core Services Funded by Iowa HHS:

There will be seven regions; we are in District 3 (total of 16 counties in our District). We are with Mitchell, Howard, Winneshiek, Allamakee, Cerro Gordo, Floyd, Chickasaw, Fayette, Clayton, Franklin, Butler, Bremer, Hardin, Grundy, Marshall, and Tama

There is a District 3 meeting that will be held June 4th in Waverly, that we will be attending. They will be discussing takeaways from the recent Public Health Alignment Town Hall on the "Lead Entity" model.

Specifically, they want to explore how our district can support the county or counties interested in serving as the lead entity and compile shared questions (and potential solutions) to submit to Iowa HHS. This meeting will also give us an opportunity to connect with new district partners we have not previously worked with. The RFP will be posted in August 2026. Applications will be due in October. Contracts will begin in January 2027. The project period will be January 1, 2027 to December 31, 2032. Planning will be the focus of year 1. This year will be used to identify strengths, weaknesses, and gaps within each county across the district. Year 2 will focus on developing a district system improvement plan that will focus on using the assessment, developing a plan to improve communication, coordination, efficiencies, and capacity to meet the core service needs. The first three Core Services will be focused on the first year.

Chronic Disease & Injury Prevention – “includes helping people live longer, healthier lives across the lifespan by promoting interventions to prevent and limit complications from conditions that could result in disability or death”. Core functions:

- **Outreach, Education, & Communication** – disburse information, provide technical assistance and support to local providers.
- **Partnership Development & Collaboration** – Convene system partners, link to other HHS service systems and initiatives.
- **Accountability & Performance Management** – developing plans that improve collaboration, coordination, efficiencies, and capacity.
- **Prevention Services** – working completed contracts or agreements with support from lead entity and HHS.
- **Assessment & Surveillance** – accessing capacity and gaps across the districts with assistance and input from lead entities and local providers.
- **Policy Development & Support** – receiving input from lead entities and local providers.

Communicable & Infectious Disease Control – “includes preventing infectious diseases through education and providing immunizations, as well as finding and responding to cases of infectious diseases”. Core Functions:

- **Training Technical Assistance & Consultation** – disseminating information, offering technical assistance and support to local providers. Responding to routine clinical questions
- **Education & Communication** – providing information, promoting prevention and awareness, offering campaigns and messages, engaging the communities.
- **Operations, Supplies, & Ordering** – improving efficiencies in routine investigations
- **Disease Investigations** – done at the local level and will be supported from the lead entity and Health & Human Services. Will be working with lead entity on county staffing and budget plan to carry out lawful obligations that encourage agreements & partnerships.
- **Immunizations** – performed locally and support from lead entity & HHS as needed.
- **Screening, Testing, & Treatment** – will be performed locally with support as needed from lead entity & HHS.
- **Surveillance & Detection** – conducting statewide surveillance and epidemiological activities with lead entity & HHS support as needed.
- **Data & Analytics** – lead data strategy with support from lead entity and locals.

Environmental Public Health - “includes protecting and promoting health by decreasing environmental public health threats, reducing health impacts from harmful environmental exposures, and ensuring safety standards are met for programs regulated by the department”. This is not the PWG functions. Core Functions:

- **Training Technical Assistance, & Consultation** – disburse information, offer technical assistance to local providers, respond to routine clinical questions.
- **Education & Communication** – providing information, promoting prevention and awareness, offering campaigns and messages, engaging the communities.
- **Exposures & Reportable Conditions** – working with lead entity and HHS on routine environmental exposures and investigations.
- **Screening & Testing** – will be performed locally with support from lead entity & HHS.
- **Environmental Services** – continues at local level with support from lead entity & HHS.
- **Surveillance & Detection** – conduct statewide surveillance and epidemiological activities with lead entity & HHS support as needed.
- **Data & Analytics** – lead data strategy with support from lead entity and locals.

Emergency Preparedness & Response - “includes being ready to respond to disasters, disease outbreaks, and other crises by planning and working with partners and the public before, during, and after a public health emergency”.

Current Preparedness Service Area structure will remain in place.

Expectation for lead entity to work with Service Area’s in system/district planning.

Future consideration will be done to bring Emergency Preparedness & Response into lead entity structure if resources allow.

Core Functions:

- **Command & Control Structure**
- **Supplies & Resources**
- **Training**
- **Communication**
- **Planning**
- **Exercising**

Maternal, Child, & Adolescent Health – “includes improving the health, oral health, nutrition, and well-being of women, infants, children, and adolescents by promoting and providing prevention education and services that support healthy pregnancies, safe births, and strong starts for children”.

Current collaborative service area structure will remain in place.

Expectation for the lead entity to work with CSA’s (Collaborative Service Area) in system/district planning.

Future consideration for bringing Maternal Child Adolescent Health into lead entity structure if resources allow. Dr. Kruse shared that specific details will continue to be refined through the alignment planning process.

Core Functions:

- **Data & Analytics**
- **Assessment & Surveillance**
- **Policy & Development Support**
- **Accountability & Performance Management**
- **Outreach, Education, & Communication**
- **Partnership Development & Collaboration**
- **Prevention, Care & Treatment Services**

They will be moving towards data driven and outcomes with health improvements.

Waiver: No patients was served under the Frail and Elderly Waiver in March. There was 4 Maternal Health Home visits in April.

Financial Report:

Admissions decreased for the month of April. Skilled Nurse visits increased for April. Home Health Aide visits and hours decreased for the month of April. Our revenue increased for the month of April.

The Board of Supervisors released the last 10% of our budget that they were holding for this fiscal year. Lori worked on lowering the Stericycle contract (almost in half), discussions about serving patients in a 33 mile radius, and has been working on the Mosai contract termination with Brent Heeren and David Turner.

Micki Ferris moved to approve the Financial Report. Richard Arp seconded. Motion carried unanimously.

Old Business:

A. Discussion/Possible Action of Candidate Qualifications for Director Position

Discussion was held regarding whether the Director position should remain a Registered Nurse position or be opened to a broader pool of qualified candidates. Sally Custer stated that the position would need to be advertised regardless of the qualifications required. Micki Ferris commented that, while it makes sense to keep the position as an RN role long-term, she would like to see Lori remain in the position because of her knowledge and experience. Sally Custer felt the position should be advertised to see what candidates apply and noted that Stacy had indicated the duties could be performed by one person.

Sherri Vesely stated that the Director salary could potentially be reduced since many responsibilities have been eliminated due to the agency's Medicare decertification. The Board reviewed the current policy, which states that a Registered Nurse license is required for the position.

Richard Arp stated that having an RN in the position may be beneficial in the long term; however, given the uncertainty surrounding future decisions by the Board of Supervisors, he felt it would be difficult to hire someone at this time. He recommended that Lori continue serving as Interim Director for several more months. Sally Custer suggested advertising the position while allowing Lori to remain Interim Director until a permanent hire is made. Sherry Parks stated that the policy should remain unchanged and, if no qualified applicants are received, the Board could revisit the policy requirements.

Richard Arp stated that he did not believe the Board should begin recruiting for a new Director until there is more clarity regarding the Board of Supervisors' plans. He suggested revisiting the matter in three to six months.

Motion by Richard Arp to table the discussion until the August meeting. Sherri Vesely seconded. Sally Custer opposed the motion. Motion carried.

B. Discussion/Possible Action of Starting Wage for Director Position – tabled until August

C. Designate a Hiring Committee for the Director Position - tabled until August

New Business:

A. Discussion regarding process for Policy/Form changes – Advisory Board or straight to Board of Health. This item was tabled until a later date.

B. Discussion/Approval to Dispose of 3 County Cars, after 7/1

Motion by Richard Arp to dispose of 3 County Cars after 7/1. Micki Ferris seconded. Motion carried unanimously.

C. Discussion/Approval of Cancellation of SHP Interface Software

D. Discussion/Approval of Termination of Contract with The Shredder for \$1,120

E. Discussion/Approval of Termination of Mosai Contract with buyout = \$28,976.64

Richard Arp moved to approve the above three Agenda items. Micki Ferris seconded. Motion carried unanimously.

F. Discussion/Approval of using EGold or Aureon for Fax Services

After discussion, Richard Arp moved to approve using EGold for fax services. Micki Ferris seconded. Motion carried unanimously.

- G. Discussion/Approval of Finance Committee Recommendations RE: Past Due accounts to small claims court or Offset Program and account write off
Motion by Richard Arp to approve the Finance Committee recommendations. Micki Ferris seconded. Motion carried unanimously.
- H. Discussion/Possible Action to Change Full Time RN Positions and Assistant Director/Interim Director to Salaried Exempt Positions, with effective date desired.
This item was tabled until August
- I. Discussion/Approval of Annual or Bi-Annual Maintenance Program Agreement with Hawkeye Electric for Generator Services
Discussion was held. Motion by Richard Arp to do an Annual Maintenance Program Agreement with Hawkeye Electric for Generator services. Micki Ferris seconded. Motion carried unanimously.
- J. Discussion/Approval of Contracts Signed
 - a. Contract 5884BT186, Influenzas A/H5N1 Response Contract Amendment in the amount of \$9,098
 - b. FY 27 Private Well Grant – PHTHOEL27086 contract for 7/1/26-06/30/32 (with extensions)Motion by Richard Arp to approve the contracts signed. Micki Ferris seconded. Motion carried unanimously.
- K. Discuss HHS Alignment Information – tabled for a future meeting
- L. Approval to return to previous Public Health Logo
- M. Approval to terminate contract with Cityscape Wound Services
Motion by Richard Arp to approve the return to the Public Health Logo and to terminate the contract with Cityscape Wound Services. Micki Ferris seconded. Motion carried unanimously.

Correspondence: None

Public Comment: None

Future Meeting Dates: The next Board of Health meeting will be held on Monday, June 29, 2026 at Noon.

The meeting adjourned at 1:23 P.M.

Respectfully Submitted,

Jolynn Harger, Executive/Financial Assistant