

Environmental Health Continuous Improvement Board (EH CIB) Charter

Purpose of the Board

The Environmental Health Continuous Improvement Board (EH CIB) was chartered by the Local Public Health Association (LPHA) and the Minnesota Department of Health (MDH) to fundamentally advance Minnesota's state-local partnership in Environmental Health (EH). The Board will work broadly to monitor and advance state-local work in EH.

Background

While delegation agreements between local agencies and MDH remain a large component of the relationship, there is acknowledgement that there is a higher-level need to better integrate EH work into public health generally. Work over the past decade have greatly improved the working relationships between local agencies and MDH. This has positioned the Board to be the vehicle for future, collaborative improvements in the broader EH frame.

There is a long history of LPHA and MDH coming together to improve EH across the state. Some have worked better than others. There is current commitment from both parties to work collaboratively to make improvements.

As of March 24, 2017, the Board has become a standing workgroup of the State Community Health Services Advisory Committee (SCHSAC).

Vision Elements

- "WE" work together to protect the health of all Minnesotans.
- Results and the quality of programs (not the how or who) are the basis for decisions.
- Communication is open and flows in all directions; knowledge is shared.
- Expectations are clear and understood by all.
- The perspectives and contributions of all are valued.

Board Structure

Membership

The Board will be composed of ten members plus ad-hoc members, as necessary. Members represent the following constituencies:

- 1 metro CHBs
- 1 cities (non-CHBs)

- 2 non-metro CHBs
- 4 CHBs
- 1 the Minnesota Department of Health (MDH)
- 1 (or a split 2) State Community Health Services Advisory Committee (SCHSAC)
- Ad-hoc other state agencies

Regional representation, as indicated in the chart below, is ideal.

	NW	NE	WC	С	SW	SC	SE	Metro
City	1							
CHBs	2		2		2		2	
SCHSAC	1 (or a split 2)							
MDH	1							
Other State Agencies	Ad-hoc							

When vacancies exist, the Board will seek volunteers. Constituency preferences, diverse program structures, and a balanced mix of perspectives including both large and small agencies, geography that touches many regions, and individuals holding different types of positions (i.e., both EH Directors and CHS Administrators) will be considered.

Membership Terms

Board members representing local jurisdictions will have staggered, two- year terms. Board members representing state agencies (MDH) will not have term limits; the agency will decide who to appoint.

Alternate Board Members

The Board will not appoint alternate members. If board members are unable to attend a meeting, they are expected to inform the co-chairs. In addition, they are encouraged to send someone in their place. However, that person may not vote; only board members can vote.

Leadership

The Board will have co-chairs, one person from a local jurisdiction and one person from MDH. The MDH co-chair is decided by the agency and does not have a term limit. The local co-chair is

appointed by the Board and will remain co-chair until their membership term is over. To help leadership transition, the Board will also appoint a local co-chair elect.

Facilitation

The Center for Public Health Practice (PHP) will serve as a third-party facilitator for the Board and support the co-chairs in agenda development and Board organization.

Board Meetings

- A. The Board will meet at least four times per year.
- B. Meetings will be held hybrid with in-person options made available as possible.
- C. Meeting participants that are not Board members will have the opportunity to contribute to the discussion at times to be determined and communicated by the Board. Only Board members will be allowed to vote.

Guiding Principles

The Board will operate using the following principles:

- A. Continuous Improvement
- B. Forward Thinking The Board will honor the past yet focus on the future.
- C. **Customer Focus** Customers will be identified, and their perspectives will be considered in Board decisions and actions.
- D. **Inclusive** Processes will be transparent, collaborative and inclusive.
- E. Accountable The Board will hold itself accountable for its actions.
- F. **Partnership** –The Board recognizes that environmental health in MN relies on the state-local partnership; each of the partners needs each-other. The Board will strive to serve as a model of this partnership.

Team Norms

Decision-Making

Decisions will be made by consensus. A formal vote process will be used to gauge consensus. If the vote determines consensus does not exist, the Board will use various methods to reach consensus.

In addition, the Board will adhere to and hold each other accountable to the following ground rules and member expectations.

Ground Rules

- Honor differences
- Accept that conflict and disagreement will happen
- Be prepared and actively participate in the meeting, silence will be considered agreement
- No meetings after the meeting
- Listen to understand
- Respect the value of everyone's contribution
- Focus on issues not people

Member Expectations

- Attendance If a Board member misses more than two meetings per calendar year or two consecutive meetings, their continued membership will be considered by the co-chairs. The co-chairs may request the member to forfeit their membership.
- Participation Members are expected to prepare for and actively participate in meetings.
- Representation Members have been selected to represent a certain constituency.
 Members are expected to communicate with and seek input from those they represent.

Accountability

This section will be developed. The Board intends to set objectives and corresponding performance measures and report quarterly accomplishments to SCHSAC, LPHA, and MDH.

Communication Plan

To inform stakeholders and ensure transparency, the Board will employ the following communication strategies:

- The Environmental Health Continuous Improvement Board (https://www.health.state.mn.us/communities/environment/local/ehcib/index.html) webpage and Environmental Health Continuous Improvement Board (EH CIB) SharePoint site will be maintained. The Board will use it to post information about itself and its meetings including agendas, minutes and other meeting materials.
- A GovDelivery list will be maintained so that interested parties can sign up to receive email
 updates from the Board. These updates will be used primarily to announce when new
 information and materials are on the website.
- Take-away messages will be developed at the end of each Board meeting. In addition to being posted on the website, Board members will share the take-away messages with their constituents.

• In addition to the above, the Board will look for other avenues such as at LPHA meetings, SCHSAC meetings, MEHA meetings, monthly Regulators breakfasts, and the CHS conference to provide updates and seek input.

Current Workplan

Go to Environmental Health Continuous Improvement Board (https://www.health.state.mn.us/communities/environment/local/ehcib/index.html) view and past and current workplans.

Charter Action	Date	Ву	Notes	
Approved	7/2/2014	All Board Members	Original Charter	
		All Board Members	November 2018 update of charter	
	6/21/2019	Megan Drake-Pereyra	Updated based on new membership structure and changes approved by all Board members	
			Updated charter	

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Environmental Health Continuous Improvement Board
(https://www.health.state.mn.us/communities/environment/local/ehcib/index.html)

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To obtain this information in a different format, call: 651-201-5000.