

**LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
BOARD OF HEALTH MEETING
CURRENT AGENDA**

4:00 PM, Tuesday, December 9, 2025

**In-Person participation – Lincoln-Lancaster County Health Department,
3131 ‘O’ Street, Lincoln, Room #2222
Lincoln, NE 68510**

AGENDA ITEM	DESCRIPTION	SUPPORTING DOCUMENTS
<u>CALL TO ORDER</u>	Roll Call	
<u>APPROVAL OF AGENDA</u>		Agenda
<u>APPROVAL OF MINUTES</u>	A. Regular Meeting – October 14, 2025	Minutes
<u>PUBLIC SESSION</u>	Any person wishing to address the Board of Health on a matter not on this Agenda may do so at this time.	
<u>DEPARTMENT REPORTS</u>	A. Health Director Update – Director Kernen General Department Update - Budget Update - Legislative Update - Building Redesign Update - Other	
<u>CURRENT BUSINESS</u> Action Items	A. Review and Action on Proposed Board of Health Conflict of Interest Form and related Process as referenced in the recently updated board bylaws – Rick Tast/John Ward	Proposed Board of Health Conflict of Interest Policy and related Acknowledgement and Disclosure Form
<u>CURRENT BUSINESS</u> Information Items	A. Lead Program Update – Eliza Newkirk, Environmental Health Specialist, and Kaycee Jensen, Public Health Nurse B. HazToGo – Lincoln’s Hazardous Waste Center, Reuse Store Project Update – Brock Hanisch	
<u>FUTURE BUSINESS</u>	A. Request Additional Information/Topics for Future Agenda	

AGENDA ITEM	DESCRIPTION	SUPPORTING DOCUMENTS
	i. Review and Action on the Proposed Board of Health Vaccine Resolution – Director Kernen	
<u>ANNOUNCEMENTS</u>	A. Next Regular Meeting – January 13, 2026, 4:00 pm, at LLCHD, Conference Room TBD	
<u>ADJOURNMENT</u>		

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LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Board of Health October 14, 2025

I. ROLL CALL

The meeting of the Board of Health was called to order at 4:00 PM by James Michael Bowers at the Lincoln-Lancaster County Health Department. Members present: James Michael Bowers, Katie Garcia, Stacie Bleicher, Jackie Miller, Tom Randa, Dustin Loy, Sean Flowerday, Jasmine Kingsley, Tamara Sloan, Rick Tast (ex-officio), John Ward (ex-officio), and Amanda Callaway (ex-officio).

Members absent: None.

Staff present: Kerry Kernan, Leah Bucco-White, Raju Kakarlapudi, Joe Stelmach, Justin Daniel, Tommy George, Charlotte Burke, David Humm, Echo Koehler, and Janette Johnson.

Others present: None.

II. APPROVAL OF AGENDA

Mr. Bowers asked if there were any corrections to the agenda.

There were no additions or changes to the agenda.

Motion: Moved by Dr. Loy to accept the agenda as printed; seconded by Dr. Garcia. No discussion. Motion carried by a 9-0 roll call vote.

III. APPROVAL OF MINUTES

Mr. Bowers asked if there were any corrections to the minutes. No corrections were requested.

Motion: Moved by Dr. Miller to approve the September 9, 2025, minutes as printed; seconded by Mr. Flowerday. No discussion. Motion carried by a 9-0 roll call vote.

IV. PUBLIC SESSION

No one came forward.

V. DEPARTMENT REPORTS

A. Health Director's Update

Director Kernen asked if there were any questions on the materials included in the board packet; there were none.

Next, Kernen provided the following department update:

Legislative Update:

Kernen reminded the board that she has been working with the Nebraska Association of Local Health Directors (NALHD) on some proposed community health worker-related legislation. The original intent focused on a state plan amendment; however, it was decided to separate the state plan amendment from the certification component to make it more palatable to the senators this year. A draft resolution has been prepared and they hope to have several senators interested in sponsoring the bill. The first step will involve the certification component and then next year they will focus on the state plan amendment. Kernen visited with the Nebraska Nurses Association and reported that there are some nurses that have the perception that community health workers (CHWs) are taking over a part of their job. Kernen explained that the CHW are intended to support the nurses and the healthcare team which would better allow the nurses to practice at the highest level of their licensure. Discussions are also occurring with the Nebraska Hospital Association and Health Care Centers of Nebraska to educate them on the bill. In response to a question of Mr. Flowerday regarding sponsorship, Kernen reported that they would like Senator Hardin to sponsor the bill. Kernen will share more information as it becomes available.

Six Pillars for Emotional Wellbeing:

The department released the fourth video of the Six Pillars two weeks ago. The latest video is titled *Relational Connectedness*, which is a 20-minute video focusing on the importance of children having positive relations in their life to promote emotional stability. The fifth video will be released the end of October and the last video in December. Kernen stated that several community partners are using these videos for internal discussions and hosting community events that support this initiative. The department is discussing how to expand upon this effort.

Government Shutdown:

Today is the 13th day of the shutdown. Locally, the department is watching the WIC and the Healthy Families America (HFA) Programs very closely. Currently, department operations are business as usual and will be until the end of the October. The WIC team meets weekly with State WIC to ensure that they are staying abreast of information

discussed from federal partners. Kernen reported that she has been involved in public health for 25 years and, during this time, WIC services have never been shut down, as there has always been surplus and/or carryover funds available. More information will be provided as it becomes available.

Dr. Loy questioned the potential impacts to the infectious disease program due to the significant CDC cuts. Kernen reported that any information provided to the department comes from the State. They rely on the CDC data relative to what is happening across the United States as well as outside the country that could have potential impacts. Kernen noted that the routine infectious disease calls with CDC have been cancelled the past couple of weeks.

Vaccinations:

Kernen reported that the interim CDC Director signed the latest recommendations from the Advisory Council on immunization practices; this caused Kernen great concern, especially as it relates to the COVID vaccine for the pediatric population and the Vaccine for Children (VFC) doses, which could not be provided to the department until these recommendations were approved. Today, the department received vaccine and are developing standing orders to provide the vaccine to whoever is eligible for VFC. The COVID vaccine is readily available throughout the community.

Kernen stated that she is concerned about the Advisory Committee on Immunization Practices (ACIP) recommendation on the MMR vaccine to separate it into three separate vaccines; the MMR vaccine has been in existence since the late 1930s. She is not sure what this would look like for the state of Nebraska and the VFC Program, as they are required to follow the ACIP guidelines.

Expansion of STI Outreach Testing:

Director Kernen stated that until recently the department did not conduct STI outreach testing in the community, noting that this has been done by Douglas County for about eight years. The department has received some additional funding from the Ryan White Grant and so the department will pilot this concept and build their capacity for outreach testing via urine testing for Gonorrhea and Chlamydia. They are considering point-of-care testing for HIV and Syphilis which would involve a finger prick and run these through the lab. One of the disease intervention specialists did this at a local tavern and there were two individuals who wanted to be tested. They are hoping to expand this testing to other public facilities--working discreetly with individuals who are interested to obtain urine samples to bring back to the department lab. The department will continue to allow individuals to come through the STI Clinic for expanded testing.

Reaccreditation Update:

The department received notification of its 5-year reaccreditation approval through the Public Health Accreditation Board. The department submits an annual plan that identifies how we are addressing standards and measures, and it was reported that we are doing a very good job. Kernan indicated that our reaccreditation is up in 2028.

Equity Committee on Health Outcomes (ECHO):

The ECHO Committee just celebrated its second year. The group has done an amazing job providing educational opportunities to staff. There have been multiple cultural panels who presented at department all-staff meetings and provided specific perceptions of the challenges that encounter when seeking services, etc. The committee members have done a very good job over the past two years.

Fetal Infant Mortality Review Team Update:

Kernan provided an update on her interest in establishing a fetal infant mortality review (FIMR) team in Lincoln/Lancaster County similar to what is done in Douglas County, which she oversaw. The first step was to get a contract with the state that mirrors the Douglas County contract. She noted the contract has been signed. A part-time public health nurse will be hired and will be responsible for extracting medical records from the mother's prenatal labor and delivery, postpartum, and pediatric visit data as appropriate. Once the data is extracted, the data is presented in aggregate form (with any identifying information removed) to a FIMR team consisting of physicians, social workers, WIC, etc. to look at contributing factors to the infants' death. After a year, they will build a community action plan to address what is happening in infant mortality. The current death rate averages between 30 to 35 infants per year (from their first breath up to 1 year old). The majority of infants die from congenital anomaly. This nurse will report to Kerry until she gets established.

Cold Weather Plan:

Maize Humm and the climate plan team are working on a cold weather plan and will be presenting a draft to the mayor by the end of the year. The team put together a comprehensive heat plan, which included setting up cooling centers. The cold weather plan presents as more complicated and could include anything from snow, ice, wind chills, and other factors, and there may be nine levels relative to notifications. Because the extreme temperatures occur during the night, the warming center would have to be open in the middle of the night so that presents a unique challenge with staffing support. They will also need to determine how long to keep it open based on the forecast. This involves many factors including the unhoused and senior populations. They plan to develop a 1-page document similar to what was done for the heat plan. It is likely that

they will continue to focus on using Matt Talbot and the City Mission as well as Sara Hoyle to coordinate these efforts.

Kernen indicated that there were five cooling stations this past summer. As more people became aware of the stations, the number of individuals utilizing the stations increased. Mr. Flowerday indicated that there has been discussion about piggybacking with the county contracts for churches and schools that are utilized for polling and elections, as these facilities have available resources such as tables and chairs. Kernen noted that the Mayor highlighted the team's work on the heat plan and mentioned the upcoming cooling weather plan at last week's State of the City address.

State Contract for County Corrections Medicaid Services:

Under LB921, the department has a contract with the State to allow a certified application counselor (CAC) to be onsite at the Lancaster County Corrections three (30 half days a week. The CAC is responsible for assisting inmates who are scheduled for release to complete and submit their Medicaid applications, which are expedited with the State. The goal is to get their Medicaid Card before they are released; however, this is not always occurring. This staff person is responsible for following up to ensure the individual receives their Medicaid card and know how to use it, as well as helping them get linked to a primary care provider (PCP) and other resources that may be needed. From December 4, 2024, to October 12, 2025, 909 individuals have had contact with the LLCHD CAC. This is a 5-year contract; the department is working with the State to get obtain quarterly data.

Building Redesign Update:

Sampson Construction hopes to complete their work by the end of October. If so, the lower level will be accessible in December once the furnishings and audiovisual equipment are installed. A public open house will be hosted by the department at some point.

V. CURRENT BUSINESS (Action Items)

A. Review and Action on Proposed Revisions to LMC 8.20, Lincoln Municipal Code Sections 8.20.030, 8.20.070, 8.20.080, 8.20.130, and 8.20.220 – Justin Daniel

Justin Daniel, Food Safety Program Supervisor, reviewed the proposed food changes to the Lincoln Food Code. This past legislation session the legislature passed LB245, which adopted the 2022 FDA Food Code into law. The department is working to modify the local food code to be in tandem with the recent passage of this bill, which now requires a food protection manager certification and "no bare hand contact" with ready-to-eat foods.

Other significant changes include cold holdings at 41 degrees Fahrenheit across the state and the handwashing minimum temperature at a hand sink is now 85 degrees Fahrenheit, which was reduced from 100 degrees.

Justin provided an overview of the redlined version of the code changes per LB245. Relative to the statewide certified food protection managers, each establishment must have a person in charge that has shown proficiency of required information by passing a test as an accredited program. There are some exemptions for establishments that are considered low risk such as ice cream retailers, bars, coffee houses, etc. Justin explained that there are 12 accredited food programs that are accepted. Individuals completing the food protection manager certification receive a 5-year certificate. Justin noted that in the Lincoln and Lancaster County 3-mile jurisdiction this requirement already exists for food protection managers but the certificate is currently only valid for three years. They are proposing to modify the local code so the food protection manager permit would expire on the same date as the submitted food protection manager certification accredited by the Conference for Food Protection--this will align the expiration dates of the local and national credentials. Currently, the cost of the 3-year certification is \$30; they are proposing that the 5-year certification remain at \$30.00. Justin explained that the Lincoln Municipal Code gives the authority to the Health Director to suspend or revoke food protection manager permits as necessary for continual noncompliance.

The other modification that is being proposed to the code relates to the prevention of contamination from hands. Prior to LB245, the state did not adopt any no bare hand contact. However, Justin noted that in 2016, the City of Lincoln did adopt this into the local code to reduce food borne illnesses such as norovirus outbreaks. Justin indicated that the intent is to minimize bare hand and arm contact with exposed food. The 2022 food code states that food employees may not contact exposed ready-to-eat food with their bare hands with a few exceptions including foods that have a cooking process; there are exceptions if approval is granted from the regulatory authority with the appropriate documentation. Now that the state has adopted the no bare hands regulations, Justin suggests that it be removed from the local code.

Justin stated that cold holding temperatures are very important when the staff conduct inspections. The 2017 code amendment provided for allowances between 41- and 45-degrees Fahrenheit if the equipment being used was installed before March 8, 2012, and explained that the state provided a grace period for the older equipment but now is requiring all equipment to cold hold at 41 degrees or less. The 2017 food code also required 100 degrees Fahrenheit as a minimum temperature for handwash sinks but the 2022 code was revised to allow for 85 degrees Fahrenheit. Justin noted that the Conference for Food Protection makes

recommendations to the FDA to revise their code, which are all science-based. Justin reported that there was a study conducted that showed that hands can be effectively washed at 85 degrees. Some additional clean-up language related to LB262 relative to cottage food and farmer market operations referencing the state statute is also being proposed.

In response to an inquiry of Dr. Miller relative to how long the national regulation for manager certifications has been for five years, Justin indicated that the national certification has been five years for quite some time and was not a recent revision. Tamara Sloan indicated that she received her national certification in 2016 and it was a 5-year certification then.

In regard to the proposed language, Justin explained that establishments can use their 5-year permit issued by the state and will need to take the national exam every five years. Tamara reported that she found the local engagement helpful and staff's willingness to share information and address issues and questions of local retailers. Justin reported that if they were to continue to conduct these sessions, it would be for information sharing purposes and would not involve a renewal process. In terms of the local permits, the serve-safe certificates are brought into the office and are tracked in a database.

In response to a suggestion of Dr. Loy, Justin reported that he would revise the proposed text to read "from an accredited program". Sloan requested that a list of all 12 accredited programs be made available on their website.

Justin explained that the Food Advisory Committee met on October 1, 2025, and held two public meetings the first week of October. The next step is to take these proposed changes to the City Council for their review and action. Once it is approved, the department will send this information to the industry and the food managers identified in their database to inform them of these changes.

Following some discussion regarding the 5-year certification process, Justin explained that the proposed changes are intended to harmonize with the state law. Therefore, once a local permit expires, the state requires that managers will have to take the full test to receive their certification.

Justin is requesting that the board adopt the proposed language to the local food code with the noted amendment clarifying the accredited program.

Motion: Moved by Ms. Sloan and seconded by Dr. Miller. No discussion. Motion carried by a 7-0 roll call vote.

Due to the brief absence of President Bowers, Vice President Garcia requested a motion to approve the proposed language as amended.

Motion: Moved by Dr. Miller and seconded by Dr. Loy. No discussion. Motion carried by a 7-0 roll call vote; Bowers and Randa absent.
Mr. Randa exited the meeting at 4:40 p.m.

VI. CURRENT BUSINESS (Information Items)

A. Vaccine Updates and Review of the Proposed Resolution for the Board's Action at the December 9, 2025, Board Meeting – Director Kernén

Director Kernén referenced a proposed resolution that will be scheduled for consideration at the December Board Meeting. She has asked Tommy George and the epi team to share information on vaccination data for Lancaster County. The resolution was written with the intent of what is occurring at the federal level with ACIP, CDC and the current HHS Secretary to provide an opportunity for this board to take a local stance.

Tommy George, Epidemiologist, reported that every year DHHS conducts a fall survey of all schools in the state relative to school vaccinations for kindergartners and seventh graders--this data is shared in April/May of the subsequent year, thus, the most recent available is from 2024/25.

Tommy reported on the annual percentages for both age groups from 2018/19 to current, noting a reduction of approximately 94 to 90 percent for kindergartners with some variances based on the vaccine. The MMR vaccine dropped below 90 percent with the latest survey. Tommy explained that they conduct a point-in-time survey consistently on an annual basis noting that the rates generally increase because of the schools' conducting outreach.

For the seventh graders, there is less of a decline in vaccination rates. Next, Tommy reviewed the exemption rates (medical, religious and military) for both age groups, all of which are self-reported. Another data source includes the Behavioral Risk Factor Surveillance System Vaccination System which is an annual ongoing telephone survey using a random digit dialing approach of individuals 18+ years of age. The rate for influenza vaccine has increased since 2011 and the Pneumococcal vaccinations for 65+ age group has increased as well since 2011. The COVID-19 vaccinations show a drop in the third year, but it is still above 80 percent.

Next, Tommy briefly reviewed the demographic breakdown reporting that for Pneumonia vaccine, males and females have fairly similar rates. In terms of race/ethnicity rates, there is limited data available due to small sampling sizes.

In terms of income groups, there tends to be a greater percent for individuals in the higher income group receiving the flu and Pneumonia vaccines.

The department also looks at Human Papilloma Virus (HPV) rates among 11- to 15-year-olds as part of the Vaccine For Children (VFC) Work Plan on an annual basis. Tommy noted that there was a change from 3 doses to 2 doses in 2021, noting that the rates are trending upward.

They also look at data for children 0 to 2 years (10x2) who are current in receiving the 10 recommended vaccinations--this shows a dip during the COVID-19 years to 20 percent but, since then, the rates have increased to as high as 51 percent.

Kernen stated that the 10x2 data includes COVID and influenza vaccines. When you consider this data compared to the HDEIS measure, they only include children who have had all 10 vaccines by the day they turn 24 months. If the child is a day over 24 months, they are not included. She asked the state if it would be possible to provide data using a 2-month grace period to capture more children. They are working to see what the data would look like for comparison purposes. Once she gets this data from DHHS, she will share it to the board.

In response to a question of Mr. Flowerday, Kernen stated the information that Tommy provided is background information, as she is concerned about the exemption data going even lower over the next four years. She believes that this resolution connects to some of the challenges with the vaccine data and what we are doing as a health department. She is meeting with all the school superintendents outside LPS and outside of the city limits to ask how we can support them in these efforts. She believes this is important and wants to ensure we have ongoing open communication; that we are providing vaccines throughout the community versus everyone having to come to the department; and ensure that the board is constantly updated on this data. In response to a request of Mr. Flowerday, Kernen stated that we could delay the vote on this resolution to the January board meeting without interrupting any work of the department.

Kernen encouraged the board members to reach out to Tommy George if they have any questions regarding this data.

- B. Review Board of Health Conflict of Interest Form and related process as referenced in the recently updated bylaws. – Director Kernen

John Ward, Assistant County Attorney, indicated that the recent update to the board's bylaws includes a disclosure form for conflicts of interest when appropriate, geared towards board members who may be involved in entities for food service, dental work, veterinary services, etc.

Rick Tast, Assistant City Attorney, stated that the City Law Department is reviewing the conflict of interest policies for all city boards, so there could be some future revisions as a result of this process.

Director Kernen indicated that the board will vote on this policy in December and encouraged members to review the draft policy. The policy addresses the proposed form, how often it is reviewed, and includes samples of what may be a potential conflict.

C. Overview of the NALBOH Annual Conference in Savannah, GA – Tamara Sloan

Tamara Sloan reported that she attended the NALBOH Conference in Savannah and found it be an educational experience, noting that the keynote speakers were very good. There was an attorney on the board from Hastings and three individuals from Omaha.

A couple of key focus areas involved “Know your altitude—don’t just rubber stamp it” and also participation. One of the suggestions that might be helpful as part of the onboarding process for new members is assigning a mentor for new board members. She enjoyed the meet-and-greet sessions with the key leaders as well. Some of the discussion focused on funding issues. She feels that we are very fortunate to have the support that we do in our community compared to other areas of the country. They emphasized the importance of engaging the community partners and sponsors. One of the biggest topics involved the importance of trust and the importance of communication for both funding and community participation. She found the following quote inspirational: *If you want to fast, go alone; if you want to far, go together.*

A speaker from Trust for America’s Health talked about the lack of information sharing from local health boards and stressed that they need more stories from the local level to take to D.C.

VII. FUTURE BUSINESS

A. Other Topics for Future Agendas –

There were no suggested topics offered.

VIII. ANNOUNCEMENTS _____

Next Meeting – December 9, 2025, at 4:00 PM.

The November 11, 2025, meeting was cancelled in observance of Veterans' Day.

IX. ADJOURNMENT

Motion: Moved by Dr. Loy that the meeting adjourn at 5:18 p.m.; seconded by Dr. Garcia. No discussion. Motion carried by a 6-0 roll call vote; Randa, Flowerday, and Kingsley absent. The meeting was adjourned.

Geri Rorabaugh
Recording Secretary

Mr. James Michael Bowers
Board of Health President

**LINCOLN-LANCASTER COUNTY HEALTH
DEPARTMENT REPORT
TO THE LINCOLN-LANCASTER COUNTY
BOARD OF HEALTH**

NOVEMBER 2025

ANIMAL CONTROL DIVISION

In early October, Animal Control was requested by Lancaster County Sheriff's Office to assist in an eviction in the 1900 block of W. Apricot. The evicted tenant left a cat and an Axolotl in the residence. The Axolotl was a first for both Animal Control and the Capital Humane Society. The salamander-type animal was released to the University of Nebraska-Lincoln for further care. Axolotls are often portrayed as cute characters for children's books, toys or stickers.



HOWTODRAWFORKIDS.COM



Also in October, Animal Control had a cat hoarding situation where 50 cats and 1 dog were removed from a residence in northeast Lincoln. All but five of the cats were signed over and are going through the process to be adopted. This includes vaccinations, neuter/spaying and microchipping. The Capital Humane Society will be having a Cat Adoption Special happening in the coming weeks. The dog was returned to the actual owner. Citations were issued for sanitation, too many cats, license/rabies, and neglect violations.

Animal Control participated in Project Connect again this year. We distributed 49 licenses to near homeless/homeless pet parents. Veterinarian staff vaccinated over 120 pets. This event is especially helpful for owners who can't get their pets vaccinated. This is a great opportunity for people to update vaccinations and get health checks on their pets. Licenses are reimbursed from Project Connect. Questions were answered by Animal Control staff and connections were made with citizens.

Animal Control staff participated in three different Trunk or Treat events this year. Paws 4 Fun is in their 9th year doing this event. They have at least 250 people and their pets attend. Contest for Best Costume is awarded to the winner. Capital Humane Society and their Trunk or Treat is a big event for local pets and their owners/children. Unfortunately, it rained this year, so the event was cut short. The biggest Halloween event is Lincoln Police Department's Trunk or Treat. It is always a huge success, averaging around 4000 kids--this is a "ghouly" great time for all. Animal Control set up our barnyard and passed out candy to all the children!



COMMUNITY HEALTH SERVICES DIVISION

Public Health Clinic:

COVID-19 Vaccine Schedule & Availability Update -

COVID-19 vaccine availability for both Vaccine for Children (VFC) and Vaccine for Adults (VFA) were delayed this fall. The Centers for Disease Control and Prevention (CDC) adopted updated COVID-19 immunization schedule changes following ACIP recommendations discussed on September 18–19, 2025. These recommendations emphasized the use of “individual-based or shared clinical decision-making” to determine whether COVID-19 vaccination is appropriate for each patient, regardless of age.

At the LLCHD Public Health Clinic, we developed new COVID-19 standing orders in mid-October based on the updated ACIP guidance. This work was made more challenging by the federal government shutdown and delays in updates to CDC web resources. We collaborated with Dr. Rademacher to review and sign the standing orders, allowing us to begin offering COVID-19 vaccinations in late October for both VFC and VFA programs.

Our current vaccine supply is limited and targeted. For the VFA Program, we received a very limited amount of COVID-19 vaccine that is available only to uninsured adults. For the VFC program, we have a restricted quantity of vaccine available for Medicaid-enrolled, uninsured, and underinsured children. We also learned that many

community primary care providers were also delayed in offering VFC COVID-19 vaccine due to the late release of recommendations, restricted dose availability, and delayed standing order guidance from usual sources such as Immunize.org. Despite these challenges, our clinic currently has COVID-19 vaccine on hand and is able to vaccinate eligible patients.

SDoH Screening -

In September, the Public Health Clinic strengthened its social determinants of health (SDoH) screening by improving data collection in the new Patagonia electronic health record system, which was implemented in August, and by updating workflows to designate specific staff for SDoH screening and resource connections/referrals. In October, SDoH screening was further expanded to include families seen in the Immunization Clinic, in addition to STI clients who were already being screened. The most significant gap identified through the enhanced SDoH screening was lack of health insurance, which emerged as the leading unmet need among clients. We will continue to monitor trends as we increase screening encounters. To address the gap in health insurance coverage, the Public Health Clinic now has three trained Certified Application Counselors (CACs) (an increase from one to three) who assist clients with Medicaid and Health Insurance Marketplace applications.

SDoH Screenings in Public Health Clinic 2025

Month	# of SDoH Screenings	Health Insurance Yes/No
June	95	Not available
July	106	Not available
August	147	Not available
September	147	59/88
October	205	116/89

Maternal/Child Home Visitation Updates:

Healthy Families Update -

Our Healthy Families America (HFA) Program completed an audit of all program materials, policies, and procedures to ensure alignment with current Diversity, Equity, and Inclusion (DEI) language requirements. This review was conducted in response to guidance from our state grantor, NDHHS, which is auditing partner policies, websites, and program information for compliance with Federal and State DEI standards. We updated our materials, accordingly, including language that affirms we provide services without regard to race, religion, sex, and other protected characteristics, and that we serve eligible populations.

DENTAL HEALTH AND NUTRITIONAL SERVICES DIVISION

(September data)

WIC Program:

Caseload (Participation) -

Total	3,837 (-12 August 2025 & -180 September 2024)	State: 36,802 (+60 August 2025 & -198 September 2024)
Main	2,594 (-23 August 2025)	
Cornhusker Clinic	1,243 (+11 August 2025)	
%Enrolled with Benefits	87.30% (-0.92% August 2025)	

Participants by Category/Breastfeeding Information -

	LLCHD	State of Nebraska
Total Women	770 (20.1%)	7,217 (19.6%)
Total Children	2,293 (59.7%)	21,540 (58.4%)
Total Infants	774 (20.2%)	8,107 (22.0%)
Infants Receiving Breastmilk	336 (43.4%)	3,311 (40.8%)
Infants Exclusive Breastmilk	144 (18.6%)	1,149 (14.2%)

Mentoring:

Students	6 Union College Nursing Students
Interns	
Volunteers	
LMEP Residents	2

WIC QI—No Show Rates –

	FFY 25 Main Office	FFY 25 North Office	FFY 25 LLCHD Overall
October	14.0%	13.7%	13.9%
November	13.8%	14.7%	14.1%
December	14.4%	11.4%	13.3%
January	14.8%	11.1%	13.5%
February	13.8%	13.1%	13.5%
March	11.9%	13.2%	12.4%
April	11.2%	12.6%	11.7%

May	11.3%	14.3%	12.4%
June	11.3%	9.9%	10.8%
July	10.5%	13.8%	11.7%
August	11.7%	10.4%	11.2%
September	10.8%	11.8%	11.2%
Average	12.5%	12.5%	12.4%

Events Attended -

Outreach Events/Meetings	Raymond Fire House Open House
Breastfeeding Events/Meetings	Spanish Speaking Mom's group, State BF Committee Mtg

Screenings & Referrals -

Mental Health Screening (PHQ-4):	43	Lead Referrals:	72	Immunization Referrals:	5	MilkWorks Pumps Issued:	9
Lead Screening through LLCHD:	39	Dental Referrals:	135	Breastfeeding Support:	41	Parent Resource Coordinator Referrals:	

Dental Program Services:

- Total number of clients served (unduplicated count): 575
- Total number of patient encounters (duplicated client count): 608
- Total number of patient visits (duplicated provider appointments/visits): 968
- Total number of Racial/Ethnic Minorities and White non-English speaking patients: 528 (92%)
- Total number of children served: 423 (74%)
- Total number of clients enrolled in Medicaid: 517 (90%)
- Total number of all clients with language barriers: 435 (76%)

Language Interpretation provided: Arabic, Burmese, Chinese, Dari, Dinka, Farsi, French, Karen, Kurdish, Spanish, Ukrainian, Vietnamese, Pashto, Swahili, Zaghawa

Failed Appointment Rate: September 16.1% compared to August 20.0%. The Dental Clinic two-day automated reminder system at 4 days and 2 days with staff following up with a phone call if the clients do not respond to the automated reminders.

Student Rotations: 3

UNMC College of Dentistry dental students- 2

UNMC College of Dentistry dental hygienist students- 0

Southeast Community College Dental Assisting students - 1
Student Pre-Dentistry Shadowing - 0

Dental Screening and Fluoride Varnish Program: 379 screenings, 473 toothbrushes distributed

Educare: 130 screenings, 150 toothbrush kits distributed (2 site visits)

Malone: 9 screenings, 11 toothbrush kits distributed

26th Street Early Head Start/Head Start Center: 53 screenings, 72 toothbrush kits distributed

Northeast Family Center: 17 screenings, 32 toothbrush kits distributed

Bonsal K Street Early Head Start/Head Start Center; 170 screenings, 208 toothbrush kits distributed (2 site visits)

Community Outreach Events: 45

Raymond Fire Department Family Event: Distributed 15 infant toothbrushing kits and 30 toothbrushes with program and educational information.

ENVIRONMENTAL PUBLIC HEALTH DIVISION

Water Quality Section – Private Water Well Program:

Introduction:

The LLCHD Water Quality Section works to protect human health and the environment upon which all life depends by preventing waterborne illness, reducing ground and surface water pollution, and preventing illicit discharges. The program assures that Lincoln maintains compliance with its National Pollutant Discharge Elimination System (NPDES) Stormwater Permit and that new developments have adequate water and sewer infrastructure. To achieve these goals, the section educates well owners on contamination prevention, investigates suspected waterborne illnesses, issues permits, conducts inspections and water sampling of potable wells within city limits and the three-mile jurisdiction for new or repaired wells, ensures proper well decommissioning, and takes enforcement actions when necessary to maintain compliance and safeguard public health.

Water Quality Indicator:

Ensure all private wells used for potable water are tested annually for bacterial and Nitrate contamination and well owners/users are notified of the results.

Water Well Data:

	FY21	FY22	FY23	FY24	FY25
Permits Issued	673	675	661	719	697
Inspections	537	741	406	739	279
Water Samples	755	724	731	929	423
% + Coliform	10.6% 25 of 236	11.8% 37 of 312	3.4% 10 of 292	9.8% 41 of 416	9.7% 20 of 207
% + E. coli	0.0% 0 of 236	1.2% 4 of 312	0% 0 of 292	0.24% 1 of 416	0% 0 of 207
% >= 10 ppm Nitrate	6.7% 22 of 325	9.2% 32 of 345	4.7% 16 of 334	7.6% 38 of 500	2.2% 4 of 179

In Fiscal Year 25, the Water Quality Program issued 697 renewal permits for wells within the city of Lincoln, 38 new well construction permits, and 2 water well repair permits. Staff continued to emphasize the importance of properly decommissioning wells that cannot be repaired or are no longer in use, providing property owners with information about the Lower Platte South Natural Resources (LPSNRD) Water Well Decommissioning Cost-Share Program, which helps significantly reduce decommissioning costs. During the same period, 207 water wells were tested for bacterial contamination; 20 wells (9.7%) tested positive for coliform bacterial, indicating potential well issues. LLCHD staff worked with affected well owners to ensure safe drinking water, and no wells tested positive for E. coli. Annual fluctuations in the number of samples collected compared to inspections completed occur because non-potable wells are sampled every other year and the time at which this report is generated sampling is still taking place.

Description:

Local ordinance requires all non-closed loop water wells (drinking water, irrigation, etc.) within the city to hold an annual well permit. Prior to constructing new water wells within the city limits, its 3-mile jurisdictional limit, or when required by county board or resolution, a construction permit is required to be obtained from LLCHD. Over 50% of the 600 active private water wells in the city are used for drinking water with the remaining used for irrigation. All private drinking water wells in the city are inspected and tested for bacteria and nitrate contamination annually. Newly constructed drinking water wells are inspected and sampled for bacteria and nitrate post receiving notification from Building and Safety that water is available at the home. Irrigation water wells are only tested for nitrate. Annexations often bring properties into the City that have private water wells. Property owners are allowed to retain their private water well for their drinking water supply and irrigation and not connect to the Lincoln Water System. Annexations are expected in the future and that will bring additional water wells into the program.

Partnerships & Efficiencies:

LLCHD works closely with Nebraska Department of Water, Energy and Environment and LPSNRD on groundwater issues, including helping residents pursue cost share to properly decommission water wells. All water samples are submitted to the Nebraska DHHS Public Health Environmental Lab for analysis. LLCHD works closely with the Planning Department and Lincoln Transportation and Utilities on newly annexed areas to ensure that property owners understand the impacts of city ordinances.



HEALTH PROMOTION AND OUTREACH

In October, as part of Breast Cancer Awareness Month, LLCHD staff worked with local community groups to provide breast cancer screening tool kits to help raise awareness about the importance of screening and local resources. Staff helped coordinate an October event with Molina Healthcare to promote screening services and general healthcare navigation.

Approximately 130 attended the event -- A total of 22 vendors participated, offering a wide range of health services.

Bryan Health provided onsite comprehensive metabolic panel screenings for 56 attendees. Samia shared information on navigation services for breast and cervical cancer screenings and distributed FIT kits to support early detection for colon cancer (she distributed 12 FIT kits and was able to sign up 7 women for health screening navigation and health coaching.)



Presented by:
Molina Healthcare of Nebraska
Lincoln-Lancaster County Health Department Health Hub

Women's Health Fair and Celebration!

October 25, 2025

10 a.m. to 2 p.m.
Auld Pavilion
1650 Memorial Drive
Lincoln, NE

We invite you to our first
Women's Health Fair and
Celebration!

Event Highlights:

- Free comprehensive metabolic panels, STI screenings, and more.
- SNAP/Medicaid application assistance.
- Free period products.
- Community, health care, and mental health resources.

For more information, call 402-890-2014 or 402-443-6243
Kellie.Carlin@molinahealthcare.com
sgamie@lincoln.ne.gov

Lincoln-Lancaster County Health Department

MOLINA HEALTHCARE

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT REPORT TO THE LINCOLN-LANCASTER COUNTY BOARD OF HEALTH

DECEMBER 2025

ANIMAL CONTROL DIVISION

Animal Control received a call of numerous cats at a residence in northeast Lincoln. Officers arrived at the location and observed elevated ammonia levels. Officers removed 37 cats from the residence. After several months, the judge declared the owner guilty on 8 counts—3 counts for no license, 3 counts for no rabies, 1 count for too many cats, and 1 count for violation for sanitation. This would be the second time that this person has been found guilty. This was a difficult case for the Animal Control officers especially since this is a second offense. All cats were adopted. This is the third hoarding case this year.

In June 2025, Animal Control Officer Finelli contacted an owner in northeast Lincoln regarding a deceased dog. The officer arrived to witness the dog deceased and tethered to the fence. The owner had been mowing the yard and forgot to remove the dog from the fence. The owner left the property, leaving the dog tied to the fence. The dog overheated and was found deceased upon the officer's arrival. The dog's internal temperature was 108 degrees. The dog was necropsied, and citations were then issued. The owner was proven guilty and fined \$750.00.

Animal Control would like to remind pet owners that there are multiple agencies that offer pet food assistance in these uncertain times. Animal Control, Lincoln Animal Ambassadors and the Stransky Veterinarian Center are a few places that can assist. If owners need financial assistance for something other than food, we can discuss options with the owner.



PET FOOD PANTRIES



Stransky Veterinary Center – 5505 O Street – 402-473-5370

- Food Pantry every Thursday 10am-1pm
- Proof of financial need required at time of visit
- Can visit twice per month

Lincoln Animal Ambassadors – 300 Oakcreek Drive #1 – 402-817-1168

- Food Pantry by appointment only
- Proof of financial need required prior to visit
- Can visit once per month

Cause for Paws – 2445 South 48 Street – 402-420-5758

- Food Pantry during business hours
 - Monday – Saturday 10am-5pm
 - Sunday 1pm-4pm
- Proof of financial need NOT required

The Bridge Connect – 721 K Street – 402-477-3951

- A meal provided for both owner and dog
 - Monday – Friday 4pm-9pm
- Proof of financial need NOT required
- No limit to number of visits
- Dog must be present for meal
 - Kennels provided for a safe space to rest

COMMUNITY HEALTH SERVICES DIVISION

Public Health Clinic:

Refugee Navigation –

The Refugee Navigator grant-funded work started October 1, 2025. Between Oct 1 and November 19, 2025, our Navigator has assisted 17 families (113 individuals). Services provided include applying for benefits (SNAP, Medicaid, ADC), changing Medicaid plan providers, assistance with making appointments with medical specialists, connecting to primary medical providers, health system navigation, immigration process assistance (connection to resources), legal issues (referrals to Legal Aid and CLIA), assistance with job searches, food assistance from our internal food pantry, collected warm clothes and shoes for family members, helped with a school-based legal issue, helped navigate court processes, and a variety of social determinants of health (SDoH) education including cultural considerations, food resources, English class resources, etc. Our Refugee Navigator reports there are another 240 individuals on a waitlist for assistance through our program.

Refugee Statistics (unduplicated)

Month	# of adult refugees served	# of children refugees served	Nationality
October 2024	56	54	Afghanistan/Iraq/Venezuela/Sudan/Democratic Republic of Congo/Malasia/Jordan/Somalia/Kenya/Bangladesh/Guatemala/Nicaragua/Burma/South Africa/Ethiopia/Saudia Arabia/Republic South Sudan
	18	15	Ukrainian Humanitarian Parolees
	7	1	Cuban Humanitarian Parolees/Cuban Entrants
November 2024	27	23	Syria/Sudan/Democratic Republic of Congo/Iraq/Afghanistan/Thailand/Burma/Nicaragua/Thailand/South Africa/Jordan
	13	6	Ukrainian Humanitarian Parolees
	8	1	Cuban Humanitarian Parolees/Cuban Entrants
December 2024	37	29	Syria/Democratic Republic of Congo/Iraq/Afghanistan/Turkey/Burma/Zambia/Pakistan/Thailand
	0	1	Ukrainian Humanitarian Parolees
	11	2	Cuban Humanitarian Parolees/Cuban Entrants
January 2025	52	47	Syria/Democratic Republic of Congo/Iraq/Afghanistan/Burma/Venezuela/Ukraine/Uganda/Burundi/Somalia/Sudan/Nicaragua/Bermuda/Turkey/Zambia
	7	4	Cuban Humanitarian Parolees/Cuban Entrants
February	33	23	Democratic Republic of Congo/Venezuela/Burundi/Afghanistan/Iraq/Sudan/Republic of South Sudan/Zimbabwe/Zambia/Cambodia
	17	1	Cuban Humanitarian Parolees/Cuban Entrants
March	2	1	Cuban Humanitarian Parolees/Cuban Entrants
April	2	1	Cuban Humanitarian Parolees/Cuban Entrants
May	1	0	Iraq
June	1	3	Afghanistan
July	3	7	Afghanistan
August	0	0	
September	4	3	Afghanistan, China (asylee to follow)
October	1	0	Afghanistan

Maternal/Child Home Visitation Updates:

Family Connects Update -

As an update from the September report, in August we hired a Community Outreach Specialist dedicated to recruiting participants from birth at the hospital and expanding community awareness and outreach to address population reach, one of our key performance indicators. Recent data from Family Connects International (FCI) shows promising progress with our scheduling rate increasing from 44% in August to 53% for September and is on target to stay in the 50%-range for October. Since the start of Family Connects Home Visitation Program at LLCHD, we have never been in the 50% range for scheduling rate. This is a huge achievement!

Family Connects Home Visitation (2024-2025)

Month	Completed Visits	Completion Rate of Scheduled Visits	Population Reach	Referral Connection Rate
Oct	67	64%	20%	67%
Nov	45	57%	17%	100%
Dec	49	54%	17%	33%
Jan	60	59%	22%	89%
Feb	61	60%	26%	100%
Mar	80	67%	30%	100%
Apr	86	69%	29%	29%
May	76	68%	25%	53%
June	84	63%	27%	89%
July	86	66%	31%	38%
Aug	75	60%	26%	40%
Sept	*Awaiting full data snapshot from FCI			

DENTAL HEALTH AND NUTRITIONAL SERVICES DIVISION

(October data)

WIC Program:

Caseload (Participation) -

Total	3,926 (+89 September 2025 & -150 October 2024)	State: 36,910 (+108 September 2025 & -807 October 2024)
Main	2,692 (+98 September 2025)	
Cornhusker Clinic	1,234 (-9 September 2025)	
%Enrolled with Benefits	88.22% (+0.92% September 2025)	

Participants by Category/Breastfeeding Information -

	LLCHD	State of Nebraska
Total Women	792 (20.2%)	7,177 (19.4%)
Total Children	2,329 (59.3%)	21,630 (58.6%)
Total Infants	805 (20.5%)	8,103 (22.0%)
Infants Receiving Breastmilk	353 (43.9%)	3,328 (41.1%)
Infants Exclusive Breastmilk	158 (19.6%)	1,158 (14.3%)

Mentoring -

Students	12 Union College Nursing Students
Interns	
Volunteers	
LMEP Residents	

WIC QI—No Show Rates -

	FFY 26 Main Office	FFY 26 North Office	FFY 26 LLCHD Overall
October	14.5%	12.8%	13.9%
November			
December			
January			
February			
March			
April			
May			
June			
July			
August			
September			
Average			

Events Attended -

Outreach Events/Meetings	State WIC Outreach meeting, Climb out of the Darkness, Indian Center Health Fair, Willard Center Trunk or Treat, Fall Festival at Brownell Elementary, Women's Health Fairy and Celebration, Educare Health Carnival
Breastfeeding Events/Meetings	Bluestem Baby shower, Lincoln Community BF Initiative Mtg

Screenings & Referrals -

Mental Health Screening (PHQ-4):	54	Lead Referrals:	73	Immunization Referrals:	12	MilkWorks Pumps Issued:	9
Lead Screening through LLCHD:	61	Dental Referrals:	166	Breastfeeding Support:	54	Parent Resource Coordinator Referrals:	18

Dental Program Services:

- Total number of clients served (unduplicated count): 714
- Total number of patient encounters (duplicated client count): 784
- Total number of patient visits (duplicated provider appointments/visits): 1255
- Total number of Racial/Ethnic Minorities and White non-English speaking patients: 656 (92%)
- Total number of children served: 525 (74%)
- Total number of clients enrolled in Medicaid: 625 (88%)
- Total number of all clients with language barriers: 500 (70%)

Language Interpretation provided: Arabic, Burmese, Chinese, Dari, Dinka, Farsi, French, Karen, Kurdish, Nuer, Spanish, Ukrainian, Vietnamese, Pashto, Swahili, Zaghawa, Russian, Other

Failed Appointment Rate: October 13.8% compared to September 16.1%. The Dental Clinic is now using a two-day automated reminder system at 4 days and 2 days with a follow-up phone call if the clients do not respond to the automated reminders.

Student Rotations: 2

UNMC College of Dentistry dental students - 1

UNMC College of Dentistry dental hygienist students - 0

Southeast Community College Dental Assisting students - 1

Student Pre-Dentistry Shadowing - 0

Dental Screening and Fluoride Varnish Program: 0

Community Outreach Events: 300

Indian Center Outreach Event: 10

Climb in Waverly Outreach Event: 20

Brownell Health Fair – 200

Educare Carnival – 70

Presentations: 1

LPS School nurses - 50

ENVIRONMENTAL PUBLIC HEALTH DIVISION

Extreme Temperature (Heat and Cold Plans)

Introduction:

The Heat Response Plan launched in May 2025. This summer, Lancaster County experienced 11 heat alert days issued by the National Weather Service: five (5) Heat Advisories and six (6) Extreme Heat Warnings. Alerts are counted by the final level issued for each day. Hospital visit analysis (2018-2025) shows higher heat-related impacts in northwest Lincoln (68521 and 68508).

Daily Maximum Temperature with Heat-related Illness (HRI) Cases, Lancaster County, 2025

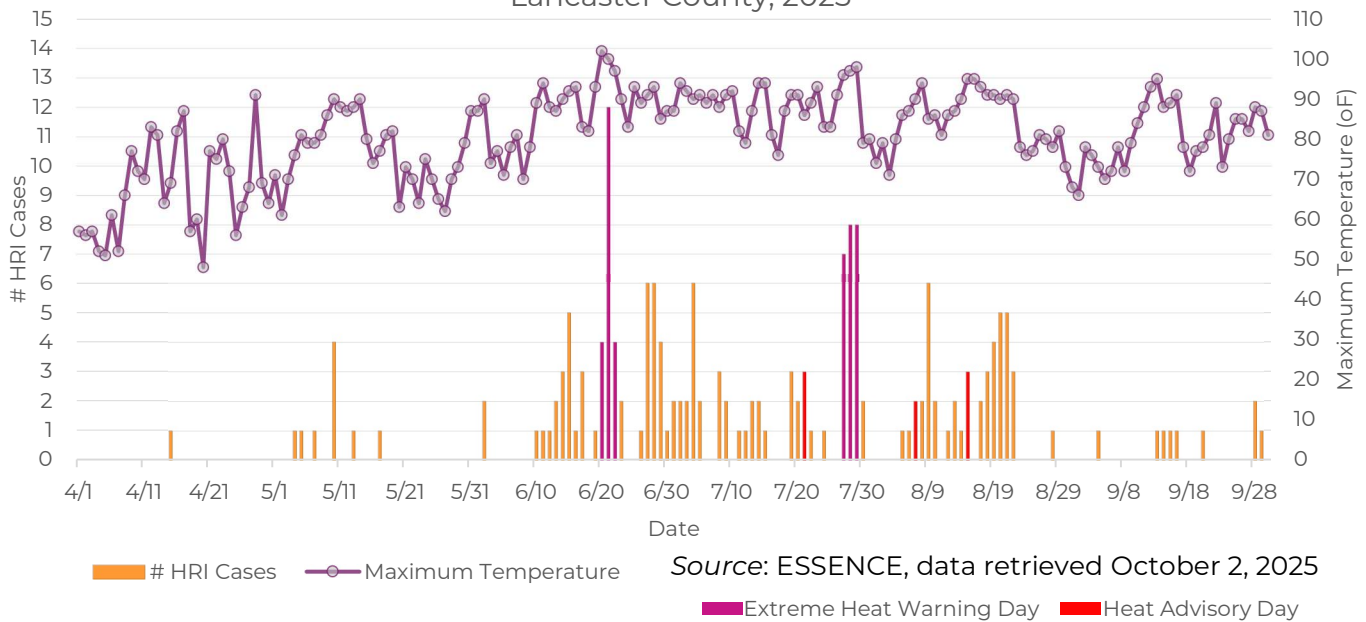


Figure 1 above presents the daily maximum temperature and the corresponding hospital visits for heat-related illness cases in Lancaster County for year 2025. The purple bars indicate days Lancaster County was under an extreme heat warning and the red bars indicate days under a heat advisory. It demonstrates a pattern of rising cases with increasing temperatures, particularly on days with peak temperatures for the months of June and July. Fewer cases of heat-related illness were observed during the end of August and September 2025 compared to previous events in 2025.

Cooling Centers:

Four primary cooling centers—Anderson Branch Library, Bennett Bartin Public Library, F Street Community Center, and Victory Park Senior Center—provided extended hours during Extreme Heat Warnings and distributed heat relief kits.

Attendance impacts during heat events:

Comparing typical daily attendance with heat-related days:

- Anderson Branch Library: an approximate 25% increase
- Bennett Martin Public Library: No significant change
- F Street Community Center: an approximate 75% increase

Community partners such as Good Neighbor Community Center, Matt Talbot Kitchen and Outreach, the Bridge Connect, Community Action Partnership, the Gathering Place, People's City Mission, and the Salvation Army also provided cooling spaces.

Heat Relief Kits:

The LLCHD prepared 1,300 heat relief kits to cooling centers and community partners. Kits included water bottles, electrolyte packets, sunscreen, bug spray, a cooling towel, aloe, lip balm, and a multilingual safety information sheet. As of the final heat event, approximately 783 kits had been distributed.

Communications:

The plan included development of the “Stay Safe in Extreme Heat” website, information sheet, and social media graphics. Materials were translated into nine languages: Spanish, Arabic, Burmese, Dari, Farsi, Karen, Pashto, Ukrainian, and Vietnamese.

The LLCHD sent news releases, social media updates, and Heat Briefs whenever the NWS issued an alert. Heat Briefs—sent to over 350 partners—included forecast updates, health and safety messaging, and resource links for distribution to the public.

Special Event - August 9 Power Outage:

A severe windstorm on August 9, 2025, caused widespread tree damage and left more than 30,000 Lincoln and Lancaster County residents without power. Although not an official heat event, the outage occurred immediately after an August 8, 2025, heat alert, creating hazardous conditions due to lingering high temperatures. Cooling centers remained open, and the American Red Cross operated a reception center at the F Street Community Center for those needing assistance. This event highlights the need to consider power outage response as part of the summer heat planning.

After-Action Review:

The LLCHD received 25 responses to the Heat Response Plan After-Action Review survey. Feedback was largely positive from partners, with organization response rated good or very good by 21 of 25 respondents, and overall response was rated good or very good by 22 of 25 respondents, with only a few marking “acceptable” in each category. Strengths and successes, challenges, recommendations for improvements, and community support needs were also identified and will be incorporated in next year’s season preparation.

Extreme Cold Plan:

The LLCHD is developing an extreme cold response plan with the Lincoln Transportation and Utilities and previous heat planning partners. Daytime warming centers will include city libraries, Parks and Recreation facilities, Victory Park Senior Center, Matt Talbot Kitchen and Outreach, People’s City Mission, and Community Action Partnership. An informational one-pager and website are nearly complete, and meetings with partners are ongoing to assess resources and challenges.

HEALTH PROMOTION AND OUTREACH

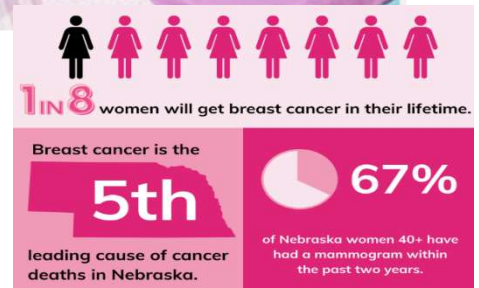
Injury Prevention


SafeKids held a car seat check event at Lincoln Fire and Rescue (LFR) Station #15 on October 25, where a total of 12 families participated with 23 car seats being checked and 17 new seats were distributed to families in need. A smaller event was also recently held at Schworer Volkswagen on November 18th where 9 seats were checked and 6 seats provided to families in need. Event participants are mainly families and caregivers from diverse demographic backgrounds, with the majority being low-income.



Chronic Disease Prevention

Program staff supported the Nebraska Cancer Coalition (NC2) in developing and filming a short breast cancer screening awareness video in Arabic. This joint effort strengthened outreach partnerships and expanded the availability of culturally relevant health education materials. Staff contributed by reviewing and proofreading the translated script, offering technical and content guidance, and talent for filming the video. This 90-second video will be used by the American Cancer Society and promoted across the U.S.



		Lincoln-Lancaster Health Department	
Policy #: 001	Policy Title: LLCHD Board of Health Conflict of Interest	Division: Director's Office/Administration	
Effective Date: 12-09-2025	Authority: Health Director		
Council Resolution/Ordinance: #	County Resolution #:	E.O. #	D.O. #
Supersedes:	Date: N/A	Action	
Next Review Date:		Original Approval Revised and Approved	

Purpose:

To inform the Board of Health and establish guidelines of what constitutes a conflict of interest, assist the Board in identifying and disclosing actual and potential conflicts, help ensure the avoidance of conflicts of interest, and promote transparency and accountability.

Definition:

A conflict of interest is a transaction or relationship which presents or may present a conflict between a Board member's obligation to the organization and the Board member's personal business or other interests. An actual or potential conflict of interest occurs when a Board member can influence a decision that may result in a personal gain for that individual or for a relative because of the business of the LLCHD.

POLICY STATEMENT

Lincoln-Lancaster County Health Department Board members are obligated to use the Conflict-of-Interest Disclosure Form (see Attachment A) to promptly and fully disclose any relationship, financial interests, transactions, positions (volunteer or otherwise), or circumstances that they believe could contribute to a potential conflict of interest.

All conflicts of interest are not necessarily prohibited or harmful to the organization. However, full disclosure of all actual and potential conflicts, and a determination by the Executive Committee (Board President, Vice President, Health Director) to inform the Board member is required. The interested Board member is recused from participating in debates and voting on the matter. All disclosures and the outcomes of the review process shall be documented and retained in accordance with applicable record retention policies.

On an annual basis, all Board members shall be provided with a copy of this policy and are required to complete and sign the acknowledgment and disclosure form. All completed forms shall be provided to and reviewed by the Executive Committee, as well as all other conflict information provided by Board members. Completed forms for each Board Member will be kept by the Administrative Aide for five years after the expiration of their term.

Approved:

James Michael Bowers
Board of Health President

Date



Lincoln-Lancaster County
Health Department

Acknowledgement and Disclosure Form

I have read the Lincoln-Lancaster County Health Department Board of Health Conflict of Interest Policy and agree to always comply fully with its terms and conditions during my service as a Board member. If at any time following the submission of this form, I become aware of any actual or potential conflicts of interest, or if the information provided below becomes inaccurate or incomplete, I will promptly notify the Board president or health director, as representatives of the Executive Committee, in writing.

Disclosure of Actual or Potential Conflicts of Interest:

Please describe below any relationships, transactions, positions you or a relative hold (volunteer or otherwise), or circumstances that you believe could contribute to a conflict of interest.

Ownership or interest in:

☐ Food Establishment or Drinking Place ☐ Veterinary Practice ☐ Establishment related to the care of animals ☐ Medical Practice ☐ Dental Practice ☐ Any other potential conflict:

I hereby certify that the information set forth above is true and complete to the best of my knowledge.

Signature: _____

Printed Name: _____

Date: _____