Dear Board Members,

One of the most confusing aspects of serving on the health board is understanding the distinction between the Local Boards of Health and the District (or Governing) Board of Health. Below are a few highlights from the statutes that help clarify the difference:

- KRS 212.850 (2), “…When a district department of health is created all powers and duties of the county boards of health, except as otherwise provided in KRS 212.920, under existing statutes are transferred to the district board of health.”
  - The County Boards can’t pass regulations (like non-smoking policies); only the District Board can do this.
  - The District Board approves the Operational Plan and Budget for the agency and completes my performance evaluation.
  - The District Board runs our day-to-day operations (they indirectly do this through their agent -- the District Administrative Offices).
  - The District or Governing Board is comprised of members of each County Board; therefore, the County Boards still have a voice and vote in the district’s decisions.
  - Our district has been a 10 county “district” since 1982. We are the oldest and largest (as far as number of counties) health district in the state and the only district that has retained all of its original member counties.

- KRS 212.870 (3) makes all employees in a district, District Health Board employees, not County Health Board employees.
  - Employees report to the District Board not the County Boards (Lake Cumberland District Health Department [LCDHD] pays the salaries and appoints the staff).
• County Boards can't alter employee's job descriptions or duties or require the provision of services; but, through their representatives on the District Board, can request such.
• Even though the LCDHD employees are not employees of the County Boards, but the District Board, it should further be noted that they are not state employees. Similar to School Board employees, Health Boards have “bought into” one of the state’s retirement systems and personnel systems; but, we are still appointed and dismissed by the District Board (again, the District Board uses the District Administration as it’s agent for staff appointments and dismissals).

• KRS 212.920 (2) states that, “...trusteeship of the county public health tax fund shall be retained by each respective county board of health”

• Each Local Board still passes the local tax rates.
• From the local taxes, the Local or County Boards provide 2.8 cents per 100 dollars of property value to the district for administration and service provision.
• Monies generated beyond the 2.8 cents per 100 dollars of property value are used for local infrastructure (i.e. buildings, parking lots, large furnishings) and maintained in separate, county accounts.
• Routinely, the County Boards utilize the District Administrative Offices to administer its funds during building or other budgeted projects.

After reviewing this information, if you have questions, please call me at (606) 678-4761 or e-mail me at shawnd.crabtree@lcdhd.org. I would also be willing to personally meet with any Board Member for additional orientation needs.

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