



Minutes of the BOH Quality Committee Meeting
Tuesday, January 16, 2024 at 5:30 p.m.
WCHD, Room 115

Members Present: Dr. Patricia Lewis, Dr. Williams, Robert McCreath

Members Absent: James Powers

WCHD Staff: Dr. Sandra Martell-Public Health Administrator, **Patrick Ngum Quality and Data Director**; Katherine O'Toole, Director of Communications; Cheryl Floyd Director of Health Promotions; **Todd Marshall, Director Environmental Health; Rebecca Lyons, Director of Emergency Preparedness**; Todd Kisner, Director of Health Protection; Tiffany Levine, Director of Personal Health Services, James, Keeler, Director of Finance; Michael Jarvis, Director of Policy; Cynthia Hall, Director of Strategic Initiatives; **Stephanie Bahling, Executive Assistant (Recorder)**.

Patricia Lewis indicated that a quorum has been established and called the January 16, 2024 Quality Committee meeting to order at 5:37.

1. Approval of Agenda

Patricia entertained a motion to approve the January 16, 2024 Quality Meeting agenda which was provided by Bob McCreath, seconded by Dr. Williams. All were in favor, and the January 16, 2024 Quality Committee Meeting Agenda was approved. Ayes (3), Nays (0), Absent (1).

2. Approval of Minutes – November 21, 2023: Patricia entertained a motion to approve the November 21, 2023 meeting minutes, which was provided by Dr. Williams, seconded by Bob McCreath. All were in favor, and the November 21, 2023 meeting minutes were approved. Ayes (3), Nays (0), Absent (1).

3. Quality Improvement Project Update: Patrick reported that in late 2022 the leadership team discussed and determined the QI projects for 2023 based on COVID after action reports as well as the QI Plan for 2023. Patrick provided an update on each of the QI projects:

- Refugee Depression Screening: Patrick indicated that depression screening was not previously in place and at the time of implementation there were approximately 100 refugees with a 90% goal for depression screening. Patrick indicated that the goal was met however no positive screening for depression in refugees were identified. Patrick added that the center director is reviewing the process to identify additional opportunities for screenings.
- Operational Policies Process: Patrick indicated that regular policy review had been postponed during the pandemic resulting in outdated policies. As part of the project Patrick reported that 42 core policies, 21 center policies, and five core public health policies were reviewed and updated adding that some policies were reviewed by the state's attorney's office as well as the board of health.
- Digitization Project: Patrick reported that the goal of the project was to scan and digitize over 10,000 paper file records for environmental health. Patrick indicated that in the process EH had identified missing fields in the system and is working with the CDP to add necessary fields in their software. Patrick reported that approximately 10,800 records had been scanned and they will continue to scan records until the project has been completed.
- Violence Reduction Workgroup Sustainability Project: Patrick indicated that the project is a strategic initiative as an effort to increase attendance for the violence reduction workgroup. Patrick reported that the 2023 attendance increased by 21% over the 2022 attendance and the number of participants who attended at least 70% of the meetings increased from 5 in 2022 to 11 in 2023.
- Winnebago County Tobacco Free Community Coalition: Patrick reported that the Illinois Youth Survey reflected an increased number of youths using tobacco products including vaping devices. Patrick indicated that WCHD established a coalition which included law enforcement agencies as well as youth organizations



to build support for education, awareness and development of policies around the use of tobacco products including e-cigarettes by youth under the age of 21. The Winnebago County Tobacco Free Communities Coalition held its first meeting on August 1, 2023, has identified nine community sectors and continues to meet on a monthly basis.

- Home Visiting Case Management: Patrick reported that the goal of the QI project was to reduce the number of failed visits within the home visiting programs including the BBO (better birth outcomes); HRIF (high risk infant follow-up), TIC (trauma informed care) and the lead program. Patrick indicated that the team had to determine what was considered a failed visit which they learned was different amongst each of the programs. Patrick reported that the initial goal was to reduce failed visits from 18% to less than 10% which was achieved.
- Rabies PEP (post exposure prophylaxis): Patrick reported that it was determined that individuals were receiving post exposure prophylaxis unnecessarily which resulted in the QI project. Patrick indicated the health protection director worked with animal services and the emergency departments to develop procedures and steps to follow for bat exposure. WCHD updated their website as well as developed a Rabies information card that animal services can provide to exposed households.
- Qualtrics Standard Operation Procedures for Program Managers: Patrick reported that the QI project comes from Emergency Preparedness indicating that Qualtrics has been used to schedule vaccinations as well as conduct surveys. Understanding that Qualtrics is a tool which can be used for different programs a standard operating procedure guide was developed for program managers on how to use Qualtrics.
- WCHD Coordinated Intake and Referral System: Patrick reported that the MIECHV (maternal, infant and early childhood home visiting) coordinated intake process serves as the single point of entry for the IGROW program that links families to home visiting services. He indicated that 37% of the referrals came from the WIC program while other segments in the community were not being utilized. The Rockford Housing Association was identified as an ideal source for referrals into the program. The MIECHV program manager reached out to RHA and was invited to their resource fair where they received an increased number of referrals for the program.
- Environmental Health Clerical Performance: Patrick reported that the quality improvement project was implemented to minimize clerical errors and reduce the frequency of supervisor involvement in clerical matters. Patrick indicated that it was determined that the number of errors increased as the workload increased resulting in data entry fields being missed when updating the CDC software. Patrick reported that additional training was provided which reduced the number of errors as well as the need for supervisor involvement.
- N95 Fit Testing Capabilities for Long Term Care Facilities: COVID-19 after action reports identified that providing mask fit-testing to long term care facilities an area for improvement. Patrick reported that in April, 2024 WCHD will host a fit testing event in which Rebecca added that WCHD is partnering with the University of Chicago, IDPH along with a contractor who will provide the hood, mask and starter kit for testing. Rebecca indicated that the event will consist of 6 hours of virtual training along with 2 hours of in person training to learn how to use the fit testing equipment. Rebecca indicated that the goal is to build a sustainable program for fit testing in long term care facilities.
- Improving Communications with Hard to Reach Populations: Patrick reported that the communications director worked with community partners in an effort to build pathways to connect with the hard to reach population. Patrick indicated that recent cultural linguistic core competency assessment survey identified community/minority groups as populations that are hard to reach. Patrick indicated that this QI project will continue in 2024 as they continue to work on IPLAN 2025.
- Expense Analysis, Core Service Based Verses Performance based expenses: Patrick reported that the QI project provides dashboards that will report on the current financial situation of WCHD including income and expenditures. Patrick indicated that the dashboards are also beneficial in reviewing grant progress which enables WCHD to implement necessary changes to enhance fiscal outcome on underperforming grants.



4. PHAB Reccreditation Review: Rebecca reported that the PHAB Reccreditation documentation has been reviewed by leadership and uploaded into the reccreditation document system. Patrick indicated that WCHD has been assigned a reccreditation specialist to review the documents and they are waiting for feedback.

5. Executive Session - None

6. Additions – None

7. Adjournment

There being no additional business, Patricia entertained a motion to adjourn the January 16, 2024 Quality Committee meeting which was provided by Dr. Williams, seconded by Bob McCreath, all were in favor and the meeting adjourned at 6:26pm.

Approved by the Board of Health

Secretary
Winnebago County Board of Health

Date