



**Minutes of the BOH Quality Committee Meeting
Tuesday, October 17, 2023 at 5:30 p.m.
WCHD, Room 115**

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

Members Absent:

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 October 17, 2023 Quality Committee meeting to order at 5:32.

1. Approval of Agenda

Patricia entertained a motion to approve the October 17, 2023 Quality Meeting agenda which was provided by Jim Powers, seconded by Bob McCreath Patricia Lewis. All were in favor, motion carries.

2. Approval of Minutes – September 19, 2023: Patricia entertained a motion to approve the September 19, 2023 meeting minutes, which was provided by Jim Powers, seconded by Bob McCreath. All were in favor, motion carries.

3. Family Planning Audit

a. **Approved Quality Review Corrective Action Plan:** Dr. Martell indicated that this is a report that WCHD is filing. She explained that the family planning program had not been audited in years and there has been a new team assigned to the program. Dr. Martell indicated that part of the findings was in regards to adolescent outreach and communication. She indicated that the challenge was in regards to the Patagonia system not working properly. Although the documentation indicates that the education was provided to the adolescent, the system, it was not mapped correctly and the information did not flow over to the client visit record in family planning. Dr. Martell indicated that the staff has been retrained to document the information consistently and in a specific location so it properly flows over and shows up on the other side. Dr. Martell indicated that the state felt that the corrective actions report was a viable plan of action approving it. Dr. Martell indicated that a vote was necessary to approve filing the plan. Patricia entertained a motion to approve the corrective action plan which was provided by Jim, seconded by Bob McCreath, all were in favor and the filing was approved.

4. Quality Improvement Project Update – Patrick provided an update on the status of all the QI projects.

- **Communication:** Patrick indicated that the communication quality improvement project was to improve communication with the hard to reach populations. He indicated that WCHD conducted a CLCPA (Cultural & Linguistic Competency Policy Assessment) survey which identified the different cultural groups in the community. He reported that they integrated the cultural groups into the communication plan. Patrick indicated that the director of communication is seeking opportunities to engage the cultural groups which includes LGBTQ, limited English speaking, refugees, seniors and couple of others. Patrick indicated that they pulled data to determine where these cultural groups are located the population. Patrick indicated that the director of communication is working on a three-way communication which basically identifies an expert within the health department. He provided the example of the staff working with the homeless coalition would be identified as the point of contact to reach out to that group. Another example was the staff that works with the Liam Foundation who works with the LGBTQ community, they would be the



point of contact to reach out to that group. Patrick indicated that the intent is to utilize the relationships already in place to reach out to the various cultural groups.

- **Finance** – Patrick reported that this QI project is intended to develop an easily retrievable report for WCHD expenses. Patrick indicated that the center director pulled data from Munis and reviewed timeclock plus to analyze the data to determine if there are grants and programs where WCHD is not charging time to grants or programs. Patrick indicated that this is one exercise as part of the report.
- **Health Promotion and wellness** – Patrick indicated that the QI project is to expand referral sources for IGROW referrals. Patrick reported that they are identifying organizations who would need the IGROW program to provide referrals. He indicated that currently they are working with the Rockford Housing Authority who engages with populations that need services. Patrick indicated that they are also looking at internal programs that engage with clients who could use IGROW and provide internal referrals. Patrick reported that internally they had seen an uptick in the number of referrals with a majority come from the WIC program. Jim Powers inquired as to the purpose for the IGROW program. Patrick indicated that the IGROW program is a grant that is intended to improve maternal child health and WCHD is challenged with a high mortality rate and the IGROW program provides the opportunity to address the high mortality rate by linking that population to services. Dr. Martell indicated that the program was formerly known as the MIECHV (Maternal Infant Early Childhood Home Visiting) Program. She indicated that it is the coordinated intake for the program and they are trying to increase the number of referrals for all the home visiting partners such as Easterseals, Bright Start, District 205, La Voz Latina and others in an effort to get them to capacity. Dr. Martell indicated that the goal is to increase referrals for the IGROW program from external partner agencies.

5. PHAB Reaccreditation Review:

- a. Domain 2: Investigate, Diagnose, and address health problems and hazards affecting the population:

Standard 2.1.1 A: Anticipate, prevent, and mitigate health threats through surveillance and investigation of health problems and environmental hazards:

- Measure 2.1.1A is to maintain and improve surveillance systems: Rebecca indicated that WCHD uses a lot of surveillance systems including I-NEDS, ESSENCE, ILINET, VAERS, RedCap, Sales Force and SAP which are included in the measure.
- Measure 2.1.2A is to Ensure 24/7 access to resources for rapid detection, investigation, containment, and mitigation of health problems and environmental hazards: Rebecca indicated that they included three policies for this measure which are Laboratory Submission Procedures which outlines how we get labs to the IDPH lab; Lead Program Investigation and Mitigation Procedures, 24/7 Notification for Emergent Public Health Concerns.
- Measure 2.1.3A is to improve and collaboratively implement practices for investigation, containment, and mitigation of health problems and environmental hazards: Rebecca indicated that they requested updated practices for investigation or containment or mitigation based on lessons learned or surveillance data. She indicated that they included the schools and the schools worked around during the COVID pandemic and the mitigation of COVID. Next, they requested investigation or mitigation action implemented collaboratively to address reportable condition, disease outbreak, injury, or environmental health use in which Rebecca included CHEMTOOL and the COVID-19 after action reports for schools. The next one they wanted was consideration of social determinants of health or health inequities incorporated into containment or mitigation strategies in which Rebecca highlighted the work being done around PFAS which is a contaminant found in water.



Standard 2.2: Prepare for and respond to emergencies:

- Measure 2.2.1A is to maintain a public health emergency operations plan (EOP): Rebecca indicated that the draft plan was included in the packet however it has not been completed. She reported that they are revising the plan which will be presented to the board in November. Rebecca indicated that the plan is an “all hazards” plan in which the principles included can be applied to any emergency whether it’s a flood or infectious disease outbreak.
- Measure 2.2.2A is to ensure continuity of operations during response: Rebecca indicated that it is to determine how WCHD stays active during an emergency and maintain essential services which includes all the centers as well as administration.
- Measure 2.2.3A is to maintain and expedite access to personnel and infrastructure for surge capacity: Rebecca indicated that they wanted to present examples of improvements made to improve WCHD’s surge capacity. She indicated improving the surge capacity is intended to reduce the burden on hospital systems. Rebecca reported that they submitted two examples which were the MRC Volunteer management and screening process which is an online volunteer management system that streamlined the process in which credentials are reviewed and background checks are completed typically within 48 hours. Rebecca also indicated that the new process is fairly inexpensive. Rebecca indicated that the other example that was included is the MOU with the Salvation Army. The Salvation Army provides storage in one central location rather than several locations throughout the County. Rebecca added that everything is catalogued and can easily be deployed in a timely manner as well as easily be shared with the community if needed. Both examples assist with responding more efficiently. They also requested the process(es) for expedited administrative procedures used during a response to an event in which Rebecca indicated focused on resources (financial and staffing) as well as WCHD’s use of mutual aid through different agreements to meet capacity. The MRC volunteers are included as well as they are able to provide surge staffing locally.
- Measure 2.2.4A is to ensure training for personnel engaged in response: Rebecca included a multi-year training and exercise plan which is a requirement of PHEP to complete and review on an annual basis. It outlines all WCHD’s trainings and exercises that WCHD has planned. The measure also requires proactive or just-in-time training for individuals involved in response activities in which they selected the example a presentation conducted by Dr. Martell on “Monoclonal Antibodies”.
- Measure 2.2.5A is to maintain and implement a risk communication plan and a process for urgent 24/7 communications with response partners: Rebecca indicated that they included the risk communication plan which recently passed the policy committee. The second one requested a communication protocol or process for implementing a contact system for 24/7 public health emergency notification.
- Measure 2.2.6A is to assess potential hazards, vulnerabilities, and resources in the jurisdiction: Rebecca indicated that they wanted information on the results of a risk assessment of potential hazards, vulnerabilities and resources. Rebecca indicated that WCHD is required to do this annually. She reported that WCHD recently completed a hazard vulnerability assessment for the Northern Illinois Preparedness and Response Coalition (NIPARC) in March 2023 with hospital coalition partners.
- Measure 2.2.7A is to conduct exercises and use after action reports to improve preparedness and response: Rebecca reported that she included the after-action reports for COVID-19 and Chemtool. Rebecca indicated that they also wanted demonstrations on improvements based on after action reports in which Rebecca included enhancing translational capabilities as a result of COVID-19 as well as the emergency communications plan.



Jim inquired as to the status of the domains in which Rebecca indicated that all the domains have been presented and she will be presenting the Emergency Operations Plan (EOP) and the Workforce Development Plan in November.

6. Executive Session - None

7. Additions – None

8. Adjournment

There being no additional business, Patricia entertained a motion to adjourn the October 17, 2023 Quality Committee meeting which was provided by Jim Powers, seconded by Dr. Williams, all were in favor and the meeting adjourned at 6:10 pm.

Approved by the Board of Health

Secretary
Winnebago County Board of Health

Date