



**Minutes of the BOH Quality Committee Meeting
Tuesday, May 16, 2023 at 5:30 p.m.
WCHD, Room 115**

Members Present: Dr. Patricia Lewis, Robert McCreath (Ex-Officio), Dr. Williams

Members Absent: James Powers

WCHD Staff Present: Dr. Sandra Martell-Public Health Administrator, Patrick Ngum Quality and Data Director; Tiffany Levine, Director Personal Health Services, Michael Jarvis, Policy Director, Rebecca Lyons Director of Emergency Preparedness, Stephanie Bahling, Executive Assistant (Recorder).

Patricia Lewis indicated that a quorum has been established and called the May 16, 2023 Quality Committee meeting to order at 5:39.

1. Approval of Agenda

Patricia entertained a motion to approve the May 16, 2023 Quality Meeting agenda which was provided by Bob McCreath, Seconded by Dr. Williams. All were in favor, motion carries.

2. Approval of Minutes – April 18, 2023: Patricia entertained a motion to approve the April 18, 2023 meeting minutes, which was provided by Dr. Williams, seconded by Bob McCreath. All were in favor, motion carries.

3. Quality Improvement Project Update:

- a. Overview of status of Projects – PDSA Cycle: Patrick reported that they have 14 QI projects. Health Protection QI project on rabies and they are working to improve the administration of PEP for exposure to bats that may have rabies. They are preparing information cards regarding rabies that animal services can distribute when they respond to a call for exposure. The card will inform them to contact WCHD and will also be incorporated on the WCHD website.

Patrick reported that Environmental Health has two QI projects the first one is improving records and missing documents. He indicated that they have been tracking and summarizing data and have identified areas for improvement with the clerks and data entry. The second project is the digitization of records and they have been scanning documents, extracting and analyzing data such as the number of wells and the depth of the wells. Patrick indicated that the goal is to have 10,000 records scanned by the end of the year.

Patrick reported that another QI project that Rebecca is working in is N95 fit-testing for long term care facilities. Patrick indicated that a survey was sent out to identify the facilities who might need the services.

Dr. Martell informed the committee that the “plan, do, study” status report for the QI projects are in the BOH packet.

- b. PHS – Q/I Charter – Depression in Refugees: Tiffany reported that they proposed the QI project in July and started working on the charter in 2022 commenting that depression screening was being completed on almost all the clients that come into the clinic. The clients are asked if they have had any thoughts on hurting themselves or if they felt down and hopeless. When the team discussed possible QI projects they recognized that they were not screening the refugees who have just experienced a life changing event. Since the screening is being done through a translator, the refugees are only asked the two questions. Tiffany indicated that they focused on the adult population with a goal of screening at least 90% of the refugees. The refugees come to the WCHD twice so if they are not screened on their first visit they can be screened on their second visit when they meet with Dr. Schiller. Tiffany indicated that they have not had any refugees screen as depressed however if a refugee does screen as depressed they would be put in contact with or TIC (trauma informed care) coordinator as well as connect them with services at crusader clinic. The charter is in the “act” phase and they are conducting peer reviews to ensure they are not missing any screenings.



- c. HA – Q/I Charter – Update on policies: Michael reported that in October 2022 they began reviewing and updating policies. He indicated that the policy on policies determines how they go through revisions and what will be included. The QI charter focuses on keeping policies up-to-date, taking into account new technology, social changes, public expectations and job requirements. Michael reported that they are in the last month of the “study” phase. They are using a “run” chart to track what policies have been submitted for review, been reviewed by the SAO and county HR prior to being presented to the BOH. Michael indicated that they are averaging reviewing three policies per month and are on track to meet the goal of having 50% of the policies reviewed by December with 16 left to review.

4. PHAB Reaccreditation Review

- a. Domain 5: Rebecca indicated that the spreadsheet in the meeting packet provides a high-level overview and they have been working to collect the documents. Rebecca indicated that although the status indicates that the domain has been completed they will be reviewing it again to ensure it aligns and is the best example.
 - i. Standard 5.1 – Participate in or lead a collaborative process resulting in a comprehensive community health assessment.
 - ii. Standard 5.2 – Collect and share data that provide information on conditions of public health importance and on the health status of the population.
- b. Foundational Capability Measures
 - i. 5.1.1 – Policy Development and support: Examine and contribute to improving policies & laws: Rebecca reported that the narrative examples that they selected is the waste haulers ordinance and the Tobacco Free ordinance. Rebecca reported that as a result of the Tobacco Free ordinance, Machesney Park implemented a new retail ordinance.
 - ii. 5.2.1 – Community: Adopt a community health improvement plan: Rebecca that they were to encourage and collaborate the implementation of a community health improvement plan. She reported that they prepared the health improvement plan in 2021 and incorporated it into the IPLAN.
 - iii. 5.3.2 – Equity: Address factors that contribute to specific populations’ higher health risks and poorer health outcomes: Rebecca indicated that they selected two examples. Implementation of one strategy, in collaboration with stakeholders, partners, or the community, to address factors that contribute to specific populations’ higher health risks with poorer health outcomes and they selected the maternal child health initiative. The second example Efforts taken that contribute to building environmental resiliency and they selected the R1 Region planning climate resiliency project. She indicated that this project is new this year and Todd Marshall has been participating in. Dr. Martell suggested that Rebecca include the water security in regards to PFAS. Rebecca informed the team that Domain 4 will be presented at next month’s meeting, which includes a lot of collaboration work.

5. Executive Session - None

6. Additions – None

7. Adjournment

There being no additional business, Patricia entertained a motion to adjourn the May 16, 2023 Quality Committee meeting which was provided by Bob McCreath, seconded by Dr. Williams, all were in favor and the meeting adjourned at 6:01 pm.

Approved by the Board of Health

Secretary
Winnebago County Board of Health

Date