



**Minutes of the BOH Quality Committee Meeting
Tuesday, August 15, 2023 at 5:30 p.m.
WCHD, Room 115**

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

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 August 15, 2023 Quality Committee meeting to order at 5:30.

1. Approval of Agenda

Patricia entertained a motion to approve the August 15, 2023 Quality Meeting agenda which was provided by Jim Powers, seconded by Bob McCreath. All were in favor, motion carries.

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

3. Audit Reports for Filing

- a. Better Birth Outcomes FY2023
- b. HRIF High Risk Infant Follow-up FY2023

Patrick reported that the Better Birth Outcomes and High-Risk Infant programs were audited by the Department of Human Services. The audit determined that both programs were in good performance and no corrective action was required. DHS recommended improving on the prenatal depression screening along with other recommendations. Dr. Martell informed the committee that the audit reports need to be reviewed and approved for filing. Patricia entertained a motion to approve the audit reports for filing which was given by Jim Powers, seconded by Dr. Williams. All were in favor and the audit reports were approved for filing.

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

QI Project	Project Phase	Update
Increase participation in Tobacco free community activities	Plan	Meeting was held with potential members to form a Tobacco Free Coalition which will focus on reducing burden of tobacco use and shape tobacco-free norms so that tobacco becomes less desirable, acceptable, and accessible in Winnebago County.
Develop a system for N95 fit testing to congregate living facility staff	Plan	The Center Director reached out to long term care facilities to assess current capacities for N95 fit testing among Winnebago County Facilities, a meeting was held with long term care facilities to perform a S.W.O.T. analysis for LTCF N95 Fit Testing.
Develop and disseminate Standard Operating Procedures (SOP) for Qualtrics	Plan	The Center Director continuous to develop an SOP for Qualtrics which is geared at improving the usage of Qualtrics for WCHD projects. Qualtrics software improves the process of gathering customer feedback and data.
Improve communication channels for hard to reach populations	Plan	Currently working with key partners from the community to develop a system for communicating with hard to reach populations. Populations are identified by language, neighborhood, or community.
Expand sources for iGROW referrals	Do	In order to increase and expand referral sources for iGROW, the center reached out to the Rockford Housing Authority as a result referral numbers for iGROW have increased from the RHA.



Decrease fail visit rates for home visiting programs	Do	Center continuous to work on decreasing the number of failed visit rates for home visiting program which includes: BBO, HRIF, Lead program and TICC. In July the failed visit rate was 2% across all the four (04) home visiting programs.
Improve PEP administration rates	Do	Rabies informational card has been developed and will be used by Animal Services and updated on WCHD’s website, the rabies informational card is geared at educating Winnebago County population on Rabies exposure, reporting and vaccination.
Engage 2 community representatives with lived experience	Do	Strategies are being drafted to Engage 2 community representatives with lived experience in the violence reduction work group/activities.
Develop an easily retrievable report for expenses	Do	With the goal to develop an easily retrievable metric for reporting WCHD financial positions, the Finance Center gathered data, developed an excel pivot table that summarized the cost for grant reimbursement reports and executive summaries for administration and the BOH, pivot table is being reviewed.
Digitization of Health records	Study	Environmental Health Center continuous to scan and record septic records in spreadsheet to facilitate record retrieval, with a target of digitizing 10,000 records by December 2023, above 7500 files have been digitized.
Healthcare policy update	Study	Center Director continuous to review and update WCHD policies. In July, one (1) policy was reviewed and approved.
Increase participation in violence reduction work groups	Study	Upon implementing strategies such as splitting Work group meetings into smaller work groups, improving communication of feedback to work group participants average attendance of the Violence reduction work group meetings have improved, 13 participants consecutively attend 65% to 100% of all meetings.
Develop Clerical procedures for environmental health	Study	Center continuous to monitor and review the CDP software system for duplicate data entries, clerical errors and missing information. Data has revealed an increase in the number of duplicate data entries, clerical errors and missing information with increase in volume of work.
Depression screening in refugees	Act	Personal Health services center continuous to screen refugees for depression using the PHQ-2 tool. The strategy has seen an average screening rate of 99%.

- a. **Decreased failed home visiting rates:** Tiffany Levine, Director of Personal Health Services indicated that she is providing an update on the home visiting case management project. Tiffany reported that in September 2022 PHS had an increase in home visits and noticed an increase in failed home visits. They reviewed all home visiting programs which included the lead program, HRIF-APOR program, BBO program and Trauma Informed Care Coordinator who does home visits assisting clients with accessing resources. Tiffany reported that in September 2022 BBO had a 22% failed visit rate and used a fishbone diagram to evaluate why clients cancel visits or stop responding. The team spent time reviewing the failed visits as well as determined what defined a failed visit. They decided that they would need to establish a relationship with the client and the client had to agree to participate in the program to be included in the failed visit calculation. They are also standardizing how they contact the clients to remind them and confirm their appointment. Tiffany indicated that the goal is to be below 8% and reported that they have been under 4% failed visits consistently since March 2023.

5. PHAB Reaccreditation Review:

- a. Domain 6: Utilize legal and regulatory actions designed to improve and protect the public health: Rebecca indicated that measure 6.1.1 is to monitor and improve inspection activities. The example they highlighted is the CDP program which is the electronic inspection management system that they use for investigative processing. Measure 6.1.2 is to monitor and improve enforcement activities to assure accordance with protocols. Rebecca reported that they reviewed and discussed the food and housing enforcement activities to ensure that they adhere to protocols. She indicated that the data table includes the administrative and in-house hearings which are listed by month as well as year to date.



	Administrative Hearing May 2023	In-House Hearing May 2023	Calendar Year To Date 2023 Administrative	Calendar Year To Date 2023 In House	Administrative Hearings Calendar Year 2022	In House 2022
Housing	10	24	70	89	53	80
Food	0	0	0	3	0	1
Wells/Septic	0	0	1	0	0	0

Measure 6.1.3 is to identify and implement improvement opportunities to increase compliance:

- Rebecca reported that in 2019 Environmental Health adopted the state food code and altered the food establishment permit renewals.
- Rebecca indicated that they also assessed the enforcement activities in regards to elevated levels of lead in children’s blood. They reviewed the referral process to improve awareness in areas most impacted in Winnebago County.
- Rebecca indicated that in response to complaints of foul odor associated with the Winnebago County Landfill they reviewed best practices which included strengthening local ordinances in regards to waste haulers to reduce the amount of waste and odors generated as well as supporting routine clean-up efforts.
- WCHD conducted a community campaign to alert impacted residents of the presence of PFAS in private drinking water systems.
- Rebecca indicated that communication provided to the public on the purpose of public health regulations and updated their notices for non-compliance during COVID.

Measure 6.1.4 is to ensure investigation or enforcement activities are carried out collaboratively and equitably in which they used the IGA with Durand which offered a formalized process for shared code enforcement responsibilities with municipalities to ensure consistent transparent procedures to ensure compliance. Rebeca indicated that Durand has a higher SVI (Social Vulnerability Index) compared to surrounding areas with greater risk of poor health outcomes. Durand also lacks the ability to condemn buildings or take entities to court for failing to meet IPMC (international property maintenance code) without WCHD assistance

b. Domain 9: Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement.

Measure 9.1.1 is to implement a performance management system which they included CEMP, the strategic planning workgroup, the BOH quality committee and how they align goals with the IPLAN, Strategic goals and how they collect data. They also included the BOH annual report. They also included the utilization of Qualtrics during COVID-19 for the mass vaccination plan and the after-action surveys inquiring as to their overall experience with COVID vaccine and would the recommend the vaccine to family and friends.

Measure 9.1.2 is to establish a process that guides health department quality improvement efforts across the department in which they highlighted the Quality Improvement Plan published in March, 2023.

Measure 9.1.3 is to implement quality improvement projects in which they highlighted the rabies exposure prophylaxis and the reduction of failed home visits QI projects.

Measure 9.1.4 is to nurture a culture of quality across the health department reviewing how quality improvement has changed over time shifting priorities in response to COVID-19 pandemic.

Measure 9.2.1 is to base programs and interventions on the best available evidence in which trauma informed care and trauma 101 training were highlighted along with the trauma informed collaboration with ICOY conducting trauma informed workshops and seminars. PFAS communication was also included highlighting the use of geofencing and town hall community meeting conducted by WCHD and IDPH.

Measure 9.2.2 is foster innovation in which they highlighted the WIC Farmers Market Nutrition Program and the initiative to increase utilization of the \$5.00 vouchers provided to the clients. In 2022 the redemption rate was only 30%. It was determined that location was a barrier for the clients so WCHD held an onsite farmers market in which 60% of the vouchers were redeemed saving WIC recipients \$4800.00.

6. Executive Session - None

7. Additions – None



8. Adjournment

There being no additional business, Patricia entertained a motion to adjourn the August 15, 2023 Quality Committee meeting which was provided by Bob McCreath, seconded by Dr. Williams, all were in favor and the meeting adjourned at 6:27 pm.

Approved by the Board of Health

Secretary

Winnebago County Board of Health

Date