



**Minutes of the BOH Quality Committee Meeting
Tuesday, September 19, 2023 at 5:30 p.m.
WCHD, Room 115**

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

Members Absent: Robert McCreath

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 September 19, 2023 Quality Committee meeting to order at 5:33.

1. Approval of Agenda

Patricia entertained a motion to approve the September 19, 2023 Quality Meeting agenda which was provided by Jim Powers, seconded by Patricia Lewis. All were in favor, motion carries.

2. Approval of Minutes – August 15, 2023: Patricia entertained a motion to approve the August 15, 2023 meeting minutes, which was provided by Jim Powers, seconded by Patricia Lewis. All were in favor, motion carries.

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

- Health Protection to improve PEP administration rates, Winnebago County identified two bats with rabies in the past month. Winnebago County saw its highest month for potential human exposure to rabies with 27 cases. The Health Department continues to work with Winnebago County residents, Animal services and the Swedish American hospital to improve PEP administration rates. The procedure on reporting rabies exposure has been incorporated onto WCHD’s website.
- **Personal Health Services** – Patrick reported that the QI project is to decrease fail visit rates for home visiting programs with the goal to decrease failed home visiting rates for BBO, HRIF, APORS, Lead and TIC home visiting programs from 18% to 8% by December 2023, the average failed home visiting rate has been reduced to 6%. The Personal Health Services Center is working on end of home visiting program surveys to seek feedback from clients who either completed or dropped out of home visiting programs.
- **Health Promotion and wellness** – Patrick indicated that the QI project is to increase participation in Tobacco free community activities. They are working with partners to form a coalition. They had their first meeting on the formation of Tobacco Free coalition on August 1st to discuss reducing tobacco usage in Winnebago County focusing on youth tobacco and vaping use. Data pulled from County Health Rankings shows that 20% of adults in Winnebago County are current smokers. In subsequent meetings the Tobacco Free Coalition started drafting vision, mission and goals of the coalition. The next meeting is scheduled for October 3rd to continue discussions on goals of the Tobacco Free Coalition Committee.
- **Quality Improvement Project stages:** Patrick indicated that chart below lists the quality improvement projects and which stages they are currently in.



P: Plan	D: Do	S: Study	A: Act
Develop a system for N95 fit testing to congregate living facility staff	Expand sources for <u>iGROW</u> referrals	Digitization of Health records	Depression screening in refugees
Develop and disseminate Standard Operating Procedures (SOP) for Qualtrics	Improve PEP administration rates	Healthcare policy update	
	Engage 2 community representatives with lived experience	Increase participation in violence reduction work groups	
	Develop an easily retrievable report for expenses	Develop Clerical procedures for environmental health	
	Increase participation in Tobacco free community activities	Decrease fail visit rates for home visiting programs	
	Improve communication channels for hard to reach populations		

4. PHAB Reaccreditation Review:

- a. Domain 3: Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it:
 - Measure 3.1.1 is to maintain procedures to provide ongoing, non-emergency communication outside the health department. Rebecca indicated that the documents they included were the communications policy and the communications directors job description. For the capacity to communicate with individuals who are non-English speaking; deaf or hard of hearing; blind or low vision Rebecca provided the contract agreement for interpretation, Sorenson communications; IWIC screen shot, use of service animal policy and accessibility design guidelines for the website.
 - Measure 3.1.2 Inform the public about public health’s role and functions, and build a positive reputation of the health department in the community. Rebecca included the department-wide branding strategy and guidelines, communication policy, vax bus photo and website screenshots.
 - Measure 3.1.3 Use a variety of methods to make information available to the public and assess communications strategies. Rebecca provided the health department website URL and social media strategies enhanced to communicate public health.
 - Measure 3.2.1 Design communication strategies to support prevention, health, and well-being. Rebecca included the department-wide approach for developing and implementing communication strategies designed to encourage actions to promote health.
 - Measure 3.2.2 Implement health communication strategies to encourage actions to promote health. Rebecca provided the communication campaigns implemented to provide accurate information to the public to address health risks, health behaviors, disease prevention and well-being.
- b. Domain 8: Build and support a diverse and skilled public health workforce.
 - Measure 8.1.1 Recruit and promote the development of a qualified and diverse public health workforce. Rebecca provided the narrative of the efforts aimed at securing a qualified and diverse workforce and included the equal employment opportunity policy; job posting recruitment & hiring policy; job description with trauma informed care and health equity language along with PowerPoint presentations.
 - Measure 8.2.1 Develop and implement a workforce development plan and strategies. Rebecca indicated that she will include the workforce development plan once it is completed. She included the Cultural and Linguistic Competence Policy Assessment and the process for developing management or leadership skills as part of succession planning.



- Measure 8.2.2 Build a supportive work environment. Rebecca included the EAP program policy, employee health screening policy, sick/personal leave policy, remote work policy, discrimination harassment and bullying policy and the employee recognition policy.
- Dr. Martell indicated that the workforce calculator is a challenge for WCHD due to grant funded positions which cannot work in other areas and it would appear to be overstaffed in some areas and understaffed in other areas. Jim inquired as to the difference in being evaluated between the new process verses the old. Rebecca indicated that WCHD is one of the first health departments going through the new process. She indicated that she prefers the new process as it has less redundancies and allows for more narrative. Rebecca also indicated that the new process nicely ties in the health equity piece.

5. Executive Session - None

6. Additions – None

7. Adjournment

There being no additional business, Patricia entertained a motion to adjourn the September 19, 2023 Quality Committee meeting which was provided by Jim Powers, seconded by Dr. Williams, all were in favor and the meeting adjourned at 6:02 pm.

Approved by the Board of Health

Secretary
Winnebago County Board of Health

Date