

QI Council Meeting February 22, 2017 * 8:45 – 9:45

Agenda

| Agenda Item/ Topic | | Key Points | | Action Items | Responsible Party/ Timeline |
|-----------------------|---|---|----|--|--------------------------------|
| QI topics: Surveys | • | New goal for 2017 based on Strategic Plan review | • | Make new board member orientation plan as the next QI project | QI Team |
| PM dashboard | • | make recommendations for improvement, action steps Board report for March | • | Reviewed all LCHD's PMs for 2016 and made comments and/or recommendations Summary of all PMs and recommendations/comments will be presented at March Board | QI Team Donna |
| Next meeting | • | Next meeting will be: QI Project (grant funding processes) | Tu | esday, April 11, 2017 at 8:45 | QI Team & Donna |

☐ Attendees or ☒ Refer to sign-in sheet

☐ Attachments:

Notes Generated By: Christina Bramlage



| Title | 310 S | . Main Street, Bellefontaine, Ohio 43 QI / PM Council | |
|-------|---------------------|--|------------------------|
| Date | Wed | dnesday, <mark>February 2</mark> | <mark>22</mark> , 2017 |
| | Name | Signature | Department |
| | Christina Bramlage | Christina Branlag | e WIC |
| | Donna Stunt Metzler | June Metyles | - Admin |
| | Kay Schroer | Lay Schree | N Adain |
| | Matt Stonerock | facto Store coll | 8 Fruis |
| | Kelly Reaver | Killy Regiver | PH |



LEADERSHIP TEAM MEETING - March 1, 2017

ATTENDANCE: Craig, Donna, Kay, Steve, Lisa, Corinne GUEST: Bob Harrison

2/22/2017 minutes were reviewed:

- Leica will email instructions for the annual BBP/TB training today.
- Annual ODH financial report, state subsidy application, and quality indicators have all been completed and uploaded.
- The proposed Open House is postponed until the fall, closer to levy time.
- HIIT questionnaire will be distributed following Doc's approval of content.

Out of County Travel:

• 1 PH RN, hearing screenings, 4/6 Urbana

Corinne is working on the OPOD data entry system.

Steve needs 2016 child fatality and environmental stats ASAP to complete the annual report!

United Way volunteer day is Friday, May 5. Let Kay know if you have an idea for a project. Discussed was the possibility of information distribution for the sexual health clinic (fliers/posters).

Christina was approved to proceed with a contract for a WIC reminder/recall system. It is in her budget and has been approved by State WIC.

LCHD will be the host site for an EPA grant writing workshop on June 6 from 9:00-3:00. Discussion included which staff members should attend, one from each division.

2016 Performance Management Dashboard was reviewed and discussed.

Bob Harrison distributed copies of several documents addressing permitted and prohibited activities of the Board of Health of a General Health District in regards to levies and bond issues. Discussion included what employees can and cannot do on paid time and with public funds.

Next meeting: Wednesday, March 8, 8:30 a.m.



The Board of the Logan County Health District met in rescheduled regular session on Wednesday, March 8, 2017. President Harrison called the meeting to order at 1:04 p.m. followed by the pledge to the flag. Members present on roll call were Mr. Harrison, Mrs. Price, Dr. Varian, Mrs. Watkins, and Mrs. Collins. Staff members present were Health Commissioner Dr. Boyd C. Hoddinott, Administrator Lisa G. Brown, Environmental Health Director Craig D. Kauffman, Director of Nursing Kay Schroer, and Accreditation Coordinator Donna Metzler. Reporters Mandy Lochr of the Bellefontaine Examiner and Mike Vetorino of WPKO/WBLL radio were also in attendance, along with guests Jim Sawyer, John Clary, and Leica McGill.

IN THE MATTER OF MINUTES

It was moved by Dr. Varian and seconded by Mrs. Collins that the Board approve the minutes of the February 1, 2017, regular meeting as presented. Ayes: Mrs. Watkins, Mrs. Price, Mrs. Collins, Dr. Varian. Nays: none. Motion carried.

IN THE MATTER OF MONTHLY BILLS

Noting that vouchers for recurring and time-sensitive bills were submitted to the county auditor on February 3, 10, 17, 24, and March 3, it was moved by Mrs. Price and seconded by Mrs. Watkins that the Board confirm the bill vouchers and order the current bills paid. Ayes: Dr. Varian, Mrs. Collins, Mrs. Watkins, Mrs. Price. Nays: none. Motion carried.

IN THE MATTER OF PUBLIC FORUM

James Sawyer, P.E. of JS Engineering, LLC addressed the Board on behalf of the Board of Harrison Township Trustees. He requested waiver of the sewage permit fee for their new facility as a government entity. The Board was in unanimous agreement that they did not wish to set this precedent, and Mr. Sawyer thanked them for their time and consideration.

IN THE MATTER OF BOARD UPDATES

Accreditation Coordinator Donna Metzler presented the health district's Strategic Plan for annual review and discussion, including process and conclusions. She also summarized completed 2016 accreditation accomplishments and updates using the Performance Management Dashboard, and discussed new actions for 2017.

IN THE MATTER OF CLEAN UP BIDS - SHOOTS PROPERTY

Environmental Health Director Craig D. Kauffman requested a Board decision regarding clean-up of the William Shoots property at 4840 CR 9. Two bids were received, both higher than anticipated due to approximately 100 scrap tires that require special handling. Options were debated, and it was moved by Mrs. Watkins and seconded by Dr. Varian that the Board instruct Mr. Kauffman to draft a resolution requesting the Logan County Prosecutor to seek injunctive relief under Ohio Revised Code 3707.01. Ayes: Mrs. Collins, Mrs. Price, Dr. Varian, Mrs. Watkins. Nays: none. Motion carried.

IN THE MATTER OF AWARDING BIDS – WATER POLLUTION CONTROL LOAN FUND

The Environmental Health Director presented two bids from an application for assistance with a failing household sewage system, noting both are from reputable licensed contractors. It was moved by Mrs. Collins and seconded by Mrs. Price that the Board award the contract to the lowest bidder as follows. Ayes: Dr. Varian, Mrs. Watkins, Mrs. Price, Mrs. Collins. Nays: none. Motion carried.

Applicant Contractor Bid Bid Award

Ivan Boggs- 100% funding Bobcat Multi-Works \$3,850.00 Bobcat Multi-Works Wren's Plumbing \$4785.20

IN THE MATTER OF REQUESTS FOR VARIANCE

Todd Mobley, sewage installer

Mr. Mobley requested variance from Ohio Administrative Code 3701-29 to obtain annual continuing education in the first quarter of 2017 prior to 2017 registration. The code requires installers to obtain their continuing education in the year prior to registration. Mr. Kauffman explained that this continuing education would only apply to 2017 registration, and that an additional six (6) hours would be required prior to 2018 registration. It was moved by Mrs. Watkins and seconded by Mrs. Collins that the Board grant the variance. Ayes: Mrs. Price, Dr. Varian, Mrs. Collins, Mrs. Watkins. Nays: none. Motion carried.

David F. Maier II, PO Box 242, Huntsville

Mr. Maier requested variance from Ohio Administrative Code 3701-28 to implement a new property line two (2) feet from the existing well 2495 TR 37 West, Huntsville.. Mr. Kauffman explained that there are two homes on the property with a shared well, and a second well will be installed to facilitate the sale of the individual homes. It was moved by Dr. Varian and seconded by Mrs. Price that the Board grant the variance. Ayes: Mrs. Watkins, Mrs. Collins, Mrs. Price, Dr. Varian. Nays: none. Motion carried.

William T. Remlinger, 8844 SR 273, Belle Center

Mr. Remlinger requested variance from Ohio Administrative Code 3701-28 to construct a house addition three (3) feet from the existing well at the address where the code required 10 feet. It was moved by Dr. Varian and seconded by Mrs. Collins that the Board grant the variance. Mrs. Watkins, Mrs. Price, Mrs. Collins, Dr. Varian. Nays: none. Motion carried.

IN THE MATTER OF NURSING REPORT

Director of Nursing Kay Schroer updated the Board on the numerous activities of the nursing division.

- Organization of a parents group in opposition to the proposed transfer of oversight for the BCMH program from Ohio Department of Heath to Ohio Department of Job and Family Services
- Increased influenza hospitalizations this flu season (22 since January 18 as compared to 8 total in 2016 and 5 in 2015)
- Continuation of walk-in flu shots to the public
- Adult dental clinic April 5 at Robson Family Dentistry with 34 available appointments
- Annual 5K Walk April 29 at Southview Park commemorating Public Health and Immunizations Weeks

The following nursing statistics for January, 2017 were then presented.

Public Health: 1 home visit; 7 active lead cases/3 screenings; 5 TB skin tests; 2 BCMH visits; 14 newborn home visits; 2 bereavement contacts/1 visit; 1 head lice check

Immunization Program: 20 child clients; 21 adult clients; 32 flu shots

Women, Infants and Children: 63 new clients; 93 recertifications; 683 total participants

Communicable Disease: 23 confirmed-Chlamydia (16); Gonorrhea (3); other (4)

Health Education: 5 staff trainings/meetings; 1 public class

IN THE MATTER OF FINANCIAL REPORT REVIEW

Administrator Lisa G. Brown presented health district financial reports for the month of January 2017, reflecting estimated revenue and appropriations as previously authorized by the Board. She also reviewed a summary report of 2016 revenue and expenses outlining changes in fund balances. It was moved by Mrs. Watkins and seconded by Mrs. Price that the Board authorize President Harrison to approve review of the reports. Ayes: Dr. Varian, Mrs. Collins, Mrs. Price, Mrs. Watkins. Nays: none. Motion carried.

IN THE MATTER OF NEW CONTRACT - ONE CALL NOW

Noting that the expenditure has been approved by State WIC and the contract approved as to form by the Logan County Prosecutor, it was moved by Mrs. Watkins and seconded by Mrs. Collins that the Board approve a contract between Logan County WIC and SWN Communications Inc. d/b/a/ One Call Now for an automated reminder/recall

system at the rate of \$1452.05 for the first year including set up fee, and \$700.00 annually thereafter. Ayes: Dr. Varian, Mrs. Price, Mrs. Collins, Mrs. Watkins. Nays: none. Motion carried.

IN THE MATTER OF ANNUAL CONTRACT RENEWALS

It was moved by Mrs. Price and seconded by Mrs. Collins that the Board renew the annual contracts as listed below. Ayes: Dr. Varian, Mrs. Watkins, Mrs. Collins, Mrs. Price. Nays: none. Motion carried.

Allen County Health District

Residential and commercial plumbing inspection services on an as-needed basis for the period March 5, 2017 to March 5, 2018 at the rate of \$30.00 per hour plus mileage at the current Logan County Health District rate

Mental Health, Drug & Alcohol Services Board of Logan and Champaign Counties

Newborn home visits to include screening for maternal depression for the period March 1, 2017 to February 28, 2018 at the total contract amount of \$10,000.00

J. Christopher O'Connor, MD

Back up health commissioner and medical director services for the period April 1, 2017 to April 1, 2018 at the rate of \$1.00 per annum and \$75.00 per hour for all direct services performed

IN THE MATTER OF EXECUTIVE SESSION

At 2:20 p.m., it was moved by Dr. Varian and seconded by Mrs. Price that the Board enter executive session for contract negotiation. The vote on roll call: Mrs. Watkins- aye, Mrs. Collins- aye, Mrs. Price- aye, Dr. Varian-aye. Nays: none. Motion carried. The Board returned to open session at 2:27 p.m.

IN THE MATTER OF HEALTH COMMISSIONER CONTRACT RENEWAL

Considering the impending expiration of Boyd C. Hoddinott's contract, it was moved by Dr. Varian that the Board extend a one year contract to Boyd C. Hoddinott, MD to serve as Health Commissioner and Medical Director for the Logan County Health District for the period April 1, 2017, to March 31, 2018, at the annual salary of \$55,000.00 and under the same conditions of his current contract. Mrs. Watkins seconded the motion. Ayes: Mrs. Collins, Mrs. Price, Mrs. Watkins, Dr. Varian. Nays: none. Motion carried.

IN THE MATTER OF HEALTH COMMISSIONER COMMENTS

Dr. Hoddinott reminded the Board of the annual Health District Advisory Council meeting on Thursday, March 23 at 7:00 p.m.; discussed employee morale due to decreased staff and funding; and offered a brief explanation of the HIIT (High Intensity Interval Training) that staff will begin soon as a test group.

IN THE MATTER OF ADJOURNMENT

Confirming the next regular meeting for April 5, 2017, at 1:00 p.m., and noting that Mrs. Collins and Dr. Varian will both be absent, President Harrison adjourned the meeting at 2:38 p.m. without opposition.

Robert Harrison, President

Boyd C. Hoddinott, M.D., Secretary

2016

Logan County Health District Performance Management Dashboard



Health District Mission:

The Logan County Health District champions a safe, healthy community.

| | _ |
|---------------------------|---|
| Health Commissioner | |
| Boyd Hoddinott, MD | |
| Email: | |
| bhoddinott@co.logan.oh.us | |

| Health District Divisions | Programs | Performance Measures On: | | | | | | | | | LCHD Performance Measure Summary |
|---------------------------|---|-----------------------------|-------------|-------------|------------------|--|--|--|--|--|----------------------------------|
| Administration | | Red 1 | Yellow 2 | Green 11 | | | | | | | |
| Nursing/Public Health | Select a Health | 0 | 1 | 3 | Yellow 21% | | | | | | |
| Environmental Health | Department Division on the left to populate the | 0 | 1 | 2 | Total Control of | | | | | | |
| Education | Program List for that division. | 0 | 1 | 2 | | | | | | | |
| Full User Guide | | | | | Totals 1 5 18 | | | | | | |

Logan County Health District Performance Management Dashboard



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|---------------------------|--|
| Boyd Hoddinott, MD | |
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| bhoddinott@co.logan.oh.us | |

| Health District Divisions | Programs | Performance Measures On: | | | LCHD Performance Measure Summary | | |
|--|-----------------------|-----------------------------|--------|-------|----------------------------------|--|--|
| The state of the s | and the second second | Red | Yellow | Green | | | |
| Administration | Clinics | 0 | 0 | 0 | | | |
| | W.I.C. | 0 | 0 | 2 | Yellow | | |
| Nursing/Public Health | Outreach | 0 | 1 | 2 | 20% | | |
| Environmental Health | Infectious Disease | 0 | 0 | 0 | | | |
| Education | | | | | SHL' | | |
| Return to Primary Dashboard | | | | | Totals Vellow Green | | |



WIC Dashboard Measure Report

Report Date:

2/28/2017

| PH:937-592 | 9040 FAX:9: | 37-592-6746 | | | | | | | | | |
|-------------------------------------|---------------------|---------------|--------|-------------|----------------------|---------------------------------|--------|------------------|-----------------------|----------------|--|
| Measu | re# | Status | | | | Ke | y Penf | ormance | Measure | Name of Street | |
| 1 | | | | | | | | | | | |
| YTD V | alue | Targ | get | Staff C | Contact: | Linked to Strategic Plan? | | SP Objective: | | | |
| Quarter | Statu | ıs | | | | Quarterly E | Explan | ation and | Action Plans | | |
| Q1 | | | | | | | | | | | |
| Q2 | | | | | | | | | | | |
| Q3 | | | | | | | | | | | |
| Q4 | | - | | | | | | | | | |
| 95 | | | | | | | | | | | |
| Measu | re# | Status | | | | Key | y Perf | ormance | Measure | | |
| Measu 2 | re# | Status [+] | # of c | bbese child | Iren in WI | | y Perf | ormance | Measure | lilat , | |
| | | Status [+] | Ц | | Iren in WIG | C Linked to | | SP | Measure | | |
| 2 | alue | [+] | get | Staff C | | C Linked to | y Perf | | Measure | | |
| 2 YTD V 13.5 | alue | [+] Targ 20.0 | get | Staff C | Contact: Bramlage | Linked to Strategic Plan? | No | SP Objective: | Measure Action Plans | The U | |
| 2 YTD V 13.5 | 'alue % | [+] Targ 20.0 | get | Staff C | Contact: Bramlage | Linked to Strategic Plan? | No | SP Objective: | | | |
| 2 YTD V 13.5 Quarter | 'alue % Statu | [+] Targ 20.0 | get | Staff C | Contact: Bramlage | Linked to Strategic Plan? | No | SP Objective: | | | |
| 2 YTD V 13.5 Quarter Q1 | 'alue % Statu | [+] Targ 20.0 | get | Staff C | Contact: Bramlage | Linked to Strategic Plan? | No | SP Objective: | | | |



Outreach Dashboard Measure Report Report Date: 2/27/2017

| Log U Heal 310 5, Main St PM.937-392- | en Cot th Dis . Belleforta 9040 FAX: 9: | unty trict ine. OH 43511 37:592:6746 | —————————————————————————————————————— | iboard N | reas | ure Kepo | Ort Report Date: 2/2//2017 | | | | |
|--|--|---|---|----------------------------|--------|-------------|---|--|--|--|--|
| Measu | re# | Status | Status Key Performance Measure | | | | | | | | |
| 1 | | [~] I | ncrease # of newborn vis | its | | | | | | | |
| YTD V | alue | Targe | Staff Contact: | ntact: Linked to Strategic | Yes | SP | | | | | |
| 91 | | 100 | Kelly Reaver | Plan? | 103 | Objective: | | | | | |
| Quarter | Statu | ıs | | Quarterly E | xplan | ation and A | Action Plans | | | | |
| Q1 | [+] | | | | | | | | | | |
| Q2 | [-] | | NATION: staff layoffs, new staf | ff being trained | | | | | | | |
| Q3 | 1+1 | | | 35 | | | | | | | |
| Q4 | [-] | | NATION: Other agency is also of the control of the | _ | | | staff to promote and collaborate with the area agency | | | | |
| Measu | re# | Status | | Key | Perf | ormance l | Measure | | | | |
| 2 | | [+] I | ncrease # of contacts with | h existing C | MH far | nilies | | | | | |
| YTD V | alue | Target | Staff Contact: | Linked to Strategic | Yes | SP | 4.2.2 | | | | |
| 561 | | 300 | Kay Schroer | Plan? | | Objective: | | | | | |
| Quarter | Statu | IS | | Quarterly E | xplan | ation and A | Action Plans | | | | |
| Q1 | [+] | | | | | | | | | | |
| Q2 | [+] | - | | | | | | | | | |
| Q3 | | | | | | | | | | | |
| Q4 | H | EXPLA | NATION: Almost doubled the g | goal. Good Job | | | | | | | |



Outreach Dashboard Measure Report Report Date: 2/27/2017

| PH.927-592- | 9040 FAX:9 | 37-592 6746 | - | | | 0.0116.00 | | |
|-------------|------------|--------------------------------|--------|-------------------------|---------------------------------|-----------|------------------|--------------|
| Measu | re# | Status Key Performance Measure | | | | | | |
| 3 | | Increase # of new CMH clients | | | | | | |
| YTD V | alue | Targ | et | Staff Contact: | Linked to Strategic | Yes | SP | 4.2.2 |
| 50 | | 42 | | Kay Schroer | Plan? | 103 | Objective: | 4.2.2 |
| Quarter | Statu | IS | | | Quarterly E | xplan | ation and | Action Plans |
| Q1 | | | | | | | | |
| Q2 | | | | | | | | |
| Q3 | | | | | | - 10 | | |
| Q4 | [-] | | ANATIO | N: annual target was me | et, no new prosp | ects | | |
| Measu | re# | Status | | | Key | y Penf | ormance | Measure |
| 4 | | | | | | | | |
| YTD V | alue | Targ | et | Staff Contact: | Linked to Strategic Plan? | Yes | SP Objective: | |
| Quarter | Statu | ıs | | | Quarterly E | xplan | ation and | Action Plans |
| Q1 | | | | | | - | | |
| Q2 | | | | | | | | |
| Q3 | | | | | | | | |
| Q4 | | | | | | | | |

Logan County Health District Performance Management Dashboard



Health
District
Mission:

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| Health Commissioner | |
|---------------------------|--|
| Boyd Hoddinott, MD | |
| Email: | |
| bhoddinott@co.logan.oh.us | |

| Health District Divisions | Programs | | rforma asures | | LCHD Performance Measure Summary |
|--|----------------------|-----|------------------|-------|----------------------------------|
| To the same of the same of the same of | | Red | Yellow | Green | |
| Administration | Environmental Health | 0 | 1 | 1 | |
| Nursing/Public Health | Food Safety | 0 | 0 | 1 | Yellow |
| Environmental Health | | | | | 33% |
| Education | | | | | |
| Return to Primary Dashboard | | | | | Totals Vellow Green |



Environmental Health Dashboard Measure Report

Report Date: 2/27/2017

| 310 S. Halin St. PH: 937-592-1 | Be lefontal 9040 FAX 93 | ne, OH 43311 7-192-6746 | | toure rec | Port | | |
|-----------------------------------|----------------------------|----------------------------|---|------------------------|-------------|---------------|--|
| Measu | re# | Status | | Ke | y Perf | ormance | Measure |
| 1 | | [+] Red | uce average miles dri | ven per insp | ection | | |
| YTD V | alue | Target | Staff Contact: | Linked to Strategic | Yes | SP | 4.1.3 |
| 8.6414 | 7857 | 9.5 | Craig Kauffman | Plan? | 1 65 | Objective: | 4.1.5 |
| Quarter | Statu | S | | Quarterly I | Explan | ation and | Action Plans |
| Q1 | [~] | | - | 15 HA | . 0 | 19 - | |
| Q2 | [+] | | | 10.40 - | →(··· | 6.44 | |
| Q3 | | | | | - 10 | | |
| Q4 | [+] | | FION: All EH staff are performers. PS: Observe over the next y | | • | | |
| Measu | re# | Status | | Ke | y Perf | ormance | Measure |
| 2 | | [~] | % of new wells sampl | ed, inpected | l and ap | proved | |
| YTD V | alue | Target | Staff Contact: | Linked to | No | SP | |
| 99.1 | % | 100% | Craig Kauffman | Strategic Plan? | No | Objective: | |
| Quarter | Statu | S | | Quarterly I | Explan | ation and | Action Plans |
| Q1 | | | | | | | 26 |
| Q2 | | 0 | FION: It was in the middle open out next quality | | a lot of ne | w permits but | still within the time frame to return for inspection |
| Q3 | [+] | | | | | | |
| Q4 | [-] | | FION: The uninspected well PS: No action needed as the | | | · | ection cycle. |



Food Safety Dashboard Measure Report

Report Date:

2/27/2017

| Measu | re# | Status | Key Performance Measure | | | | | | | | |
|---------|-------|--------|---|-------|--|--|--|--|--|--|--|
| 1 | | [+] | % of food safety CEU's | | | | | | | | |
| YTD V | alue | Targ | Stentagio No SF | | | | | | | | |
| 51.1 | % | 50.0 | % Craig Kauffman Plan? Objective: | | | | | | | | |
| Quarter | Statu | IS | Quarterly Explanation and Action Plans | الرسا | | | | | | | |
| Q1 | | | | _ | | | | | | | |
| Q2 | [-] | | EXPLANATION: food safety trainings will be completed later in the year NEXT STEPS: continue to monitor | | | | | | | | |
| Q3 | | | | | | | | | | | |
| Q4 | [# | | | | | | | | | | |
| Measu | re# | Status | Key Performance Measure | | | | | | | | |
| 2 | | | | | | | | | | | |
| YTD V | alue | Targ | get Staff Contact: Linked to SP Objective: | | | | | | | | |
| Quarter | Statu | ıs | Quarterly Explanation and Action Plans | | | | | | | | |
| Q1 | | | | = | | | | | | | |
| Q2 | | | | _ | | | | | | | |
| Q3 | | | | | | | | | | | |
| Q4 | | | | | | | | | | | |

Logan County Health District Performance Management Dashboard



Health District Mission:

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| Health Commissioner | |
|---------------------------|---|
| Boyd Hoddinott, MD | • |
| Email: | |
| bhoddinott@co.logan.oh.us | |

| Health District Divisions | Programs | Performance Measures On: | | | LCHD Performance Measure Summary | | |
|--|----------------------------|-----------------------------|--------|--------------|----------------------------------|--|--|
| | | Red | Yellow | Green | | | |
| | Office of Vital Statistics | 0 | 0 | 0 | | | |
| | Fiscal Tracking | 0 | 1 | 3 | Yellow | | |
| Nursing/Public Health | Plannning | 1 | 1 | 3 | 14% | | |
| Environmental Health | Personnel | 0 | 0 | 0 | | | |
| | Accreditation | 0 | 0 | 5 | 2/81 | | |
| Education | | | | ,014-2 1 n-0 | | | |
| Return to Primary Dashboard | | | | | | | |
| Total to Tillian Duoi Duoi Duoi Duoi Duoi Duoi Duoi Duoi | | | | | Totals 1 2 11 | | |

| 5 Heal | an Coi Ith Dis | unty 🧸 🛮 | F | iscal Trackin | re Report Date: | 3/1/2017 | | | |
|---------|-------------------|----------|-----------------|---------------------------|------------------------|----------|------------|--------------|--|
| Measu | re# | Status | | | Ke | y Perf | ormance | Measure | |
| 1 | | [~] | Finar | ocial training/education | on to BOH | | | | |
| YTD V | alue | Targe | et | Staff Contact: | Linked to | V | SP | 421 | |
| 3 | 3 | | Strategic Yes | | Objective: | 4.3.1 | | | |
| Quarter | Statu | IS | gibal | | Quarterly H | Explan | ation and | Action Plans | |
| Q1 | | | | | | | | ^ | |
| Q2 | | | | | | | | | |
| Q3 | [+] | | | | | | | = | |
| Q4 | [+] | NEXT | STEPS | S: Explore new formats to | present materia | | | | |
| Measu | re# | Status | | | Key | y Perf | ormance | Measure | |
| 2 | | 1+1 | Finan | icial information pres | sented to the | comm | unity | | |
| YTD V | alue | Targe | et | Staff Contact: | Linked to Strategic | Yes | SP | 4.3.3 | |
| 3 | | 2 | | Lisa Brown | Plan? | 1 63 | Objective: | 4.3.3 | |

| Measure # | | Status | Key Performance Measure | | | | | | | | | |
|-----------|-------|--------|--|----------------|---------------------|--------|------------|--------------|--|--|--|--|
| 2 | | ÐI | Financial information presented to the community | | | | | | | | | |
| YTD V | alue | Targ | get | Staff Contact: | Linked to | V | SP | 422 | | | | |
| 3 | | 2 | | Lisa Brown | Brown Strategic Yes | | Objective: | 4.3.3 | | | | |
| Quarter | Statu | s | Leanner 1 | | Quarterly E | Explan | ation and. | Action Plans | | | | |
| Q1 | | | - | | | | | | | | | |
| Q2 | [+] | | | | | | | | | | | |
| Q3 | [+] | | | | | | | | | | | |
| Q4 | | NEXT | STEPS: / | Ambassodor | | | | | | | | |
| 5-0 | | 1000 | | | 7.7 7.1 | | • | D 1 | | | | |



Fiscal Tracking Dashboard Measure Report

Report Date: 2/27/2017

| Measu | re# | Status | | | Key | y Perf | ormance | Measure |
|---------|-------|--------|-------|--|--|--------|------------|---|
| 3 | 4. | | Incre | ase reserve funds | | | | |
| YTD V | alue | Targ | | Staff Contact: | Linked to Strategic | Yes | SP | Measurement of Priority #4 |
| 86.1 | % | 25.0 | % | Lisa Brown | Plan? | | Objective: | , |
| Quarter | Statu | IS | | C | uarterly E | xplan | ation and | Action Plans |
| Q1 | [+] | | | | | | | |
| Q2 | 22- | | | | | | | |
| Q3 | | | | - | | | | |
| Q4 | | | | | 10.000 | | | |
| Measu | re# | Status | | | Key | y Penf | ormance | Measure |
| 4 | | | Days | from issue of PO unt | il order plac | cement | | |
| YTD V | alue | Targ | get | Staff Contact: | Linked to | No | SP | |
| 1.57 | 5 | 2 | | Leica McGill | Strategic Plan? | NU | Objective: | |
| Quarter | Statu | | | The second secon | Name and Address of the Owner, where the Person of | | ation and | Action Plans |
| Q1 | [~] | | ANAT | ION: staff layoffs, increase | d duties for pui | chaser | | |
| Q2 | | | | 82-1 | | | | |
| Q3 | | | | | | | 25.9 (A | |
| Q4 | [# | | | 0.0000000000000000000000000000000000000 | | | | |



Planning Dashboard Measure Report Report Date: 2/27/2017

| 310 5. Main St. PH.937-592-0 | Beilefonta 640 FAX:91 | ine, OH 43311 17-392-6748 | | to the second | | | | | |
|---------------------------------|--------------------------|------------------------------|----------------------------|----------------------------|-------------|--------------|--|--|--|
| Measu | re# | Status | | Key Pe | rformance | Measure | | | |
| 1 | | [+] s | Submit 3 press releases pe | er month to local | media | | | | |
| YTD V | alue | Target | t Staff Contact: | Linked to Strategic Yes | SP | 1.1.2 | | | |
| 63 | | 27 | Corinne Riegler | Plan? | Objective: | 1.1.2 | | | |
| Quarter | Statu | s | | Quarterly Expla | nation and | Action Plans | | | |
| Q1 | | | 50075.6 | | | | | | |
| Q2 | [+] | | | | | | | | |
| Q3 | | | _ | | | | | | |
| Q4 | I# | NEXT S | NEXT STEPS: Great job | | | | | | |
| Measu | re# | Status | | Key Pe | rformance | Measure | | | |
| 2 | | [+] (# | of times a health messag | ge is sent to the m | edical comm | unity | | | |
| YTD V | alue | Targe | t Staff Contact: | Linked to | CD. | | | | |
| 21 | | | | Strategic Yes | SP | 1.2.2 | | | |
| | | 12 | Kay Schroer | Strategic Yes | Objective: | 1.2.2 | | | |
| Quarter | | _ | | | Objective: | | | | |
| Quarter Q1 | | _ | | Plan? | Objective: | | | | |
| | | _ | | Plan? | Objective: | | | | |
| Q1 | | _ | | Plan? | Objective: | | | | |



Planning Dashboard Measure Report Report Date:

3/1/2017

| Measu | ıre # | Status | | Ke | y Perf | ormance | Measure | | |
|---------|-------|----------|--|------------------------|-------------|---------------|--|--|--|
| 3 | | [-] % | of employees who have | created SC |)P's | | | | |
| YTD V | alue | Target | Staff Contact: | Linked to Strategic | Yes | SP | | | |
| 68.4 | % | 1 | Domain 8 | Plan? | | Objective: | | | |
| Quarter | Statu | - | | Quarterly I | Explan | ation and | Action Plans | | |
| Q1 | | | XPLANATION: Staff layoffs EXT STEPS: reminders sent | | | | | | |
| Q2 | [-] | • | XPLANATION: Short staffed, people learning new roles EXT STEPS: reminders sent | | | | | | |
| Q3 | [-] | | | | | | | | |
| Q4 | [-] | | TION: Scabies outbreak EPS: Have Health Commissio | ner send remin | ders | | | | |
| Measu | re# | Status | Key Performance Measure | | | | | | |
| 4 | | [~] Gra | ant \$ received | | | | | | |
| YTD V | alue | Target | Staff Contact: | Linked to | Yes | SP | 421 | | |
| 31407 | 0.67 | 340000 | Donna Metzler | Strategic Plan? | | Objective: | 4.2.1 | | |
| Quarter | Statu | ıs | | Quarterly I | Explan | ation and | Action Plans | | |
| Q1 | [-] | EXPLANA | TION: Grants needed that co | ver salaries | | | | | |
| | | EXPLANA | TION: Time constraints | | | | | | |
| Q2 | [-] | NEXT STE | EPS: included inkind WPKO | marketing gran | nts | | | | |
| Q3 | | | | | | | | | |
| Q4 | | | TION: No feasible grants EPS: Continue to look at more | e grant opportu | nities, loc | k at United W | ay funding, 2019 Creating Heathy Communities Grant | | |
| | | 3-1 | Constitution of the Consti | | | | Page 2 | | |



Planning Dashboard Measure Report Report Date:

3/1/2017

| Measu | re# | Status | | | Key | y Perf | ormance | Measure | |
|---------|-------|--------|--|----------------------|------------------------|--------|------------------|--------------|--|
| 5 | | | % C | ustomer satisfaction | with first co | ntact | | | |
| YTD V | | Targ | | Staff Contact: | Linked to Strategic | Yes | SP Objective: | 1.1.3 | |
| 94.6 | 10.00 | 93.0 | % | Donna Metzler | Plan? | | | | |
| Quarter | Statu | IS | Quarterly Exp | | | | ation and | Action Plans | |
| Q1 | | | | | | | | | |
| Q2 | | | | | | 22 | | | |
| Q3 | | | | | - | | | | |
| Q4 | [+] | | EXPLANATION: Great Job NEXT STEPS: Survey to other agencies and non-customers | | | | | | |
| Measu | re# | Status | Key Performance Measure | | | | | | |
| 6 | | | | | | | | | |
| YTD V | alue | Targ | et | Staff Contact: | Linked to | | SP | | |
| | | | | | Strategic Plan? | No | Objective: | | |
| Quarter | Statu | IS | | | Quarterly E | Explan | ation and | Action Plans | |
| Q1 | | | | _ | | 20.50 | | | |
| Q2 | | | | | | | | | |
| Q3 | | | | | | | | | |
| Q4 | | | | | ×0.450 | | | | |



Accreditation Dashboard Measure Report

Report Date: 2/

2/27/2017

| Measu | re# | Status | | | Ke | y Perf | ormance | Measure |
|---------|-------|--------|------------|--------------------------|------------------------|--------|------------|----------------|
| 1 | | | WFD p | lan is created | | | | |
| YTD V | alue | Targ | et | Staff Contact: | Linked to Strategic | Yes | SP | 2.3.1 |
| 1 | | 1 | | Donna Metzler | Plan? | 168 | Objective: | 2.3,1 |
| Quarter | Statu | s | | C | uarterly E | Explan | ation and | Action Plans |
| Q1 | | | | | | | | |
| Q2 | [+] | | | 344-25 | | 8.0 | | |
| Q3 | | | | | | | | |
| Q4 | | - | | | | | | |
| Measu | re# | Status | and the Na | | Ke | y Perf | ormance | Measure |
| 2 | 27422 | | Four A | nnual Satisfaction S | Surveys | | | |
| YTD V | alue | Targ | et | Staff Contact: | Linked to Strategic | Yes | SP | Priority 1 & 2 |
| 4 | | 4 | | Donna Metzler | Plan? | 103 | Objective: | Thomas T & 2 |
| Quarter | Statu | IS | | C | uarterly E | Explan | ation and | Action Plans |
| Q1 | | | | | | 1436 | | |
| Q2 | | | | | | | | |
| Q3 | | | | | | | | |
| Q4 | 1+ | NEXT | STEPS: (| Change target audience f | or surveys | | | |



Accreditation Dashboard Measure Report

Report Date: 2/2

2/27/2017

| Measu | re# | Status | | | Key | Perf | ormance | Measure | |
|---------|-------|--------|--|----------------------|------------------------|---------|------------|--------------|-------|
| 3 | | | % of | Healthy Habits Heal | lty You mee | tings a | tended | | |
| YTD V | alue | Targ | get | Staff Contact: | Linked to Strategic | No | SP | | |
| 90.0 | % | 90.0 | % | Donna Metzler | Plan? | 140 | Objective: | | |
| Quarter | Statu | s | | | Quarterly E | xplan | ation and | Action Plans | |
| Q1 | | | 23 | | | | | | |
| Q2 | | | | | | | <u></u> | | |
| Q3 | | | | | | | | - | |
| Q4 | [-] | | XPLANATION: Many alternate meetings going on at the same time and scabies outbreak EXT STEPS: Unavoidable, but make it a priority for someone to attend | | | | | | |
| Measu | re# | Status | | | Key | Penf | ormance | Measure | |
| 4 | | [+] | # QI _I | projects completed p | er year | | | | |
| YTD V | alue | Targ | get | Staff Contact: | Linked to Strategic | Yes | SP | | 4.1.3 |
| 1 | | 1 | | Donna Metzler | Pian? | 165 | Objective: | | 4.1.5 |
| Quarter | Statu | S | | | Quarterly E | xplan | ation and | Action Plans | |
| Q1 | | | 200 | = | | \$25) | = | = | _ |
| Q2 | | | | | | | | | |
| Q3 | | | | | | 2015 | | | = = = |
| Q4 | | | | | | | | | |



Accreditation Dashboard Measure Report

Report Date: 2/27/2017

| Measu | re# | Status | Key Performance Measure | | | | | | | |
|---------|-------|--------|---|--|--|--|--|--|--|--|
| 5 | | [+] | % of measures completed | | | | | | | |
| YTD V | alue | Targ | Strategic Ver SF | | | | | | | |
| 83 | | 80 | Donna Metzler Plan? Objective: | | | | | | | |
| Quarter | Statu | ıs | Quarterly Explanation and Action Plans | | | | | | | |
| Q1 | | | | | | | | | | |
| Q2 | | | | | | | | | | |
| Q3 | | - | | | | | | | | |
| Q4 | [-] | 6 | EXPLANATION: Scabies outbreak tied up many people NEXT STEPS: Remind domain leaders to schedule meetings | | | | | | | |
| Measu | re# | Status | Key Performance Measure | | | | | | | |
| 6 | | | | | | | | | | |
| YTD V | alue | Targe | Strategic No SF | | | | | | | |
| | | | Plan? Objective: | | | | | | | |
| Quarter | Statu | ts | Quarterly Explanation and Action Plans | | | | | | | |
| Q1 | | | | | | | | | | |
| Q2 | | | | | | | | | | |
| Q3 | | | | | | | | | | |
| | | | | | | | | | | |