



County of San Diego
HEALTH SERVICES ADVISORY BOARD
1600 Pacific Highway, San Diego, CA 92101-2417

Tuesday, March 1st, 2022
3:00pm to 5:00pm
Microsoft Teams
MEETING MINUTES

Members Present	Members Absent/Excused	Presenters	HHS Support
Afflalo, Suzanne, Dr., Vice Chair Arroyo, Geysil Correa, Linda Fraser, Tim Heygi, Paul Jantz, Barry Knoll, Gregory Melgoza, Ana Seldin, Harriet, Dr. Shaplin, Judith Sumek, Caryn (Alternate) Walters, Todd Yates, Judith	Alexiou, Dimitrios Alverson Rodriguez, Lisa Dailey, Jack (Alternate) Hailey, Katelyn Lepanto, James Chair Ohmstede, Jennipher (Alternate) Remington-Cisneros, Therese Schultz, James Tuttle, Henry Wade, Lindsay (Alternate)	<i>Public Health Reaccreditation,</i> <i>Jackie Werth, Performance</i> <i>Improvement Manager, Public</i> <i>Health Services Administration</i>	Dr. Wilma Wooten, Public Health Officer & Director, PHS Dr. Elizabeth Hernandez, Assistant Director, PHS Dr. Anuj Bhatia, Deputy Director, PHS Dr. Kelley Motadel, Child Health Officer, MCS D Dr. Ankita Kadakia, Medical Director and Branch Chief, TCRH Dr. Maggie Santibanez, AMSA, TCRH Adrienne Yancey, Acting Branch Chief, MCFHS

Members Present	Members Absent/Excused	Presenters	HHSA Support
			<p>Romina Morris, Dep. Budget Mgr., PHS</p> <p>Alison Sipler, Program Coordinator, MCFHS</p> <p>Christine Bride, HPPS, MCFHS</p> <p>Danielle Dorrington, Admin. Analyst III. PHS Admin</p> <p>Rodrigo Ibanez, Admin Analyst III, TCRH</p> <p>Catherine Bender, TEP, TCRH</p> <p>Marti Brentnall, CHPS, TCRH</p> <p>Pedro Hirsch, Administrative Secretary II, PHS Admin</p> <p>Anna-Mai Trinh Administrative Secretary II, PHS Admin</p> <p>Additional COSD Staff Present:</p> <p>Amy Thompson, Executive Finance Director, HHSA</p>

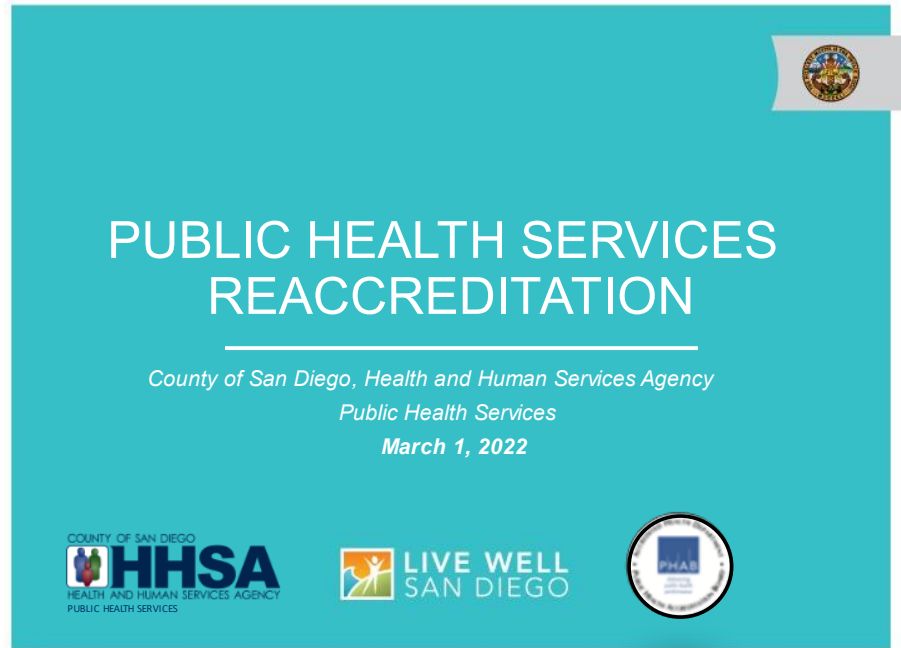
Members Present	Members Absent/Excused	Presenters	HHSA Support
			Ardee Apostol, Asst. Group Finance Dir, HHSA
			Other Attendees:

Minutes	Lead	Follow- up Actions	Due
<i>None.</i>			

Next Meeting: HSAB Meeting: Tuesday April 5th, 2022, 3:00 – 5:00 pm – Microsoft Teams

Agenda Item	Discussion
I. Welcome & Introductions	<p>A. Remarks from the Chairperson</p> <ul style="list-style-type: none"> a. Greg Knoll called the meeting to order at 3:02 PM. b. Roll call was noted, and quorum established <p>B. Approval of March Agenda and January Meeting Minutes</p> <ul style="list-style-type: none"> a. Agenda and Meeting: Moved by Judith Shaplin and seconded by Geysil Arroyo. <ul style="list-style-type: none"> i. Roll Call: All HSAB members in attendance voted Aye. ii. Abstain: Linda Correa b. Minutes: Moved by Tim Fraser and seconded by Barry Jantz. <ul style="list-style-type: none"> i. Roll Call: All HSAB members in attendance voted Aye. ii. Abstain: Linda Correa & Judith Shaplin <p>C. Authorization of Teleconferencing Meeting Option Pursuant to Government Code Section 54953(e)</p> <ul style="list-style-type: none"> a. Motion: Moved by Ana Melgoza and seconded by Judith Yates. b. Roll call – All HSAB members in attendance voted Aye.
II. Public Comment	1. No public comment.

**III. Public Health
Reaccreditation,
Presentation**
Jackie Werth, Performance
Improvement Manager, Public
Health Services Administration



Background:

- Public Health Accreditation status was conferred on May 17, 2016
- Based on submission of more than 1,100 documents and interviews and observations from a Site Visit conducted on February 22-23, 2016

Results of Review:

- For 94 of the 100 PHAB measures, San Diego County received the highest possible ranking of “Fully Demonstrated.” Of the remaining standards, the County is “Largely Demonstrated.” With respect to only one standard was the finding “Slightly Demonstrated.”
- THESE ARE MEASURES ONLY LARGELY DEMONSTRATED:
- 1.3.1: Data analyzed, and public health conclusions drawn
- Qualitative data does not seem present. On the other hand, recognized for quality of quantitative analysis, and in particular, the Health Equity Report.
- 2.3.4. Collaboration among Tribal, state, and local health departments to build capacity and share resources for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards
- Examples of joint exercises did not collectively demonstrate collaboration with State and Tribal departments (both State and Tribes at same time; same exercise).
- 2.4.2. A system to receive and provide urgent and non-urgent health alerts and too coordinate an appropriate public health response

- Largely Demonstrated
- It is not documented if recipients were instructed to respond in a drill scenario or how the number of receipts was used in a test scenario. Also, only one example of a test/drill was provided.
- 3.1.2. Health promotion strategies to mitigate preventable health conditions
- There is no documentation of evidence-based interventions for RD2 with respect to the Cilantro to Stores effort. However, this example is credited for demonstrating “promising practices using professionally skilled partners to execute program components.”
- RD4 calls for examples of implementation of strategies in collaboration with stakeholders, partners, and/or the community. Yet one of the examples, the Community Health Improvement Plan, was found to address strategy development, not strategy implementation.
- 5.3.3. Implemented Department Strategic Plan
- The documentation we provided of monitoring our strategic plan only covered 3 programs and not the entirety of what the strategic plan covers (ALL branches and programs). The three branches in which an annual report was provided were: HIV/STD, TB, and Immunizations. The standard calls for the health department to provide reports developed since the plan's adoption showing that it has reviewed the strategic plan and has monitored and assessed progress towards reaching the goals and objectives. Also, not all of the reports submitted were dated within the past 14 months.
- 11.1.7 Facilities that are clean, safe, accessible, and secure
- An ADA compliance audit by the County Department of General Services found areas of non-compliance in the PHS complex. While a review of areas of non-compliance was conducted, and a timeline for improvements was written with commitment to complete improvements by August 2015, a final inspection and approval report was dated after the PHAB timeline. However, the final inspection and approval report does, in fact, demonstrate compliance was achieved and this was acknowledged.

Feedback From Site Visit:


Strengths:

- PHS is “mission-driven,” and “aligns its work with the Strategic Plan, Live Well San Diego, and the County Operational Plan.”
- Strong ties to the community residents as well as community partners. Partners acknowledge and own Live Well San Diego through their engagement with the regional leadership teams as well as infusing it throughout their own organizations.
- Strong commitment to a culture of improvement, ensures that evidence informs its work, and enjoys a spirit of problem solving that extends from internal operations to community health challenges and provides a healthy environment for innovation

Opportunities for Improvement:

- Expand our ability to meet the needs of a diverse population and engage our community partners to a greater degree in helping us to provide services in a culturally appropriate manner.
- Implement a workforce development plan to build staff competencies by supporting additional assessment and training activities.

	<ul style="list-style-type: none"> Imbed training in QI tools and principles and regularly assess the performance management and quality improvement system. <p>Reaccreditation Process Emphasizes Narratives:</p> <ul style="list-style-type: none"> Greater emphasis on demonstrating impact by implementing each standard and measure <ul style="list-style-type: none"> Fewer documents required Narratives explaining “how” the measure was implemented and “what” was the result Address plans for advancement (optional) <p>Reaccreditation Requirements:</p> <ol style="list-style-type: none"> Narrative describing processes, procedures, activities, etc. Narrative describing example Examples (e.g., examples of communication) Complete adopted item <p>Address how specific plans, processes, systems, policies and procedures, activities, strategies, etc. have been revised and improved and plans for the future</p> <p>Select and Report on Population Outcomes:</p> <ul style="list-style-type: none"> Indicate all outcomes we are tracking Report on 5-10 objectives within broad topic areas, and use these to report out for each Annual Report Show alignment to CHA, CHIP, and Strategic Plan May add additional objectives to report on if revise those being tracked <p>Questions & Comments: None</p>	
<p>IV. Chair’s Report</p>	<p>Comment from Greg Knoll re all these topics</p> <ol style="list-style-type: none"> HSAB Youth Engagement discussion in April 2022 HSAB Annual Accomplishments Report HSAB Advance, June of 2022 Covid-19 Updates <ol style="list-style-type: none"> Press Briefings on County Facebook Page: https://www.facebook.com/sandiegocounty/ 	
<p>V. Informational Items</p>	<ol style="list-style-type: none"> Subcommittee and Work Group Updates. <ol style="list-style-type: none"> Policies & Program (TBD) Budget (James Lepanto) Legislative Committee (Paul Heygi) 	

VI. Health Officer Report	 Final_HSAB_Health_Officer_Report_3_1_22.pdf	
VII. Round Table	No comments or questions	
VIII. Public Comment (on agenda items)	Meeting adjourned at 4:00 pm.	
IX. Adjournment	Next HSAB Meeting: Tuesday April 5 th , 2022, 3:00 – 5:00 pm – Microsoft Teams	