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STATE BOARD OF HEALTH
OKLAHOMA STATE DEPARTMENT OF HEALTH
Moore Norman Technology Center, South Penn Campus
13301 S. Pennsylvania
Oklahoma City, OK 73170

Tuesday, April 12, 2016 10:30 a.m.

Ronald Woodson, President of the Oklahoma State Board of Health, called the 408th regular meeting of the Oklahoma State Board of Health to order on Tuesday, April 12, 2016 at 10:40 a.m. The final agenda was posted at 11:00 a.m. on the OSDH website on April 11, 2016, and at 11:00 a.m. at the Moore Norman Technology Center building entrance on April 11, 2016.

ROLL CALL

Members in Attendance: Ronald Woodson, M.D., President; Martha Burger, M.B.A., Vice-President; Cris Hart-Wolfe, Secretary-Treasurer; Murali Krishna, M.D.; Jenny Alexopoulos, D.O.; Charles W. Grim, D.D.S.; Robert S. Stewart, M.D.

Absent: Terry Gerard, D.O.; Timothy E. Starkey, M.B.A.

Central Staff Present: Terry Cline, Commissioner; Julie Cox-Kain, Chief Operating Officer; Tina Johnson, Deputy Commissioner, Community and Family Health Services; Neil Hann, Assistant Deputy Commissioner, Community and Family Health Services; Toni Frioux, Deputy Commissioner, Prevention and Preparedness Services; Mark Newman, Director of Office of State and Federal Policy; Deborah Nichols, Chief Operating Officer; Don Maisch, Office of General Counsel; Jay Holland, Director of Internal Audit and Office of Accountability Systems; Tony Sellars, Director of Office of Communications; VaLauna Grissom, Secretary to the State Board of Health.

Visitors in attendance: (see sign in sheet)

Call to Order and Opening Remarks

Dr. Woodson called the meeting to order. He welcomed special guests in attendance.

REVIEW OF MINUTES

Dr. Woodson directed attention to review of the minutes of the March 8, 2016, regular meeting.

Ms. Burger moved Board approval of the minutes of the March 8, 2016, regular meeting, as presented with edits. Second Dr. Stewart. Motion carried.

AYE: Alexopoulos, Burger, Grim, Krishna, Stewart, Woodson

ABSTAIN: Wolfe

ABSENT: Gerard, Starkey

STRATEGIC MAP UPDATE PRESENTATION

Deborah Nichols, Chief Operating Officer; Toni Frioux, MS, APRN-CNP, Deputy Commissioner, Prevention and Preparedness Services

See Attachment A

CONSIDERATION OF STANDING COMMITTEES' REPORTS AND ACTION

Executive Committee

Dr. Woodson provided the following reminders:

- The annual Employee Recognition Ceremony is May 10th following the May Board meeting.
- Annual ethics statements are due 5/15/16. Please see VaLauna for questions or assistance with completing.
- The Nominating Committee for the election of officers has been assigned. Following the committee's report in June, the full Board will vote on the new Officers to become effective July 1st.

- 1
2 • The June Board meeting will be held in Choctaw County (Hugo, Ok). Additional details are forthcoming.
3 • The annual Board of Health retreat will be held August 12-13, at the Chickasaw Retreat Center. The
4 planning committee will provide additional details in the coming months. Additionally, you can expect a
5 board assessment survey very soon.
6

7 **Finance Committee**

8 Ms. Burger directed attention to the Financial Brief provided to each Board member and presented the
9 following SFY 2016 Finance Report and Board Brief as of March 29, 2016:

- 10 • The Agency is in “Green Light” status overall
11 • One Division is in yellow light status due to the federal grant and rebates for the Ryan White program
12 beginning on April 1, 2016.
13

14 March 3, 2016 the OSDH received notice of an additional revenue failure of \$2.4 million dollars to the state
15 appropriation making the total reduction for SFY-16 - \$4.2 million. The additional reduction will impact the
16 following:

- 17 • FQHC payments for uncompensated care
18 • Colorectal Cancer Screenings
19 • State funded positions for the remainder of the current fiscal year
20

21 The Finance Brief focused on OSDH potential impact of state reductions in Long Term Care Service.

- 22 • An 11% state revenue reduction potentially could result in the loss of 3.5 full time equivalent staff and 147
23 fewer inspections conducted in assisted living centers, adult day care centers and residential care homes.
24 • Potential reductions in OSDH staff assigned to investigate complaints would reduce the Department’s
25 capacity to identify and cause corrections of on-going actual harm or immediate jeopardy situations. These
26 are situations that are considered likely to cause serious injury, harm, impairment, or death to a resident.
27 This has the potential to effect approximately 12,500 Oklahoma residents in assisted living centers, adult day
28 care centers, and residential care homes.
29 • Additional impacts could be experienced by new nursing facilities needing “initial” surveys in order to
30 qualify for Medicare/Medicaid reimbursement. The Centers for Medicare and Medicaid Services considers
31 initial surveys to be a low priority, and OSDH supports the initial surveys with state funding in order to
32 accomplish the initial surveys timely. This has the potential to affect annually one to two nursing facilities
33 which would experience delays in OSDH initial surveys and eligibility for Medicare/Medicaid contracts.
34

35 **Accountability, Ethics, & Audit Committee**

36 The Accountability, Ethics, & Audit Committee met with Jay Holland. Dr. Alexopoulos indicated there were
37 no known significant audit issues to report at this time.
38

39 **Public Health Policy Committee**

40 Dr. Stewart indicated the Policy Committee reviewed the status of OSDH request legislation, the proposed
41 Oklahoma Plan, the Rebalancing of Medicaid, and the potential impact of a cigarette tax on Medicaid
42 provider rates. Members should be receiving the legislative update report on a weekly basis. If Board
43 members have any policy questions, they should feel free to contact Carter Kimble or Mark Newman at any
44 time. The next meeting of the Policy Committee will be prior to the May Board Meeting.
45

46 **PRESIDENT’S REPORT**

47 Dr. Woodson welcomed Tina Johnson to her new role as the Community and Family Health
48 Services Deputy Commissioner.
49

50 Dr. Woodson invited members to join Gov. Mary Fallin in the annual Walk for Wellness at the
51 State Capitol Complex on May 4th 11:30 – 12:15 and encouraged all to take the opportunity to
52 thank Governor Fallin for being a champion for health.
53

1 Lastly, Dr. Woodson commented on a recent health stakeholder meeting with the Governor,
2 Speaker of the House, and President Pro Temp. Other health stakeholders included hospital CEOs,
3 multiple medical association members, nursing homes, business associations, mental health
4 advocates and law enforcement. From the stakeholder perspective, the objective of the meeting was
5 to demonstrate to Leadership there is a coalition of stakeholders assembled that are invested in
6 health, are concerned about the current and future state of our health system (and outcomes) and
7 want to see policy action to improve the situation. This is a demonstration of support for policy
8 makers taking action and a sign that stakeholders will work together with them on these issues.

9
10 **COMMISSIONER'S REPORT**

11 Dr. Cline highlighted the Certified Healthy Awards ceremony, with more than 1,200 in attendance.
12 Although the event is hosted and funded privately, the purpose is to recognize organizations from large
13 institutions to communities to small schools across the state receiving certified healthy status. There were
14 more than 1900 applications and more than 1700 of those received certification. This event speaks to the
15 interest of Oklahomans in improving health.

16
17 Dr. Cline recognized the Healthy Aging Summit and Dr. Hank Hartsell's role in facilitating the event. He
18 encouraged Board members to attend directly following the Board meeting if possible.

19
20 Next, Dr. Cline briefly commented on his participation in the 2015 meeting of the Oklahoma Academy for
21 State Goals Town Hall. This particular meeting focused on government and taxes. The broad based group
22 of 200 participants concluded the meeting with a recommendation to increase the cigarette tax. Dr. Cline
23 commented that this effort cost zero dollars to implement and encouraged everyone to be as active as they
24 feel comfortable in being.

25
26 Lastly, Dr. Cline briefly discussed his recent Health and Human Services Cabinet meeting. In this budget
27 climate, everyone is impacted and struggling to respond to massive reductions across state agencies. During
28 this time we are looking for innovative ways to support critical functions. For instance, OSDH County
29 Health Departments and the Office of Juvenile Affairs are evaluating opportunities to co-locate across the
30 state to maximize space and resource. Everyone is being hit uniformly throughout so these opportunities are
31 important.

32
33 The report concluded.

34
35 **NO NEW BUSINESS**

36
37 **NO EXECUTIVE SESSION**

38
39 **ADJOURNMENT**

40 **Ms. Wolfe moved Board approval to Adjourn. Second Dr. Grim. Motion carried.**

41
42 **AYE: Alexopoulos, Burger, Grim, Krishna, Stewart, Wolfe, Woodson**

43 **ABSENT: Gerard, Starkey**

44
45 The meeting adjourned at 11:24 p.m.

46
47 Approved

48 

49
50 Ronald W. Woodson, M.D.


51 President, Oklahoma State Board of Health

52 May 10, 2016

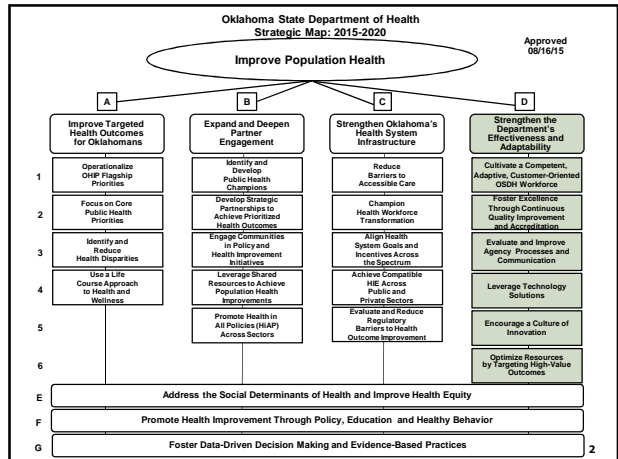
ATTACHMENT A

Strategic Map: 2015-2020
Strengthen The Department's Effectiveness and Adaptability

OKLAHOMA STATE DEPARTMENT OF HEALTH · APRIL 2016



Deborah J. Nichols, Chief Operating Officer
Toni Frioux, Deputy Commissioner



GOALS

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Strengthen the Department's Effectiveness and Adaptability

- Cultivate a Competitive, Adaptive, Customer-Oriented OSDH Workforce
- Foster Excellence Through Continuous Quality Improvement and Accreditation
- Evaluate and Improve Agency Processes and Communication
- Leverage Technology Solutions
- Encourage a Culture of Innovation
- Optimize Resources by Targeting High-Value Outcomes

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D1
Cultivate a Competitive, Adaptive, Customer-Oriented OSDH Workforce

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D1 Goal 1
Ensure the OSDH has a workforce with the knowledge, skills, abilities, and competencies necessary to carry out the OSDH mission now and in the future

1. Develop and implement a plan to recruit and hire staff with the knowledge, skills, abilities, and competencies necessary for successful performance on the job
 - Retention of new hires/reduction in terminations due to performance
2. Develop and implement a workforce development plan that provides professional development opportunities, resources, tools, and guidance to assist employees with professional growth and development and effective preparation for career progression
 - Competency based assessment and evaluation
 - Reduction in employee turnover

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D1 Goal 2

Ensure the OSDH workforce is responsive and adaptive to the changing needs of internal and external customers

1. Provide professional development opportunities, resources, tools, and guidance in support of a workforce that responds to the needs of internal and external customers in a professional, courteous, timely, and culturally competent manner
 - Reduction in competency-based gap areas
2. Develop a standardized survey methodology to measure customer and stakeholder feedback in order to evaluate customer satisfaction, department effectiveness and efficiency
 - Measured based on complaints and satisfaction surveys



D2

Foster Excellence Through Continuous Quality Improvement and Accreditation



D2 Goal 1

Foster excellence through continuous quality improvement

1. Create predictive measurements that identify the need for course correction so that the ability to achieve long-term goals is maximized
 - Develop and monitor predictive measures
2. Develop an additional operating dashboard, initially of a least one metric per each department and program.
 - Develop, monitor and act on results of operational plan
3. Develop and make publically available an OSDH annual report.
4. Enable the Leadership Strategic Targeted Action Team (LSTAT) to report from dashboards using metrics with corrective action(s), when needed.



D2 Goal 2

Achieve and Maintain Public Health Accreditation Board (PHAB) Accreditation

1. Renew PHAB Accreditation in February 2018 for the central office
 - Review PHAB reaccreditation guidelines and develop an action plan for OSDH compliance by March 2017
 - Conduct a mock PHAB site review
2. Expand PHAB Accreditation in the next 4 years (2020) from one county office to nine total county offices



D3

Evaluate and Improve Agency Processes and Communications

D3 Goal 1

Create an Adaptive, Responsive and Positive Culture of Communication

1. Improve Communications to the general public and other external stakeholders
 - Wayfinding signage
 - Improvement to public health messaging and digitizing new public health topics
 - Increasing Social Media
 - Improve web-site look and navigation
2. Redesign and OSDH intranet (IRENE – internal resources and employee network enterprise) to become the primary source of information for all OSDH employees
 - More relevant content on intranet
3. Create opportunities to improve communication, collaboration and engagement of all OSDH employees
 - Increase communication from leadership through video messaging and panel discussions
 - Electronic Community Board
 - Form collaborative groups using discussion boards



D3 Goal 2

Achieve the enterprise mission by implementing efficient and effective processes

1. By 2020 80% of the work conducted by OSDH employees will be in a virtual environment
 - Increase use of mobile devices
 - Reduce paper-driven process through increase use of electronic tools both in office and in the field
 - Digitalize vital records and remove paper records to off-site storage
2. Drive efficiency and effectiveness of processes
 - Replace aging accounting system
 - Create electronic employee record
 - Improve ability to bill third party insurers and receive results electronically
 - HR Vacancy reduced to 45 days or fewer
 - Identify processes for reengineering



D4 Leverage Technology Solutions



D4 Goal 1 Promote the use of collaborative software

1. Implement enterprise-wide SharePoint training by the end of 2016
2. Redesign the IRENE home page to contain appropriate, informative, and timely information by June 2016
3. 100% of Service Areas and County Health Departments have developed sites and are using SharePoint by December 2020
1. IRENE Privacy and Security Guidance Document is available to all employees by June 2016



D4 Goal 2 External partners have access to a collaborative solution for document sharing

1. Identify the need for external collaboration by December 2016
2. Design, develop and implement an external collaborative solution by December 2017



D4 Goal 3 Promote the use of shared-solutions

1. Develop a directory of solutions implemented or under consideration that corresponds to the OMES software list by June 2016
2. Promote the use of the Solutions Directory to identify potential shared-solutions by December 2016



D5 Encourage a Culture of Innovation



D5 Goal 1

OSDH staff are provided with information to recognize a transformational and innovative culture

1. By December 2016, the Innovation team will research and define innovation for OSDH including any barriers or opportunities that may impact achieving a culture of innovation
2. By December 2017, 80% of OSDH staff will receive transformational and innovative thinking training



D5 Goal 2

OSDH staff is encouraged to participate in an innovative culture

1. By December 2016, innovation is promoted on the IRENE homepage
2. By December 2016, two venues are created to encourage and promote cross-pollination of innovative thinking around defined problems and/or creation of new ideas
3. By June 2018, OSDH staff are recognized for innovative thinking (Innovation Day)



D6

Optimize Resources by Targeting High-Value Outcomes



D6

Optimize Resources by Targeting High-Value Outcomes (In Development)

1. Assure that OSDH activities achieve maximum impact per dollar invested.
2. Focus on the creation of evidence based practice registries for OSDH programs and strategies.
3. Build an agency-wide evaluation strategy that will interface with OSDH core and proxy measures.
4. Inform the Governor's Health Delivery Goal by identifying the most effective mechanisms for improving OKStateStat outcomes.
 - Identify in literature and research base
 - Assess current implementation of evidence based strategies with a focus on fidelity
 - Evaluate effectiveness of implementation



QUESTIONS

