GRAND FORKS BOARD OF HEALTH MEETING
Thursday, November 14, 2019 @ 4:15 p.m.
Grand Forks Health Department, Conference Room 2
151 South 4th Street, 3rd Floor

AGENDA

Board Members: Dr. Sally Pyle (Chair), Ms. Cynthia Pic, Dr. Grant Korsmo,
Dr. Joel Walz, Ms. Jeannie Mock

I. Call to Order

II. Approval of Minutes of Meeting held July 11, 2019

III. Old Business:
   A. Property at 610 South 9th Street – Javin Bedard
   B. Syringe Service Program Update – Ashlee Nelson
   C. Accreditation Update – Theresa Knox
   D. Strategic Plan Progress – Debbie Swanson
   E. Other Old Business

IV. New Business:
   A. NALBOH Meeting Report – Dr. Pyle and Haley Thorson
   B. Update on Vaping Illnesses – Haley Thorson and Kailee Dvorak
   C. Performance Management Presentation – Debbie Swanson
   D. Other New Business

V. Director’s Report

VI. Next Regularly Scheduled Meeting: January 9, 4:15 p.m.
   (Approve 2019 Community Health Assessment Report at January Meeting)

VII. Adjournment

Attachments: Issue Statements, Branch Activities Reports, Director’s Report, Performance
Management Plan and Strategic Plan Progress Report

Any individual requiring special accommodations to allow access or participation at a City meeting is asked to notify
the ADA Coordinator at (701) 746-2665 of his/her needs.
BOARD OF HEALTH ISSUE STATEMENT  
November 2019

**Topic:** Update on Electronic Vaping Devices  
**Contact:** Haley Thorson, 701-787-8135 or Kailee Dvorak, 701-787-8124  
**Background:** The Grand Forks Public Health Tobacco Prevention Program continues to monitor and respond to the ever-changing landscape of electronic vaping devices. Program staff would like to provide a comprehensive overview of the following:  
• Current reports of vaping-related illness and deaths  
• Preliminary data from the 2019 National Youth Tobacco Survey  
• Interim Committee Study on Taxation of Electronic Smoking Devices  
• Tobacco Prevention Program response related to electronic vaping devices  
**Action:** For information only

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**Topic:** Performance Management Plan  
**Contact:** Debbie Swanson, 787-8101  
**Background:** An established performance management plan is a requirement for Public Health Accreditation. Grand Forks Public Health has a long history of metric reporting measuring program outcomes and other elements of our work though we have not adopted a formal performance management plan. Other elements included in our new plan that demonstrate our accountability and focus on quality improvement are the established employee performance evaluation process and the financial reporting that is conducted by the department in coordination with our city Finance Department. The performance management plan informs and drives our quality improvement efforts. It is intended to be a living document that can be edited as our needs change. It is presented to the Board of Health for your review and approval.  
**Action:** Review performance management plan and approve with any suggested changes.

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**Topic:** Accreditation Progress Update  
**Contact:** Theresa Knox, 787-8113  
**Background:** The Public Health Accreditation Board (PHAB) documentation upload demonstrating how Grand Forks Public Health is meeting the Standards and Measures of PHAB Accreditation is due by March 19, 2020. This means that we are at the 6 month mark of the process. The department’s Domain Committees and the Accreditation Committee, made up of the Department Leadership and Domain Committee Leads, are meeting regularly. Updated plans and new work groups have energized the department’s work. The next 6 months should provide ample time, with hard and focused work, to meet the March deadline. Theresa will keep the Board Members apprised of next steps.
Action: For information only
Grand Forks Public Health Strategic Plan Progress Review
Grand Forks Board of Health Meeting
November 14, 2019

Completed Metrics:

- Baseline assessment of financial status has been completed and a report is available.
- Involvement in the 2018 Community Health Improvement Plan and 2019 Community Health Assessment continues through department personnel and community coalitions.
- The 2016 CHA and 2018 CHIP are available on our website and were shared with the media and policymakers. These documents continue to be used for program development in the community.
- A timeline for updating agency policies has been completed.
- The Communications Committee responsibilities have been formalized.
- The Public Information Officer role and responsibility is now incorporated into the department.
- The Grand Forks Public Health Communication and Branding Plan was completed May 2019.

Metrics in Progress:

- The Performance management plan was finalized on August 15, 2019 and staff review of plan is scheduled for October 28, 2019.
- A new deadline of July 31, 2019 was established for the agency technology plan. This has been delayed due to due to Windows 10 transition. The technology inventory is in progress and being updated.
- Implementation of recommendations of the agency space study:
  - Completed immunization room and lactation support room.
  - Grand Forks County has completed their three – five year study of department capital needs and it includes GFPH priorities of additional space for administrative staff, new carpet and paint, small meeting room and County Office Building specific recommendations such as a video board and technology upgrades on 6th floor.
- Reviewed and affirmed CHA and CHIP objectives and the 2019 CHA is in progress with Altru.
- The process for accepting and mentoring internship students needs a new deadline, however the City’s established process for accepting interns was successfully utilized in 2019.
- Plan for cross training staff is in progress but not formalized across the department.
- PHWINS data was reviewed and recommendations for updates to the WFD plan were made.
- We launched a new workforce development survey in September 2019. Results should be available in October and will be presented to the staff to determine future workforce needs.
- The Employee Orientation Committee was formed to develop new employee orientation and onboarding process and their work is progressing well.
- Department policies are in the process of being updated with some significant changes as a result of accreditation process.

Metrics Not Started Yet:

- The process and timeline for ongoing review of community health policies and identification of gaps needs a new deadline and assigned staff.
- The Policy System and Environmental Change (PSE) informational presentation for agency staff, partners and city/county departments due date was moved to September 30, 2019.
Performance Management Plan
Grand Forks Public Health

Adopted August 15, 2019
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Purpose and Vision

This plan establishes policies and procedures for improving the quality of public health services and monitoring the performance of the Grand Forks Public Health Department (GFPH). The performance management plan is a living document that supports setting strategic priorities and functions of the health department and creates a system of monitoring, thus demonstrating that quality improvement is applied.

This performance management plan encompasses performance in many areas ranging from individual employee performance, to development of financial processes and reporting, and program implementation with measurements to show effectiveness and improved health outcomes. Grand Forks Public Health actively uses data to improve the public’s health within our jurisdiction.

Vision for Grand Forks Public Health related to Performance Management (PM) and Quality Improvement (QI):

We are committed to developing a Culture of Quality throughout our organization. The Performance management plan aligns our strategic plan, mission, vision and values into actionable goals and objectives. PM and QI activities will reflect the organization’s understanding of health equity and will apply a data driven approach. Linkages to the Community Health Assessment, Community Health Improvement Plan and Strategic Plan will be demonstrated whenever possible.

Key Terms

Performance Management for Public Health – A fully functioning performance management system that is completely integrated into health department daily practice at all levels includes: 1) setting organizational objectives across all levels of the department, 2) identifying indicators to measure progress toward achieving objectives on a regular basis, 3) identifying responsibility for monitoring progress and reporting, and 4) identifying areas where achieving objectives requires focused quality improvement processes. (Public Health Accreditation Board. Standards and Measures Version 1.5. Alexandria, VA, December 2013).

Performance Standards – A performance standard is a quantified expression of the performance threshold(s), requirement(s), or expectation(s) that work units aim to achieve. The collection, analysis, interpretation, and presentation of performance data establishes accountability and transparency and results in continuous improvement.

Performance Measure – A quantitative expression of how much, how well, and at what level programs, services, and products are provided within a given period. In other words, performance measures directly measure or quantify activities and processes of a program.

Performance Management Committee – A cross sectional representation of GFPH personnel in key leadership positions selected to support and monitor performance management activities of the department.

Quality Improvement – Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to

**Organizational Structure Supporting Performance Management**

- Grand Forks City Government
- Grand Forks Public Health Department
- Grand Forks Public Health Leadership Team
- Quality Improvement Committee
- Quality Improvement Project Teams

Grand Forks City Government includes the Grand Forks City Council and Grand Forks Board of Health, the governing and advisory bodies, respectively. They provide broad policy guidance and monitor performance through budget metrics and formal reporting processes.

Grand Forks Public Health Department includes all personnel employed by the City of Grand Forks to carryout public health programs and services.

Grand Forks Leadership Team includes senior and middle leadership personnel who have leadership responsibilities and accountability for their branches and teams. This team also functions as the performance management team.

Quality Improvement Committee is defined in the QI plan and has formal processes for member selection and activities. They oversee all elements of QI in the department and conduct training for personnel.
Quality Improvement Project Teams are self-selected teams that work on specific quality improvement projects identified through performance management measures, recommendations from staff, or through gaps identified by the leadership team. Project teams include at least one member of the QI committee.

**Performance Management at Grand Forks Public Health**

GFPH performance management activities are aligned with the concepts developed by the Turning Point Performance Management Framework and disseminated by the Public Health Foundation. A visual representation of how those concepts are applied at GFPH appears below.

![Public Health Performance Management System](image-source)

The Grand Forks Public Health Leadership Team functions as the performance management committee for the department. Members include: Health Department Director, Public Health Administrative...
Coordinator, Environmental Health Manager, Mosquito Control Manager, Nursing and Nutrition Manager, Public Health Team Leaders and Project Coordinators. The leadership team meets monthly and reviews performance related topics such as employee performance system, workforce development, financial management, budgeting, program measures and evaluation, and department administrative functions. Since performance standards are linked to the department strategic plan, this allows for monitoring and suggested improvement activities.

An agency wide performance management and quality improvement self-assessment using a modified version of the NACCHO Organizational Culture of Quality Self-Assessment was conducted in 2019. The information gathered will help us to prioritize next steps in both our performance management and QI activities and training needs identified. Periodically reassessing the agency will be necessary to ensure new personnel have thorough knowledge and that GFPH is accomplishing annual goals.

**Quality Improvement (QI)**

**QI Plan** – GFPH has adopted a QI Plan that identifies areas of current operational performance for improvement within the agency. It also outlines the committee membership, how QI is conducted in the agency including tools and QI project facilitation, communication to staff members and stakeholders, plans for assessment of our QI Culture and measuring results. Through an accreditation support initiative grant received in 2016 from the National Association of County and City Health Officials (NACCHO), GFPH began extensive training on quality improvement processes. Upon the adoption of the QI Plan, training was institutionalized into the department including: QI tools training, QI project facilitation training, and regular QI tips at staff meetings.

**QI Committee** – A cross sectional representation of the GFPH selected to support and drive Continuous Quality Improvement activities within the health department. It consists of staff members specifically trained in Quality Improvement in order to provide counsel and guidance to QI Project teams.

**QI Communication** – Methods used to communicate information about QI activities which may include updates at monthly leadership team and staff meetings and quarterly Board of Health meetings, Q-tips, and department wide e-mail communication.) Measuring our QI culture has been accomplished through a baseline survey and plans are underway to use established survey tools to provide qualitative and quantitative information on progress to date. We expect to complete this process and discern how QI is incorporated into daily performance.

**Performance Measurement (PM)**

The Grand Forks Public Health Department has had a system of metric reporting in place for approximately 25 years. Staff members select performance measures to align with department strategic priorities or program and grant reporting requirements. These metrics have changed over the years as priorities change, new programs or public health concerns arise, or significant investments are made. Performance metrics include both process measurements and health outcomes that are program specific or health department performance related. The metrics include the source of data, target and current data and identified gaps. Front line staff members are engaged in setting goals and metrics for programs with an emphasis on aligning them with the Strategic Plan and Community Health Assessment. Personnel may use logic models or other planning tools to measure impacts and outcomes. The focus of department measures is to drive QI activities.
The process of reporting metrics at regular staff meetings allows for discussion among staff, opportunities to receive feedback and identification of areas needing quality improvement. Select metrics, along with a brief narrative and financial comparisons of current and past years, are communicated to the Grand Forks community at large on an annual basis, by means of the City of Grand Forks Budget Book.

A detailed listing of performance measurements or metrics are found in Appendix A. The performance measures are divided into broad categories as follows:

1) Health Outcome Measures - measures over which the department has direct control and impact, including health status indicators.

2) Administrative Process Measures – measures that reflect the department’s performance on administrative functions including:

   Customer Service
   Financial and Grant Reporting
   Payroll Processes
   Employee Performance System

3) Program Specific Measures:

   Environmental Health
   Disease Prevention
   Health Promotion
   Health Services
   Family Health
   Mosquito Control
   Harm Reduction

Sample performance measures with recommended reporting format are available in Appendix B.

**Quality Improvement and Performance Management Training**

GFPH has a history of measuring program outcomes and administrative processes for many years without formal training on performance management. Other elements of performance management instrumental to our operations, such as employee performance and financial management are supported by other departments in City governance. There is recognition that training on those processes could be formalized and QI processes applied.

Recognizing the need for adopting formal training on PM and QI that is specific to public health, GFPH established intensive training plans for QI in 2017 and 2018 (See GFPH QI Plan) and is in the process of formalizing PM training beginning in 2019.

PM training will build upon past training available to personnel through national resources such as webinars and self-study courses. Training will be prioritized for the Performance Management Team followed by front line personnel.
Engaging Internal and External Stakeholders and Communication

GFPH QI committee members report progress of QI projects and performance management measures at quarterly QI Committee meetings, staff meetings, Board of Health meetings and to various external coalitions, committees and partnerships as appropriate. Feedback is encouraged in an effort to ascertain if the correct things are being measured, analysis of the health impact, and to recommend QI specific actions or further analysis.

Grant funded programs have individual performance indicators required by funding entities that are closely followed and reported at regular intervals determined by the external agency. In most cases, reimbursement for services or grant funding in contingent on this reporting according to deadlines.

Select performance management outcome measures are sent annually to the City Finance Department for inclusion in the City of Grand Forks final budget document. The Grand Forks City Council reviews and approves this document and all performance measures annually. The performance measures include data from multiple years when available to demonstrate efficiency of programs and determination of whether planned performance is achieved.

Employee Performance System

The City of Grand Forks maintains an employee evaluation system that is a component of a “pay for performance” model adopted by the Grand Forks City Council. As a Department of the City of Grand Forks, this pay for performance and evaluation system is in place for GFPH. The evaluation system is an electronic tool that captures employee performance across elements of each employee’s annual action plan. The action plan elements are weighted to reflect the importance or time spent on each area of the action plan. A sample action plan is available in Appendix C.

Supervisors are encouraged to document performance throughout the year that reflects ongoing improvements and areas of development. Personnel have an opportunity to provide a “shout out” or positive feedback to other employees in the department and this information is filtered and shared with individual employees through the electronic system. A detailed overview of the employee performance system is available in the shared resource file and the City Intranet.

Plan Review

The GFPH Performance Management Plan will be reviewed annually to update progress and make necessary revisions that reflect current performance management and quality improvement practices. Additionally, staff surveys that address PM and QI will be conducted every two years to inform the plan revisions and identify training needs for personnel.
Summary

Together all of the elements of performance management are necessary to provide an efficient and effective public health department that meets the needs of residents, protects the health of the public and is responsive to internal and external stakeholders. The journey to a culture of performance management and quality improvement at GFPH is always evolving and changing, and is supported by strong leadership and committed and engaged personnel.
References and Resources

Public Health Accreditation Board. Standards and Measures Version 1.5. Alexandria, VA, December 2013

Public Health Foundation. Resources Available at http://www.phf.org/focusareas/performancemanagement/Pages/Performance_Management.aspx


Performance Management in Public Health. The Ohio State University. Available at https://u.osu.edu/pmtoolkit/trainings-and-resources/

# Appendix A

## List of Performance Measures and Metrics for Grand Forks Public Health Department

<table>
<thead>
<tr>
<th>BRANCH</th>
<th>TOPIC/MEASUREMENT</th>
<th>REPORTING FREQUENCY</th>
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<tbody>
<tr>
<td>Administration</td>
<td>Promptly prepare invoices for payment</td>
<td>Semi annually</td>
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<td></td>
<td>Provide satisfactory external customer service</td>
<td>Annually</td>
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<td></td>
<td>Promptly complete financial billing information</td>
<td>Monthly</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>Food establishments over risk level 1 maintain a certified food safety manager on staff</td>
<td>Annually</td>
</tr>
<tr>
<td></td>
<td>Investigate complaints in a timely manner</td>
<td>Quarterly</td>
</tr>
<tr>
<td></td>
<td>Resolve complaints in a timely manner</td>
<td>Quarterly</td>
</tr>
<tr>
<td></td>
<td>Inspect pool facilities twice a year</td>
<td>Semi annually</td>
</tr>
<tr>
<td></td>
<td>Pools maintain water quality</td>
<td>Semi annually</td>
</tr>
<tr>
<td></td>
<td>Regular inspection of all food establishments</td>
<td>Annually</td>
</tr>
<tr>
<td></td>
<td>Active managerial control of foodborne illness risk factors</td>
<td>Annually</td>
</tr>
<tr>
<td>Mosquito Control</td>
<td>Eliminate mosquito-borne diseases &amp; reduce the nuisance level of mosquitoes while maintaining the integrity of our ecosystem</td>
<td>Annually</td>
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<tr>
<td>Nursing &amp; Nutrition</td>
<td>Wellness program participation at 50% or greater</td>
<td>Annually</td>
</tr>
<tr>
<td></td>
<td>Reduction in youth tobacco use rates</td>
<td>Biennially</td>
</tr>
<tr>
<td></td>
<td>Increase effectiveness of HIV testing and counseling through measurement of client satisfaction surveys</td>
<td>Quarterly</td>
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<tr>
<td></td>
<td>Reduce the incidence of TB disease by increasing the number of residents who complete treatment for TB infection</td>
<td>Annually</td>
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<tr>
<td></td>
<td>Achieve 100% of Women’s Way screening goal</td>
<td>Annually</td>
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<tr>
<td></td>
<td>Increase the number of employers that have lactation support programs consistent with the Healthy People 2020 goal of 38 percent.</td>
<td>Annually</td>
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</table>
**OBJECTIVE:** Investigate complaints in a timely manner.

**BENCHMARK:** Investigate complaints within 2 business days.

**Grand Forks Nuisance Investigation Rate**

Frequency: Quarterly  
7/9/19  
Source: Environmental
OBJECTIVE: Resolve complaints in a timely manner.

BENCHMARK: Resolve 90% of complaints within 30 calendar days.

Grand Forks Nuisance Resolution Rate

Target: 90% resolved

Frequency: Quarterly 7/9/19 Source: Environmental
**GOAL:**
Prevent initiation of tobacco use among young people.

**BENCHMARK:** Achieve a reduction in cigarette smoking by students in grades 9-12 from 19.5% to 16%. (Healthy People 2020)

**OBJECTIVE:** By June 2017, decrease cigarette smoking among North Dakota students grades 9-12 from 8.8% to 6%.

*Each blue arrow ( ) represents a significant state or local tobacco prevention policy initiative.*

*The Grand Forks Area represents 1 of 8 regions set by the North Dakota Dept of Public Instruction. Regional results are compiled based on voluntary participation within each respective region, and therefore cannot be compared from year to year.*

Frequency: Biennial  | Data Source: Nursing & Nutrition, Tobacco Prevention Program, 2017 ND Youth Risk Behavior Survey

Fall 2018
FY 2017-2018 Objectives:
• To screen 95% of the Statewide total goal of 1300 women
• To screen 90% of the Grand Forks LCU total goal of 285 women

GOAL: Reduce the incidence of breast and cervical cancer in North Dakota

Benchmark: Achieve 100% of Statewide & Grand Forks LCU screening goals each year

Frequency: Annually

Source: Nursing
Program Goals:
• Eliminate mosquito-transmitted diseases
• Be environmentally sensitive
• Provide relief from mosquitoes by reducing the adult mosquito population to a tolerable level
• Citizen satisfaction

Objective:
Reduce the adult mosquito population to a tolerable level

Benchmark:
Reduce the mosquito population to an average daily count of 30 or less.

Mosquito Control Program

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<tr>
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<tbody>
<tr>
<td>Average Daily Mosquito Counts</td>
<td></td>
<td></td>
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<tr>
<td>Annual (Season Average)</td>
<td>12</td>
<td>10</td>
<td>10</td>
<td>15</td>
<td>3</td>
<td>4</td>
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<td>3</td>
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2019 West Nile Virus Samples and Testing

Beginning: June 1, 2019
Through: Sept. 25, 2019

<table>
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<tr>
<th>GF County</th>
<th>ND Positive to Date</th>
<th>Nation-wide Positive*</th>
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<tr>
<td>Humans</td>
<td>1</td>
<td>7</td>
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<tr>
<td>Horses</td>
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<tr>
<td>Birds</td>
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<td>Mosquito Pools</td>
<td>2</td>
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<td>Other Veterinary</td>
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2019 WNV Human Summary

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<th>Total Cases: Age Information:</th>
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<tbody>
<tr>
<td>Gender: Range</td>
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<tr>
<td>----------------</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Male</td>
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<td></td>
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<tr>
<td></td>
</tr>
<tr>
<td>Hospitalized</td>
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<tr>
<td></td>
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<tr>
<td>Deaths:</td>
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### Program Goals:
- Eliminate mosquito-transmitted diseases
- Be environmentally sensitive
- Provide relief from mosquitoes by reducing the adult mosquito population to a tolerable level
- Citizen satisfaction

### Objective:
Reduce the adult mosquito population to a tolerable level

### Benchmark:
Reduce the mosquito population to an average daily count of 30 or less.

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**Precipitation**

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<td>2.94</td>
<td>2.98</td>
<td>3.58</td>
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**Number of Citywide Sprays**

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**Average Precipitation**

- Normal: 3.74
- May: 2.75
- June: 3.74
- July: 2.17
- August: 3.14
- Total: 12.8

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Grand Forks Public Health

**Public Health**
Prevent. Promote. Protect.
Appendix C

Employee Action Plan Sample Template

Dept. Name: Health
Job Title:
Employee Name:
Date Updated:

Action Items:

1. Safety
   Goals/Description:
   1. Complete emergency and safety training, thereby integrating and implementing safety principles 100% of the time.
   3. Report all accidents immediately to appropriate supervisor and/or city staff. Complete forms within 1 business day.
   4. Follow all safety policies and procedures and participate in safety inspections.
   5. Make safety suggestions and report unsafe conditions.
   6. Wear proper personal protective equipment as applicable.
   7. Complete required defensive driving training and recertification every 2 years.
   8. Attend monthly staff meetings to receive safety training.

2. Leadership
   Goals/Description:
   1. Demonstrate ethical behavior at all times and act in line with the values of the department.
   2. Provide staff development opportunities and training to team members as appropriate.
   3. Complete employee performance evaluations according to the timeline set by the City of Grand Forks and provide regular feedback to direct reports.
   4. Utilize quality improvement concepts to improve public health programs and services.
   5. Plan and develop programs to address public health issues, using resources to prepare budgets, grants and program guidelines as outlined in public health best practices.
3. Professional Knowledge and Skills

Goals/Description:

1. Maintain knowledge and skills necessary to perform functions of the job description.

2. Serve as a resource to the community on public health topics and within program expertise.

3. Attend continuing education opportunities relevant to public health program area and incorporate new information into practice.

4. Communication Skills

Goals/Descriptions

1. Communicate information to personnel, colleagues, and others in a timely and accurate manner.

2. Demonstrate effective written and interpersonal communication skills.

3. Communicate to groups using effective presentation skills and tools that enhance learning and understanding

4. Conduct media interviews when requested to do so within the scope of knowledge.

APPROVAL

Employee: _________________________________ Date: _______________

Supervisor: _______________________________ Date: _______________

Department Head: _________________________ Date: _______________
Public Health Performance Management

Grand Forks Public Health
October 28, 2019

Grand Forks Board of Health
November 14, 2019
Performance management encompasses the ongoing process of measuring, monitoring, and reporting of progress toward strategic organization, division, and program goals and objectives. Performance management is closely linked with quality improvement (QI), as it provides a structured, data-driven approach to identifying and prioritizing opportunities for improvement.
However, performance management is distinct from quality improvement. Performance management is the continuous use of four components: performance standards, performance measures, reporting of progress, and quality improvement.
Public Health Performance Management System Framework

**Visible Leadership**

**Performance Standards**
- Identify relevant standards
- Select indicators
- Set goals and targets
- Communicate expectations

**Performance Measurement**
- Refine indicators
- Define measures
- Develop data systems
- Collect data

**Reporting Progress**
- Analyze and interpret data
- Report results broadly
- Develop a regular reporting cycle

**Quality Improvement**
- Use data for decisions to improve policies, programs, outcomes
- Manage changes
- Create a learning organization

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Public Health Foundation

Grand Forks Public Health
* Performance Management: The use of performance measurement information to help set agreed-upon performance goals, allocate and prioritize resources, inform managers to either confirm or change current policy or program directions to meet those goals, and report on the success in meeting those goals.
Performance Standards: Generally accepted, objective standards of measurement such as rules or guidelines against which an organization’s level of performance can be compared.

Performance Measures: The specific, quantitative representations of a capacity, process, or outcome deemed relevant to assessing performance

(Turning Point Guidebook for Performance Management, 2010)
We are committed to developing a culture of quality throughout our organization.

The performance management plan aligns our strategic plan, mission and vision into actionable goals and objectives.

Applies a data driven approach to quality improvement
Measuring What Matters in Public Health

**Assessing**
- CHA
- Workforce
- Culture of Quality
- Performance Measures

**Planning**
- CHIP
- Strategic Plan
- Workforce Dev. Plan
- QI Plan
- Operational Plan

**Improving**
- Address Gaps
- QI Projects
- Increase Efficiency
- Increase Effectiveness
- Improve Outcomes

Performance Management System
* Performance management drives quality improvement
* We are accountable to our stakeholders: residents, board of health, county commission, city council, community partners, funders and to each other
* Performance management committee is the GFPH leadership team
* Define results
* Identify performance indicators
* Develop performance monitoring plan
  * Measure: collect performance data
  * Use: analyze & review performance data and report to stakeholders
  * Improve: use results to inform management decisions
Multiple layers of financial performance and monitoring exist
Numerous sources of funding creates a complex funding structure for GFPH
City finance department has supportive role and provides accounting practices and audits
GFPH is currently engaged in QI project with Finance Dept. to improve processes related to grant budgets
Personnel Performance

* Personnel performance is monitored, measured and continuously supported
* Regular feedback is encouraged and supervisory training is offered informally through the human resource department
* Recruitment and retention impacts our quality culture
* New GFPH employee orientation process is being developed for greater consistency
Creating Our PM and QI Future

* Baseline Assessment
* Employee Engagement
* Adopted Performance Management Plan
* Adopted Quality Improvement Plan
* Focused Quality Improvement Projects
* Refinement of the Performance Management Plan
* Measurement
* Follow Up Assessment
* Our QI Culture is Embedded and Second Nature
Resources

Michigan Public Health Institute Office of Accreditation and Quality Improvement

Ohio State University College of Public Health – Accreditation Support Project
https://u.osu.edu/pmtoolkit/trainings-and-resources/

Public Health Accreditation Board
https://phaboard.org/2019/01/10/performance-management-finding-a-fit-for-your-health-department/

Public Health Foundation
http://www.phf.org/focusareas/performancemanagement/toolkit/Pages/Performance_Management_Toolkit.aspx

Turning Point Guidebook for Performance Management, 2010
http://bb.phf.org/resourcetools/Documents/PMCguidebook.pdf
Grand Forks Public Health hosted an Addiction Roundtable with Rep. Kelly Armstrong on July 30. Community partners and agencies funded by our opioid response grant provided an overview of their programs and accomplishments followed by a tour at Spectra Health’s medication assisted treatment program.

We recently hosted five interns in our department and some continue their work this fall. The interns, area assigned, university affiliation and mentors are: Pauline Myers, Environmental Health, Bemidji State University (Javin Bedard) *, Ashlee Nelson, Opioid Response Program, MPH at UND (Michael Dulitz) * Shay Schwimmer, Community Health Assessment, MPH at UND (Debbie Swanson), Riley Kimball, Community Nutrition UND (Mandy Burbank) and Stephanie Baumgarten, Maternal and Child Health, UND RN to BS Nursing (Betty Otteson) * Indicates participation in City sponsored internship program.

We spent the summer recruiting new staff members for several positions. The following individuals began employment in the department: Ciara Ballard – Social Detox Coordinator, Kelly Ozaki – Public Health Nurse, Brenda Bergman Veitz – Environmental Health Specialist and Dustin Johnson – Regional Emergency Planning and Response Coordinator.

Staff members continue to work hard on various elements of public health accreditation with Domain Teams meeting frequently and documents being uploaded into the ePHAB system that demonstrate our compliance meeting each measure. Staff members have invested significant time in accreditation activities!

A safety and security audit was conducted by the Department of Homeland Security which resulted in several recommendations for structural improvements to the department and additional active shooter training.

I attended a County Department Head meeting held on August 15 to welcome the president of the ND Association of Counties and staff from NDACo.

Our affiliation agreement with the UND MPH program was updated to reflect new course objectives and the leadership of both organizations. I continue to serve on the MPH Advisory Committee.

Activities related to the establishment of a syringe service program included presentations at the Grand Forks City Council and County Commission, meetings with the City Attorney, States Attorney and all law enforcement entities. A community meeting was held on August 14 to receive public comments on the program. The program plan was approved by the ND Dept. of Health on September 30, 2019.
ADMINISTRATIVE

• The Health Tracks Program has received timely payment from Medicaid in 2019. The Health Tracks screening team conducted screenings for Head Start children at the end of August and all payment was received before the end of September.

ENVIRONMENTAL HEALTH

• Brenda Bergman Veitz was hired to the position of Environmental Health Specialist.
• Dustin Johnson was hired to the position of Regional Emergency Preparedness and Response Coordinator.
• Matt Myrfield attended the North Dakota Legislative Management Commerce Committee meeting August 12, 2019 concerning the sewage treatment system regulation study.
• Ana Ebbert attended the State Health Council meeting August 14, 2019 concerning the cottage food rulemaking process.
• Ana Ebbert attended the National Environmental Health Association Region 4 conference in Omaha, NE September 25-26, 2019.
• GFPH is preparing to host the North Dakota Environmental Health Association annual conference at the Hilton Garden Inn October 22-24.

MOSQUITO CONTROL

• The Mosquito Control Program has been in the operational phase since the beginning of May. Daily operations during the summer involved larviciding, adulticiding, surveillance, site reduction and community education.
• West Nile virus (WNV) activity was very low throughout the state this year. As of September 27, there have been 7 human cases of WNV identified in North Dakota. One human case was identified in Grand Forks County. Grand Forks Mosquito Control identified 1 pool of mosquitoes positive. We also participated with the State Health Department’s surveillance in which they also identified 1 pool of mosquitoes positive with WNV.

NURSING & NUTRITION

• Theresa Knox attended the Public Health Nursing Conference in Bismarck, July 18.
• Mandy Burbank coordinated the Wellness Program’s Farmer’s Market for 5 Thursdays, July 18 – August 15, from 3:00 – 5:00 p.m. on the East Side of the County Office Building. This market was also open to the public.
• Ashley Krone attended the TB Stakeholder’s Meeting in Washington D.C., July 22-24 sponsored by NACCHO.
• Kailee Dvorak, Haley Thorson and Sarah Odegard represented the Tobacco Prevention Team at the Grand Cities Celebration, August 6.
• Haley Thorson was a presenter at the National Association of Local Boards of Health Conference in Denver, CO., and attended the Conference August 13-16.
• Kailee Dvorak and Haley Thorson attended the National Conference on Tobacco or Health in Minneapolis, MN, August 27-29.
WITHDRAWAL MANAGEMENT CENTER & OPIOID RESPONSE

- Alicia Amyotte assumed the position of full time Detox Advocate on the overnight shift. This alleviates some challenges related to staffing this shift. The facility continues to recruit part time positions that are vacant due to staff turnover.
- Minor improvements were made to the WMC including wall repair due to wear and tear over 3 years of operation, deep carpet cleaning, tree removal in front of the building and initiation of a recycling program.
- The WMC is working with United Way to help promote the Undies Sunday event. In return, the center will receive some of these supplies to help the center’s clientele.
- The staff at the WMC completed Narcan training, suicide prevention training and ND Quits/Tobacco Cessation training over the last three months.
- The Grand Forks City Council and Grand Forks County Commission provided concurrence with the Health Department’s decision to operate a Syringe Service Program on September 16th and 17th respectively.
- Michael appeared on The Jarrod Thomas Show on KNOX on September 20 to provide education and answer listener calls on the Syringe Service Program.
- The proposal for the Syringe Service Program was submitted to the state on September 25th. If approved, the program will operate as the “Any Positive Change Project” or APC Project. This program name alludes to the goal of our harm reduction programming – to help clients make any positive change.
- The North Dakota Department of Human Services has provided GFPH $232,215 in State Opioid Response Grant funds to continue local addiction response work. These funds will be used to support the Syringe Service Program as well as continuing to partner with community organizations to enhance substance use disorder treatment infrastructure.
- Ashlee Nelson, Opioid Response Intern, will be transitioning her role to become Community Behavioral Health Intern. In this internship, she will be partnering with Grand Forks Public Health, Grand Forks Public Schools, and Altru to help advance the work of the Mental Health Matters collaboration to address behavioral health needs in the community.