1. NACCHO Accreditation Support Initiative (ASI) Grant Updates

2. Northeast Ohio Accreditation Support System Updates

3. Review of performance management dashboard

4. Discussion of new customer satisfaction survey template and deployment

5. Review of templates/sample documents (from last meeting)
   a. Marketing Branding Plan
   b. Core Competency Integration in Job Descriptions
   c. New Employee Orientation Checklist

6. Review of gaps
   a. Compiling Epi/EP documentation requirements
   b. Customer Satisfaction Survey
   c. Employee satisfaction survey

7. Other discussion items/next steps
   a. Review of updated timeline
1. Accreditation Application Submitted!!
   a. Review timeline and next steps
      The team reviewed and updated the accreditation timeline, based on the submission of YCHD’s accreditation application.
   b. Review Domain Owner Assignments
      No changes were made to the domain owner assignments.

2. NACCHO Accreditation Support Initiative (ASI) Grant Updates
   YCHD was selected as one of twenty-four local health departments from 13 states to receive funding through NACCHO’s Accreditation Support Initiative (ASI) Grant. Funds can be used to support ongoing accreditation efforts and half of our accreditation application fees (a full $7,000 was awarded). A press release, using NACCHO’s template, has been developed. YCHD continues to participate in ongoing grant related calls and completed an interim progress report. YCHD’s workplan for the project reflects efforts to build an integrated performance management system (rather than separate divisional reports) based on the OSU performance management training attended this past August.

3. Review of performance management dashboard and critical plan implementation progress
   a. Strategic Plan
   b. Quality Improvement Plan
   c. Workforce Development Plan

   The team reviewed progress towards completion of the goals and objectives listed within each of the critical plans required for accreditation. Attention centered on review of the performance management dashboard, which requires updating. The team also reviewed progress related to implementation of the strategic plan, since two annual progress reports are required for accreditation. In addition, the QI Plan and Workforce Development Plan was discussed. While these plans do not require a comprehensive review, YCHD will need to provide two examples of implementing both. Implementation of the Workforce Development Plan could reflect recent trainings attended. Two QI projects identified to demonstrate implementation of the QI Plan include: 1) Conducting a customer satisfaction survey (which would also fulfill additional measure requirements and be part of our performance management system) and 2) implementation of an employee satisfaction survey.

4. Other discussion items

   As part of discussions related to implementation of the Workforce Development Plan, the team requested sample job descriptions which integrate the core competencies of public health professionals, developed by the Council on Linkages. It was noted that while “competencies” such as those required of nursing staff or sanitarians, are required, use of the Council on Linkages’ competencies is not a PHAB requirement. Emily will share a template for the team’s review during the next meeting.

   In addition, the team discussed the need to develop a marketing/branding plan, which would tie to one of the objectives outlined in the strategic plan. Emily will work to develop a draft, which could also be used to fulfill accreditation requirements.

   We are working to launch a new customer satisfaction survey template that would be culturally competent by using emoticons (smiley or frown faces). The survey has also be translated into Spanish. We anticipate that the
new survey template will be rolled out in Nursing and Vital Records areas in the coming weeks. We will be especially in tune with our customers’ feedback after our relocation to see if there are changes needed based on our new space.

5. Accreditation next steps:
   a. Once our application is accepted by PHAB, we will gain access to our electronic documentation database, ePHAB. We will have one year, as of the date we gain access to ePHAB to upload all documents (estimated December 2017-December 2018).

6. Action items:

<table>
<thead>
<tr>
<th>Task</th>
<th>Assigned to</th>
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<tbody>
<tr>
<td>Summarize notes from today’s meeting</td>
<td>Emily</td>
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<tr>
<td>Schedule meeting with Susan Kovich to collect outstanding emergency preparedness/epi files</td>
<td>Emily</td>
</tr>
<tr>
<td>Collect job description which integrates the Council on Linkages Core Competencies</td>
<td>Emily</td>
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<tr>
<td>Draft Marketing/Branding Plan</td>
<td>Emily</td>
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<tr>
<td>Draft Strategic Plan Annual Report</td>
<td>Emily</td>
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<tr>
<td>Send any AARs or other reports for emergency preparedness activities</td>
<td>Team</td>
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<tr>
<td>Send any call down lists for 24/7 response (such as OPHCS Reports from ODH)</td>
<td>Team</td>
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