

## Public Health Futures- Quality Indicators Work Group

Ohio Department of Health  
7<sup>th</sup> Floor Large Conference Room  
246 North High Street

October 9, 2013  
1:00- 3:00 PM

### **Meeting Summary**

#### Welcome and Introductions

In-person attendance: Will McHugh, ODH; Joe Mazzola, ODH; Nicole Brennan, ODH; Kate Philips, ODH; Beth Bickford, AOHC; Dr. Arthur James, ODH, OSU; Sierra Mullen, ODH; Web/Phone attendance: Terry Allan, AOHC, Cuyahoga County Board of Health; Claire Boettler, OPHA, Cuyahoga County Board of Health; Ron Graham, Lake County Combined Health District; Corey Hamilton, AOHC, Zanesville-Muskingum County Health Department; Tom Quade, Marion County Public Health;

#### Previous Meeting Summary

ODH sent out a survey monkey to prioritize indicators from the workgroup. The survey was sent out to 17 participants. As of yesterday 8 had responded. An updated indicator spread sheet was posted on the website. HPIOs workgroup indicators were part of survey monkey.

#### Discussion and Identification of Indicators

Luke Jacobs from OEHA went through the environmental health indicators and gave his insight on certain indicators. He discussed concern that there are not objective measures right now. He was going to contact his Board of Directors for feedback.

Dr. James participated on the work group and provided some feedback. The survey had strong support for these indicators including infant mortality by race; prematurity rate by race; interpregnancy spacing by age and race; perinatal smoking rates by age and race.

The work group talked about doing a percentage of all LHDs participating as an indicator. The main goal is more access not so much the funding. Right now about 80 LHD are doing MAC claiming so that is about 65%. Maybe set a goal of about 75%?

Survey responses were very supportive of all the indicators. It was suggested more specificity on asthma and tobacco are needed. The work group discussed the purpose of the HPIO work group. It was also proposed an indicator on cancer related to mortality. Indicators such as "able to work" or "overall well-being" are good for the narrative related more broadly to public health indicators. We want to make sure report tells the appropriate story. Survey agreed with preparedness communication LHD call backs and response rate; LTAR is off list now it is not going to be conducted anymore. Regarding pertussis the work group decided to use indicator number of cases rather than outbreaks.

#### Outline for Rules

There was no discussion of the draft rules outline.

#### Next Meeting

- October 15, 2013 1:00 pm