

Canton City Public Health Accreditation Document Cover Sheet

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|----------------|---|------------------|-----|-----------------|-------|
| Domain: | 9 | Standard: | 9.2 | Measure: | 9.2.2 |
|----------------|---|------------------|-----|-----------------|-------|

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|------------|---|-----------------|--------|----------------------|---------|
| RD: | 1 | Example: | 1 of 2 | Dated Within: | 5 years |
|------------|---|-----------------|--------|----------------------|---------|

| | |
|------------------------|---|
| Document Title: | Phone routing quality improvement project |
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|-----------------------|---------------|------------------------|--------------|
| Staff Contact: | Terri Dzienis | Contact Number: | 330-438-4640 |
|-----------------------|---------------|------------------------|--------------|

| | |
|-------------------|--|
| File Name: | 9.2.2 RD1 – 1 of 2 – Phone Routing Quality Improvement Project.pdf |
|-------------------|--|

| | |
|------------------------------|--|
| Document Description: | Phone routing quality improvement project – documentation of the process |
|------------------------------|--|

| Page # | Required Element |
|---------|---|
| | The health department must document implementation of quality improvement activities and the health department’s application of its process improvement model. Examples must demonstrate: |
| 2 - 7 | <ul style="list-style-type: none"> How staff problem-solved and planned the improvement, |
| 4 | <ul style="list-style-type: none"> How staff selected the problem/process to address and described the improvement opportunity, |
| 9 | <ul style="list-style-type: none"> How they described the current process surrounding the identified improvement opportunity, |
| 13 - 14 | <ul style="list-style-type: none"> How they determined all possible causes of the problem and agreed on contributing factors and root cause(s), |
| 15 - 22 | <ul style="list-style-type: none"> How they developed a solution and action plan, including time-framed targets for improvement, |
| 22 | <ul style="list-style-type: none"> What the staff did to implement the solution or process change, and |
| 24 | <ul style="list-style-type: none"> How staff reviewed and evaluated the result of the change, and how they reflected and active on what they learned. |



800-015-03-F: QI PROJECT TEAM (QIPT) CHARTER FORM

The QIPT should create this document utilizing the information on the QI Project Proposal and, if necessary, discussions with proposal submitter and/or process manager.

| | | | | | |
|---|---|----------------------------|----------------|-----------------------------|-----------------|
| Charter Last Updated Date: | | | | | |
| Project Title: | | | | | |
| Phone Answering and Routing | | | | | |
| Project Objectives: | | | | | |
| Reduce process steps/time | | | | | |
| Reduce time of caller on phone with wrong staff | | | | | |
| Improve customer & employee satisfaction | | | | | |
| Simplify main line auto-attendant | | | | | |
| Process Manager: Division Leaders | | | | | |
| Background (what is the problem, strategic importance, importance to customer): | | | | | |
| Callers choose wrong auto-selection | | | | | |
| Callers have more than one request that needs answered by more than one division | | | | | |
| Transfers to clerk to clerk instead of end users | | | | | |
| Boundaries (limits on scope of process change allowable by Process Manager, legal restrictions, budget, etc.): | | | | | |
| Nursing: HIPAA concerns of what can be shared and who it can be shared with | | | | | |
| Only NO COST solutions | | | | | |
| Process | First Step in the process (to be included in project): | | | | |
| | Call received/phone rings | | | | |
| Scope | Last Step in the process (to be included in project): | | | | |
| | Caller gets to where they needed | | | | |
| Performance Metrics: | | Performance Metrics | | Baseline Data? (Y/N) | |
| What measures will tell you if you are successful? | | Current | Goal | | |
| # of customer complaints with "you are the 3 rd person I have talked to" | | | | N | |
| # of calls to wrong HD | | | | N | |
| # of calls to incorrect Divisions | | | | N | |
| # of calls transferred to other clerks or to end user | | | | N | |
| # of callers requesting to talk to a live person (no voicemail) | | | | N | |
| Length of time/# of selections on main line auto-attendant | | | | N | |
| What team has authority to do: | | | | | |
| <input checked="" type="checkbox"/> Pilot improvement <input type="checkbox"/> Make recommendations to process owner prior to pilot | | | | | |
| Estimated Date of Completion: | | | | | |
| Meeting Frequency and Duration: | | | | | |
| Planned 2 meetings at 3.5 hours | | | | | |
| Actual meetings occurred on 8/18/2017, 8/25/2017, and 9/29/2017. | | | | | |
| Team Members: | | | | | |
| | Member Need | Name | Title | Level | Division |
| | QIPT Consultant (also serves as timekeeper) | Heather Macdonald | Lab Technician | | Lab |
| | Subject Matter Expert | Connie Ash | Clerk | | EH |
| | Subject Matter Expert | Connie Standard | Clerk | | Nursing |



| | | | | |
|---|---------------|------------------|--|-------|
| Subject Matter Expert | Jil Neuman | Clerk | | Vital |
| Subject Matter Expert | Ashley Archer | Clinic Assistant | | WIC |
| Fresh Perspective | | | | |
| Note taker/Scribe: Terri Dzienis | | | | |
| Other Notes about team/work: | | | | |

800-015-04-F: QI PROJECT WORKSHEET FORM

| | | | |
|---|--|---|--|
| Division / Program / Process Area: Administration Department Wide | | Program / Process Manager: Division Leaders | |
| Project Title: Phone Answering and Routing | | | |
| QIPT Consultant: | | Heather Macdonald, Lab | |
| Project Team Members: Connie Ash-Environmental Health Clerk, Connie Standard-Nursing Clerk, Ashley Archer-WIC Clinic Assistant, Jil Neuman-Vital Statistics Clerk | | | |
| Project Start Date: | | 8/18/17 | |
| PLAN PHASE | | | |
| Dates of team planning meetings: | | 8/18/2017, 8/25/2017, and 9/29/2017 | |
| Describe the problem / situation / process: There are three main lines to transfer and retransfer. Auto attendant is too long. Some calls are transferred to wrong person or department. If transferred to voicemail, calls can loop back to main number if caller presses 0. Callers ask the same questions over and over (WIC). Calls come in for other Health Departments. Clerks that answer phones do not know if a person is out of the office. Callers are unhappy to get voicemail. Calls for Building Code. Callers choose wrong Auto selection. Calls for external numbers. | | | |
| Process customers / stakeholders (both internal and external): Employees/Callers/other agencies | | | |
| AIM Statement (Specific, Measurable, Achievable/Action oriented, Realistic, Time Sensitive) Reduce errors, Reduce time spent on process by all staff, create a standardized phone list Utilize IT for Auto Attendant(WIC) | | | |
| How will you measure improvement? What baseline data will you use? IT provided a week of calls log for four main numbers Clerks and others recorded calls for one week. These logs identified two main issues; Calls for the wrong Health Department Calls for the wrong Division | | | |
| List contributing factors and root cause(s) to the problem and describe what QI tools were used: Calls for General info/Listed in the phone book as public information Transfer clerk to clerk instead of end user/clerks don't know who is off/call buttons on phone are outdated Auto selection too long/not pertinent Underutilization of technology/ No Auto Attendant for WIC Extensions are not provided/posted for all(safety concern) Tools used: SIPOC, Process Mapping, Tim U Wood, 5 Whys, Root Cause, Value Added | | | |

| |
|---|
| <p>List potential improvement strategies and describe what QI tools were used:</p> <p>Update internal routing list Auto attendant for WIC Provide copy of external #'s list to all clerks Out of office for more than one day list Update main phone auto attendant Define policy on providing direct dial phone #'s on letters, emails, website and exceptions Add website contact list for certain divisions Develop cheat sheet for clerks Update phone button labels on clerks phones Tools used: Brainstorming, Impact/Control Matrix</p> |
| <p>Select improvement strategy and describe what QI tools were used to make decision:</p> <p>Fact Sheet detailing areas of responsibility and extension numbers Best Practices - Phone Routing WIC auto attendant Tools used: Impact Control Matrix</p> |
| <p>Insert link to where project documents are stored, including 800-015-05-F (QI Project Action Plan Form):</p> <p>L:\ALL\Staff Committees\Quality Improvement\QI Projects\2017\QI Project Phone Routing</p> |
| <p>Develop and list process measures:</p> |
| <p>Develop and list outcome measures:</p> |
| <p>DO PHASE</p> |
| <p>Test improvement strategy (conduct key action steps):</p> <p>Create Best Practices Phone Routing Create Extension #'s and area of responsibility for EH Setup Auto Attendant for WIC</p> |
| <p>CHECK PHASE</p> |
| <p>Study the results. What does the data indicate?</p> |
| <p>ACT PHASE</p> |



Describe what action you will take:

- 1. Adopt the change**
- 2. Adapt the change and repeat the cycle**
- 3. Abandon the project**

Describe the key lessons learned (two to three):

List any measure that will continue to be tracked, frequency, and who will track the measure (this will be added to the PMS):

List process efficiencies gained as a result of this implemented improvement (if any):

List the QI Tools used for this project:

Project End Date:



Public Health
Prevent. Promote. Protect.

Canton City Health District

Canton City Health District
FINAL

| | | |
|--|--|--|
| Research having only one phone # for the HD (instead of each division having a #). Discuss with IT the capabilities. | | |
|--|--|--|

SUPPLIERS

- IT CITY
- INDIVIDUAL EMPLOYEES
- CITY HALL STOCK ROOM
- ROB + L DRIVE
- SHORTCUT CITY EMPLOYEE #'S
- CALLS
- PHONE COMPANY

INPUTS

- PHONE
- CALL ROUTING GUIDE
- MESSAGE PADS
- EMPLOYEE PHONE LIST
- CALLS
- COMPUTER

PROCESS

- CALL COMES IN
- DETERMINE NATURE OF CALL
- TRANSFER CALL OR ASSIST CALLER

OUTPUTS

- DECISION OF TRANSFER OR ASSIST
- WRITTEN PHONE MESSAGE
- INFORMATION TO CALLER
- VOICE MAIL

CUSTOMERS

- EMPLOYEES
- CALLERS
- OTHER AGENCIES



Call Norm
Phone Rings

Answer Phone

Let the caller

~~in Pulling Files~~
I - TOO MUCH INFO

Ask Question

SERIES OF QUESTIONS

Ask Question

I - TOO MUCH INFO
D - INACCURATE INFO

Transfer

CLERK IS END USER
BEGINNING

T - TRANSPORTATION TO OTHER AGENCY

Lead up information

Refer to Country

DEFECT RETURNED CALL

STANDARDIZE INFO SHEET
D - INACCURATE INFO
D - WASTED MATERIAL

TO CCHD
CLERK IN OTHER DIVISION

Transfer Call

U - PHONE UPDATE
BUTTONS (SHORT CUT)

TO END USER

M - WANT TO DETAIL
U - TECHNOLOGY PHONE STRAIGHT TO VOICE MAIL
WILL BE ADDRESSED

A
high Impact

B
Low Impact

high Control

LIST OF
EXTERNAL
#'S

VITAL
UPDATE
CALL BUTTONS
TO REFLECT
CURRENT PERSONS
MOST NEEDED

DENTAL
PHONE - DIAL
VOICE MAIL

IF AN
EMERGENCY
911
INSTEAD OF
0

STANDARD
CHEAT
SHEET FOR
EH, & EVERY
BODY ELSE

C

D

Low Control

caller providing
too much
Information

RHCS

Facebook

Phone Routing QI Project: Baseline Data collected during 9/15/2017-9/22/2017

| RAW DATA | | | | | | | | | | RATE DATA | | | | | | | |
|-------------------------|---------------------------------|-----------|---|---|---|---|---|--|----------------------------------|---|---|---|-------------|-------------|--------------|--|--|
| Division | Persons | Date | Call received for incorrect CCHD for incorrect HD | Callers requesting to talk to a live person | Callers complaining about # of people talked to | Calls transferred to another division clerk | Calls transferred to final person in another division | Total calls received during office hours | Call received for incorrect CCHD | Callers complaining about # of people talked to | Calls transferred to another division clerk | Calls transferred to final person in another division | | | | | |
| EH 489-3327 | Connie A | 9/15/2017 | 0 | 3 | 0 | 0 | 3 | 22 | 0.0% | 13.6% | 0.0% | 0.0% | 0.0% | 13.6% | | | |
| | | 9/18/2017 | 1 | 4 | 2 | 0 | 4 | 45 | 2.2% | 8.9% | 4.4% | 0.0% | 0.0% | 8.9% | | | |
| | | 9/19/2017 | n/a | n/a | n/a | n/a | n/a | 27 | n/a | n/a | n/a | n/a | n/a | n/a | | | |
| | | 9/20/2017 | 0 | 1 | 1 | 0 | 1 | 37 | 0.0% | 2.7% | 2.7% | 0.0% | 0.0% | 2.7% | | | |
| | | 9/21/2017 | 1 | 1 | 1 | 0 | 2 | 25 | 4.0% | 4.0% | 4.0% | 0.0% | 0.0% | 8.0% | | | |
| | | 9/22/2017 | 1 | 2 | 0 | 0 | 2 | 28 | 3.6% | 7.1% | 0.0% | 0.0% | 0.0% | 7.1% | | | |
| EH AVERAGE: | | | 0.6 | 2.2 | 0.8 | 0.0 | 0.0 | 2.4 | 31.4 | 2.0% | 7.3% | 2.2% | 0.0% | 0.0% | 8.1% | | |
| EH MAX: | | | 1 | 4 | 2 | 0 | 0 | 4 | 45 | 4.0% | 13.6% | 4.4% | 0.0% | 0.0% | 13.6% | | |
| WIC 489-3326 | Ashley, Sharon, Linda | 9/15/2017 | 1 | 0 | 0 | 0 | 0 | 29 | 3.4% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| | | 9/18/2017 | 4 | 0 | 0 | 0 | 0 | 61 | 6.6% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/19/2017 | 5 | 0 | 0 | 0 | 0 | 56 | 8.9% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/20/2017 | 1 | 0 | 0 | 0 | 0 | 50 | 2.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/21/2017 | 4 | 1 | 0 | 0 | 0 | 51 | 7.8% | 2.0% | 0.0% | 0.0% | 0.0% | | | | |
| WIC AVERAGE: | | | 3.0 | 0.2 | 0.0 | 0.0 | 0.0 | 49.4 | 5.8% | 0.4% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| WIC MAX: | | | 5 | 1 | 0 | 0 | 0 | 61 | 8.9% | 2.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| Vital 489-3231 | Jil, Chrissy, Diana | 9/15/2017 | 0 | 4 | 0 | 0 | 2 | 64 | 0.0% | 6.3% | 0.0% | 0.0% | 3.1% | 4.7% | | | |
| | | 9/18/2017 | 2 | 5 | 0 | 0 | 1 | 64 | 3.1% | 7.8% | 0.0% | 0.0% | 1.6% | 7.8% | | | |
| | | 9/19/2017 | 4 | 16 | 0 | 0 | 2 | 46 | 8.7% | 34.8% | 0.0% | 0.0% | 4.3% | 17.4% | | | |
| | | 9/20/2017 | 1 | 4 | 0 | 0 | 1 | 38 | 2.6% | 10.5% | 0.0% | 0.0% | 2.6% | 5.3% | | | |
| | | 9/21/2017 | 2 | 2 | 0 | 0 | 1 | 41 | 4.9% | 4.9% | 0.0% | 0.0% | 2.4% | 2.4% | | | |
| | | 9/22/2017 | 1 | 6 | 2 | 0 | 0 | 7 | 47 | 2.1% | 12.8% | 4.3% | 0.0% | 0.0% | 14.9% | | |
| Vital AVERAGE: | | | 1.2 | 4.2 | 0.4 | 0 | 1 | 3.6 | 50.8 | 2.6% | 8.4% | 0.9% | 0.0% | 2.0% | 7.0% | | |
| Vital MAX: | | | 2 | 6 | 2 | 0 | 2 | 7 | 64 | 4.9% | 12.8% | 4.3% | 0.0% | 3.1% | 14.9% | | |
| Nursing 489-3322 | Ashanti, Connie S | 9/15/2017 | 2 | 0 | 0 | 0 | 0 | 24 | 8.3% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| | | 9/18/2017 | 0 | 1 | 0 | 0 | 1 | 39 | 0.0% | 2.6% | 0.0% | 0.0% | 2.6% | 2.6% | | | |
| | | 9/19/2017 | 0 | 1 | 0 | 0 | 1 | 26 | 0.0% | 3.8% | 0.0% | 0.0% | 3.8% | 0.0% | | | |
| | | 9/20/2017 | 0 | 3 | 0 | 0 | 0 | 32 | 0.0% | 9.4% | 0.0% | 0.0% | 0.0% | 3.1% | | | |
| | | 9/21/2017 | 1 | 1 | 0 | 0 | 0 | 64 | 1.6% | 1.6% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| | | 9/22/2017 | 1 | 0 | 0 | 0 | 1 | 0 | 45 | 2.2% | 0.0% | 0.0% | 0.0% | 2.2% | 0.0% | | |
| Nursing AVERAGE: | | | 0.6 | 1.2 | 0 | 0 | 0.4 | 0.4 | 37 | 2.0% | 3.5% | 0.0% | 0.0% | 1.3% | 1.1% | | |
| Nursing MAX: | | | 2 | 3 | 0 | 0 | 1 | 1 | 64 | 8.3% | 9.4% | 0.0% | 0.0% | 3.8% | 3.1% | | |
| APC 489-3385 | Terri (from APC messages) | 9/15/2017 | 0 | 0 | 0 | 0 | 0 | 8 | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | |
| | | 9/18/2017 | 0 | 0 | 0 | 0 | 0 | 14 | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/19/2017 | 0 | 0 | 0 | 0 | 0 | 6 | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/20/2017 | 0 | 0 | 0 | 0 | 0 | 11 | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | | | | |
| | | 9/21/2017 | 0 | 1 | 0 | 0 | 0 | 1 | 16 | 0.0% | 6.3% | 0.0% | 0.0% | 0.0% | | | |

| | TRAFFIC FOLDED | INCORRECT DIVISION | INCORRECT AD |
|-------|-------------------|-----------------------|-----------------|
| EH | 8.1 | 7.3 15.6 | Ø |
| WIE | Ø | 5.8 0.4 | 5.8 |
| VITAL | 7.0 | 8.4 | 2.6 |
| NURS | 1.1 | 3.5 | 2.0 |

ISSUES

- ① Callers Choose wrong auto selection
 - Callers have more than one request that needs answered by more than one Division
- ② Get calls for general info (SSN, how to est paternity, etc)
 - A lot of smoking complaints or building code
 - Auto selection too long
 - if a caller has a question for external #'s, some Divisions have the info & some doesn't
- ③ Transfers from clerk to clerk instead of end users
 - CLERKS DON'T KNOW FOR SURE IF CALL IS GOING TO RIGHT PLACE
 - CLERKS KNOW WHAT IS GOING ON IN THEIR DEPT
 - Callers don't want to leave a message
- ④ Callers think they will get a live person, but they get voicemail
 - WRONG HEALTH DEPT STARR/CCHD etc
- ⑤ Callers Don't know parties extension
- ⑥ outdated phone list
 - employees don't check voicemail regularly - or return calls
 - Danas extension goes to voicemail directly; clerks need to verify in person
 - end person asks clerk several Q's about call, instead of accepting call & asking caller
 - end person is at their desk but lets call go to voicemail instead of answering
- ATTENDANCE - WHO IS OFF?
- voicemail messages not consistent (vacation notice, dial 0 for operator, etc)
- PHONE BOOK GOVERNMENT PAGES - LISTS 3327 AS PUBLIC INFORMATION

ROOT CAUSE

- ① Auto selection menu too long - not pertinent
↳ too generic (don't know what Ext means)
- ② Calls for general info
↳ Because we are listed in phone book as public info (or other reasons)
lazy - we help them
- ③ Transfer from Clerk to Clerk instead of end user
↳ why: Don't know who to call → or ask for Nursing
↳ why: Uses to be required policy → Not any more
- ④ why: Clerks need to inform them they might have to leave a voicemail
- ⑤ why: Ext not posted; ~~not provided~~
why: Not provided in letter (need to be direct #)
why: Policy is don't want it known? (crazy clients harassment)
↳ This may apply to some still → but not all
- ⑥ one person updates - so sometime behind
↳ Phone list good as is.
- ⑦ Transfer Call - underutilization of technology
↳ Phone buttons labels outdated

SOLUTION IDEAS



- Simplify Auto attendant
- Create list of common external #'s
- Create list of end user responsibilities
- Auto-attendant for WIC
- fact sheet for clerks (cutoff info, transfer call)

Auto Selection narrative - Jim Adams Voice

Doesn't mention Lab

- has Dial zero, then Linda Vanthorn voice for more info (like 911)
- for calls only for City residents

Best Practices – Phone Routing

Leave Voicemail:

When transferring call, “I am going to transfer your call to (Name or Dept). If they don’t answer, please leave a voicemail message and they will return your call.”

Cut off Customer providing too much information:

“Excuse me sir or madam, Let me transfer you to (Name or Dept) who can help you with that. If they don’t answer, please leave a voicemail message and they will return your call.”

Giving out last name:

“It is against company policy to give out my last name.”

Or, “I am the only (First Name) here.”

Insisting on Talking to a Live Person:

Assuming the person is irritated: Ascertain the problem/situation to know which Live Person available would be the best to handle take the call.

DEPT. PHONE EXT. NUMBERS

| RESPONSIBILITIES | PERSONNEL |
|---|---|
| GARBAGE - TRASH- BEDBUGS, WATER SHUT OFF, VIOLATION LETTERS | RICK MILLER SUPERVISOR #4658 OVERSEES COLTON & DENNY NW/SW - DENNY # 4653 NE/SE - COLTON # 4637 |
| RESTAURANTS, SCHOOLS, NURSING HOMES, VENDING MACHINES, CHILDCARE CTRS., TEMPORARIES, MOBILES, FESTIVALS | GUS DRIA – SUPERVISOR # 4647 OVERSEES - ALL FOOD SERVICE SANITARIANS |
| FROZEN DESSERTS, HOME DAY CARE MOBILES - TEMPORARIES | BRIAN - #4649 |
| FOOD SERVICE – TATTOOS – VENDING - TEMPORARIES | MARIA - # 4651 |
| FOOD SERVICE - SWIMMING POOLS - TEMPORARIES | KIM - #4648 |
| EMERGENCY PREPAREDNESS- DOG BITES - ANIMAL BITES, RABIES CLINIC - HAN | PATTY - #4654 |
| LEAD CLEARANCE - MOLD - EBL FOR LEAD - SMOKING COMPLAINTS - BARS ETC. HOME INSPECTIONS | RICK - # 4658 |
| BIRTH & DEATH RECORDS | VITAL STATS - # 3231 |
| AIR MONITORING - FUGITIVE DUST - ODORS - PERMITTING/AQI | LINDA - # 4665 |
| ASBESTOS & DEMO NOTIFICATIONS | JACKI - # 4663 |
| OPEN BURNING | COURTNEY - # 4664 |

**ENVIRONMENTAL HEALTH DEPT.
PHONE EXT. NUMBERS**

| RESPONSIBILITIES | PERSONNEL |
|---|---|
| GARBAGE - TRASH- BEDBUGS, WATER SHUT OFF, VIOLATION LETTERS | <p align="center">RICK MILLER SUPERVISOR #4658 OVERSEES COLTON & DENNY</p> <p align="center">NW/SW - DENNY #4653 NE/SE - COLTON # 4637</p> |
| RESTAURANTS, SCHOOLS, NURSING HOMES, VENDING MACHINES, CHILDCARE CTRS., TEMPORARIES, MOBILES, FESTIVALS | <p align="center">GUS DRIA – SUPERVISOR # 4647 OVERSEES - ALL FOOD SERVICE SANITARIANS</p> |
| FROZEN DESSERTS, HOME DAY CARE MOBILES - TEMPORARIES | BRIAN - #4649 |
| FOOD SERVICE – TATTOOS – VENDING - TEMPORARIES | MARIA - # 4651 |
| FOOD SERVICE - SWIMMING POOLS - TEMPORARIES | KIM - #4648 |
| EMERGENCY PREPAREDNESS- DOG BITES - ANIMAL BITES, RABIES CLINIC - HAN | PATTY - #4654 |
| LEAD CLEARANCE - MOLD - EBL FOR LEAD - SMOKING COMPLAINTS - BARS ETC. HOME INSPECTIONS | RICK - # 4658 |

Revised Phone Script 3304893231

Thank you for calling ~~the~~ Canton City Public Health-Dept

For current information you may use our website www.cantonhealth.org at any time

If you know your parties extension you may dial it now

Please listen carefully to the following options so we may direct your call

For recorded info on birth and death certificates Laboratory or water testing project press 1: very detailed lengthy recording direct to 4671

For directions on how to get to the CCHD THRIVE or our infant mortality project press 2: no directions recording says "at the tone leave message for mailbox 3235 and then recording about if this is an emergency dial 911, city offices numbers ... direct to 234-410-3087

For birth or death records press 3: please hold while I transfer your call went to live person

For Nursing clinics or to report a communicable disease press 4: went straight to live person

For Environmental Health press 5: went straight to live person

For WIC press 6: went straight to WIC new script recording

For Air Pollution Control press 7: went straight to Air Po script recording

For epidemiology or health alert information press 8: direct to 4654

For Recycling Center press 9: direct to 330-430-7869

For all other questions press 0

To repeat these options press *

Commented [TD1]: Request from the VS QIPT member was this was unnecessary

Commented [TD2]: Request from the Lab QIPT member was this was needed

Commented [TD3]: QIPT didn't think this was needed

Commented [TD4]: No option for Thrive so added

Commented [TD5]: Not sure where this is currently programed to go to.

Commented [TD6]: Should go to Nursing main of 330-489-3322

Commented [TD7]: Should go to EH main of 330-489-3327

Commented [TD8]: Should go to WIC main of 330-489-3326

Commented [TD9]: Should go to APC main of 330-489-3385

Commented [TD10]: May be a better place to direct. This is a new option since didn't have an option previously.

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Next a female voice says "if this is an emergency please hang up and dial 911"

All city numbers are listed in the government pages of the phone book and on the website....

according to Kelli this female voice is not a requirement

Commented [TD11]: Ask IT is this can be eliminated.

WIC Phone Auto Attendant Script

Hello, you have reached the Canton City WIC office in downtown canton 420 Market Ave N.

Monday and Wednesday are walk-in clinic days 8:15-2:30pm. Please bring necessary paperwork, photo ID and your WIC card.

Press #1 If you like to schedule or reschedule an appointment.

Press #2 if you have a question for Breastfeeding staff

Press #3 If you would like to speak to Dietician

Press #4 For all other questions and we will be with you as soon as possible.

Thank you, and have a great day!

800-015-05-F: QI PROJECT ACTION PLAN FORM FOR PHONE ANSWERING AND ROUTING TEAM 9/29/2017

| Action Steps / Tasks | Responsible Person(s) | Target Completion Date |
|--|--|---|
| Update voicemail instructions to remove “dial 0 for operator” statement <ul style="list-style-type: none"> Leave vacation message | TBD | |
| Provide copy of external #'s list (resource list from Connie A) to all clerks | Connie A | 10/6/17 |
| Update internal routing list for people’s responsibilities (start with EH list and update for all divisions) | Connie A update her list for EH; will provide to this group to decide what other info should be added. | 10/6/17 |
| Develop cheat sheet for clerks on “best practices” (leave voicemail, cut off caller providing too much info, how to handle when they insist on talking to live person, giving out our last name, etc); Or update the customer service policy | Jil to draft then send around to group | 10/6/17 |
| Out of Office: Central location for out of office for more than 1 day at a time (for EH staff primarily); Jil wants a printout; this can be in Outlook (but Connie A’s doesn’t work). Will do it by paper. | Connie A and Jil worked this out; Connie A will ask IT to fix the calendars next week; Terri to setup the shared calendar. | 10/6/17 (IT) 10/6/17 (paper system) 10/13/17 (terri) |
| Update main phone line auto-attendant selections <ul style="list-style-type: none"> Acquire a copy of current script to modify Modify script to shorten | <ul style="list-style-type: none"> Terri Group/email | <ul style="list-style-type: none"> 10/6/17 10/13/17 |
| Update phone book so it doesn’t say “public info” (there is a lot of calls received for general info, like when is light up DT, when is farmers market, etc) | TBD | |
| Define policy on providing direct dial phone #'s on letters, emails, website, business cards (and what exceptions there are); add to website contact list for certain divisions. Decide per division | TBD | |
| Setup auto-attendant for WIC to direct certain phone calls to correct place prior to getting to clerks. (develop script) | Ashley | 10/13/17 |
| Update phone button labels on clerk phones (that are outdated); some buttons are not used and need replaced with others | Each clerk to develop list of changes needed to their phones | 10/6/17 |

Canton City Health Department

March 2018 Report (Meeting 04/23/18)

QUALITY IMPROVEMENT

On a quarterly basis, the Quality Improvement Committee provides a written update to the Board of Health as to the progress of QI Plan goals and objectives and completed QI project outcomes per the 2016-2017 QI Plan 800-015-P approved on 06/09/2016.

PROGRESS OF QI PLAN GOALS AND OBJECTIVES:

- *QI Goals with deadlines within 1st quarter 2018 (01/01/2018-03/31/2018) due to extensions:*
 - Develop QIPT PDCA implementation structure for QIPT meetings due 03/31/2018:
 - The developed outline summarizing the structure was used for the QI projects conducted in 2017. Since the QI projects are still underway, the outline is still under evaluation to determine if any revisions are still needed.
 - EH has agreed to build a supplies cart out of recyclable materials from the Recycle Center to minimize costs. EH has not started this work yet. This will likely not be completed until end of 2nd quarter 2018.
 - Goal deadline extended to 06/30/2018.
 - Find free QI Tool training modules for QIPT members by 03/31/2018
 - The training documents available from LeanOhio were revised to fit CCHD needs. These training documents were used during QI projects conducted in 2017. Since the QI projects are still underway, the training documents are still under evaluation to determine if any revisions are still needed.
 - Goal deadline extended to 06/30/2018.
 - Develop and implement Performance Management System (PMS) due 03/31/2018
 - Assigned to the Accreditation Domain 9 Team. Domain 9 and CCHD decided that select strategic plan goals will be used as the performance management (PM) measures. The next step in developing the PM measures is to complete the strategic plan action plan. The DLT members assigned certain strategic goals to draft the action plan before the February meeting. The second planning meeting occurred on 02/07/18 with the one member of Domain 9 Team (Terri), two members of Domain 5 Team (Linda and Laura) and the Division Leadership Team to discuss the draft action plan. There were still some strategic priorities that needed a draft action plan that were assigned to some DLT members to complete by the end of March prior to the April meeting.
 - Goal deadline extended to 06/30/2018.
 - Conduct advanced QI training for QIPT Consultant and any other interested staff by 03/31/2018.
 - Lake County HD hosted LeanOhio Boot Camp training for LHDs in NE Ohio on Jan 30-31 and Feb 6-7, 2018 in which 2 QIC members, Kim Koons and Chrissy Kardos, attended. The NACCHO grant funding was used to pay the travel expenses for this training.



- LeanOhio Boot Camp training for LHDs is scheduled on April 26-27 and May 3-4, 2018. CCHD is planning on sending their remaining 2 interested staff, Rob Knight and Linda Morckel, to attend this training. The NACCHO grant funding will be used to pay the registration and travel expenses for this training.

- Goal deadline extended to 06/30/2018.

➤ **Complete one QI project in an administrative area by 03/31/2018.**

- In January 2017, the QIC selected the Phone Answering and Routing (“phone”) project proposal to be a QI project in an administrative area. After the baseline data was collected 09/15/17-09/22/17, the Phone QI project team conducted another meeting on 09/29/17 in which the improvement strategies and plan were developed. The team and responsible persons have been working toward implementing the improvements. As of 03/31/2018, the majority of the improvements have been implemented but updating the main phone line auto-attendant and the website with direct dial extension contact information still needs completed. After they are completed, the improvement data needs to be collected and analyzed before the project is deemed complete.

- Goal deadline extended to 06/30/2018.

➤ Complete one QI project in a program area by 03/31/2018.

- In January 2017, the QIC selected the Improving Immunization Clinic project proposal to be a QI project in a process area. The Immunization Clinic QI project team conducted seven (7) meetings during October and November 2017. Baseline data forms were developed and data was collected in November. The improvement strategies and plan were drafted and presented to the process owner, Diane Thompson on 12/07/17. Diane made the final improvement selections in December 2017 and began implementing the improvements. Some improvements were implemented in January 2018, but the additional data collection event to determine other improvements is delayed due to staff turnover. After they are all completed, the improvement data needs to be collected and analyzed before the project is deemed complete.

- Goal deadline extended to 06/30/2018.

➤ Collect CCHD & social media website views progress data due 03/31/2018:

- Gathered internal CCHD and social media website views data to show progress of views on 12/27/2017. IT provided external CCHD views data on 01/19/2018. The data was compiled and analyzed in January 2018 completing the goal. Below is a summary of the pertinent data to show that the views have increased so this communication method is being used.

| | Baseline Data (Feb 2017) | Progress Data (Dec 2017) | % Change |
|------------------------------|-------------------------------------|-------------------------------------|-----------------|
| CCHD QI main page hits | 1088 | 4083 | 275% |
| CCHD QI Project #1 page hits | 22 | 453 | 1959% |
| CCHD QI Project #2 page hits | 3 | 401 | 13267% |
| CCHD Facebook page likes | 1378 | 1878 | 36% |
| CCHD Twitter followers | 33 | 44 | 33% |

COMPLETED QI PROJECTS:

No QI Projects were completed during the 1st quarter 2018. As specified above, the goal is to have two QI projects completed by 03/31/2018, and progress has been made toward completion, but the projects need more time prior to completion, so the goal deadline has been extended until 06/30/2018.

QI PLAN EXPIRATION ACTIVITIES:

Due to the 2016-2017 QI Plan expiring on 12/31/2017, several plan expiration activities are due to be completed by the QIC. The following summarizes those activities.

- Evaluate QIC operations effectiveness and implement any necessary revisions:
 - The QIC evaluated and discussed the QIC operations effectiveness during their 02/21/2018 meeting. It was determined the QIC operations is effective as it. The group also decided to change the monthly meeting frequency requirement to only 10 out of the 12 months a year to provide flexibility. The QIC Team Charter was updated on 04/04/2018 to reflect the meeting change. Activity completed.
- Evaluate the in-progress QI Projects using the assessment checklist
 - The QIC members worked on the QI project assessment and discussed their conclusions during the 02/21/2018 meeting. The assessment were completed during the 02/21/2018 meeting. Since this was the first time the QIC used the checklist, the QIC identified several inconsistencies that need corrected on the assessment form and on the other QI project documentation forms which will be revised as part of the 2018-2019 QI Plan. Activity completed.
- Assess the 2016-2017 QI Plan Goals and Objectives completion
 - The QIC regularly assesses the goals and objectives completeness, but for the plan expiration, the QIC Chairperson prepared a summary of all the goals and their status. The QIC plans to review and discuss this during their April 2018 meeting. Activity continued.
- Compile QI Projects lessons learned
 - The 2 QIC members who participated on the 2 QIPT documented their lessons learned. These will be discussed during the April 2018 QIC meeting. Activity continued.
- Evaluate the 2016-2017 QI Plan effectiveness against the effectiveness targets
 - The QIC Chairperson prepared a summary of activities related to the effectiveness. The QIC plans to review and discuss this during their April 2018 meeting. Activity continued.
 - Once completed, provide a written update to the Board as to the effectiveness of the QI Plan.
- Develop the 2018-2019 QI Plan
 - The QIC members are reviewing the 2016-2017 QI Plan to determine what revisions are needed and establishing new goals and objectives to accomplish in the 2018-2019 years to further develop a culture of QI at CCHD. This process involves using the information generated from the above activities, which are still in progress. The QIC hopes to have a draft of the 2018-2019 QI Plan ready for DLT review and approval no later than May 2018. Activity continued.