

COUNTY OF SAN DIEGO  
HEALTH & HUMAN SERVICES AGENCY  
PUBLIC HEALTH SERVICES

**Chapter: PERFORMANCE MANAGEMENT & QUALITY IMPROVEMENT SYSTEM**  
**Key Words: Performance Management, Performance Measurement, Metrics,  
Quality Improvement**

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**SUBJECT:** PERFORMANCE MANAGEMENT  
& QUALITY IMPROVEMENT POLICY

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**REFERENCE(S):** General Management System (GMS)  
of County of San Diego; Board Policy A-119, *Outcome Based Measures*  
for Health and Social Services Contracts; *Live Well San Diego*;  
County Operational Plan; Public Health Services Strategic Plan;  
Performance and Quality Improvement Plan; and Departmental Excellence Goals.

**SUPERSEDES:** N/A

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## I. PURPOSE

This policy outlines the components of the performance management and quality improvement system for Public Health Services Division (PHS) in the San Diego County Health and Human Services Agency (HHSA). The system was created to advance a performance culture for PHS leadership and staff in all PHS Branches and to achieve meaningful and measurable results and quality improvement. Overall guidance for performance management and quality improvement activities is provided by the Performance Improvement Management Committee (PIM Committee) with representation from all Branches.

## II. BACKGROUND

### A. Overview

The County of San Diego has a long history of being an accountable, results-oriented public agency. As early as 1993, the County Board of Supervisors adopted [Board Policy A-119](#) which established that all health and human services contracts would include outcome-based measures. The HHSA, also referred to as the Agency, as a super agency, was created in 1998 by merging six different health and social services agencies. The Agency adopted a uniform planning process that included performance metrics in 2003. This planning process detailed how all plans and performance measures must align with the County Strategic and Operational Plans.

Beginning in 2010, the County adopted the *Live Well San Diego* vision. This Initiative includes three components — Building Better Health, adopted in 2010; Living Safely, adopted in 2012; and Thriving, adopted in 2014. In 2015, the entire County enterprise has now aligned its overall Strategic Plan to the *Live Well San Diego* vision.

PHS plays an integral part in the *Live Well San Diego* plan, with its many programs and activities supporting success across all three components. Through the PIM Committee, PHS supports an

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effective planning process and the identification of meaningful performance measures that best capture the contributions of its Branches toward the priorities of PHS and also align and advance County and Agency priorities as reflected in the *Live Well San Diego* vision and plan.

This performance management and quality improvement system is important to create a high performing organization that always works toward quality improvement in all operations. In 2005, PHS leadership created the Performance Management Committee. The Committee name was recently changed; it is now known as the Performance Improvement Management Committee or PIM Committee). A performance management and quality improvement system is also essential to an accredited public health organization and represents best practice in public health practice and management. When performance issues are identified, quality improvement methods can be applied to identify the root causes of the problems in order to design new approaches and realize greater efficiencies and better outcomes.

This policy covers all of the components of a performance management and quality improvement system, which PHS has adopted and will maintain. There are seven components to this system and they include: 1) the General Management System, providing a general framework for good management practice; 2) Accreditation Efforts, referring to efforts to achieve and sustain national public health accreditation status; 3) the PIM Committee, which coordinates these activities across all the PHS Branches; 4) Quality Improvement Efforts, referring to ongoing activities and processes in place to address performance and quality improvement priorities; 5) Performance Management Application, referring to the information technology tool used to maintain measures and strengthen accountability; 6) Training and Education, which are the efforts to build and empower the workforce in these dimensions; 7) Quality Assurance, which is to ensure that the system itself is meeting the needs of the Public Health Officer (PHO) and other Agency and County executive management.

## **B. Definitions**

<u>Accreditation:</u>	This refers to the measurement of health department performance against a set of nationally recognized, practice-focused and evidence-based standards. The goal of the national accreditation program is to improve and protect the health of the public by advancing the quality and performance of tribal, state, local and territorial public health departments. Agencies undertake a rigorous, seven-step process to become accredited, including
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	demonstrating excellence across 12 domains and 100 individual standards. The accreditation process is administered by the Public Health Accreditation Board (PHAB).
<u>General Management System (GMS):</u>	This is the County business model for all operations. It has 5 components—Strategic Planning, Operational Planning, Monitoring & Control, Functional Threading and Motivation, Rewards & Recognition. Performance management is a key part of the GMS and is associated with “Monitoring & Control” since measures are crucial in determining whether the County is on track to meet its priority goals.
<u>Measure Owners, Maintainers and Super Users:</u>	These refer to different roles managers and staff play in maintaining and using the PHS performance management application, which is currently Insight Vision. See “Performance Management Application” section of this policy for a more detailed explanation of these roles.
<u>Performance Management:</u>	This refers to the practice of actively using performance data to improve the public’s health. This involves the strategic use of performance standards, measures, progress reports and ongoing quality improvement efforts to ensure PHS achieves desired results.
<u>Performance Improvement Management (PIM) Committee:</u>	Formed in 2005, the roles of the PIM Committee (formerly called the Performance Management Committee or PMC), are to identify, develop, and track key performance metrics and to proactively assess quality improvement needs and priorities based on performance data. The PIM Committee, as designated by the PHO, also ensures that PHS measures align with the PHS Strategic Plan, the strategic priorities of the County of San Diego, and the <i>Live Well San Diego</i> strategic vision, which captures the collective effort and impact of County government and community partners, as well as the <i>Live Well San Diego</i> Community Health Improvement Plan (CHIP).
<u>Quality Improvement:</u>	This refers to a systematic approach to reduce or eliminate waste, rework or losses in producing services or products. Within public health, quality improvement is focused on

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	activities that are responsive to community needs and improving population health. This involves a continuous, ongoing effort to achieve measurable improvements in the quality of services in order to achieve equity and improve the health of the community.
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**C. Codes and Regulations or other Pertinent Documents**

1. **Mandates** – Many programs mandated by federal and state government require that local governments meet performance goals and targets.
2. **[County Board Policy](#)** – Furthermore, the County Board of Supervisors adopted an outcomes-based approach two decades ago with **[Board Policy A-119](#)** requiring performance measures in all Agency contracts, which is how many PHS services are delivered.
3. **[County Business Model](#)** – In addition to these mandates, performance management is an integral part of the “Monitoring & Control” component of the General Management System, and there is an expectation that all County programs and activities include performance measures.

**III. SCOPE**

This policy is intended for all PHS staff so that they have an understanding of the performance management process and its alignment with organizational priorities; identification of quality improvement opportunities; the connection of these activities with achieving and maintaining status as an accredited public health agency; and advancing PHS, HHSA and County strategic priorities and operational excellence.

**IV. POLICY**

PHS shall maintain a comprehensive performance management system, which also integrates quality improvement practices and projects that align with the County’s vision and mission.

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## **V. PROCEDURES**

### **A. Components of the PHS Performance Management and Quality Improvement System**

#### **1. General Management System**

- a. *Function:* The GMS serves as the basic business or management model to which PHS adheres, along with the rest of the County enterprise. By following the Strategic and Operational Planning components, PHS ensures that its goals, objectives and measures are in alignment with the *Live Well San Diego* vision, and County, Agency and PHS priorities.
- b. *Roles and Responsibilities:*
  - 1) The PHO and Branch Chiefs are responsible for identifying the key goals, objectives and performance measures; ensuring alignment with the *Live Well San Diego* vision and County, HHSA and PHS priorities; and ensuring progress toward goals and objectives is monitored with performance data.
  - 2) The Performance Improvement Manager (PIM) and team within the Public Health-Administration Office support planning and performance management activities across all Branches.
  - 3) The PIM Committee is the point of coordination for many GMS-related activities, in particular activities that fall under the "Monitoring & Control" component of the GMS. Each year, the PIM Committee is asked to revisit PHS objectives and associated measures to remove, revise or add new objectives and measures to the County Operational Plan; unclassified or executive management goals; and Departmental Excellence Goals. The PIM Committee is also responsible for developing and refreshing the PHS Strategic Plan which includes goals, objectives and measures for individual Branches.
  - 4) Staff participate in exercises to identify key goals, objectives and measures each year as convened by their Branch Chief and/or the PHO supported by the PIM.

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## **2. Accreditation Efforts**

- a. *Function:* PHS is seeking national public health accreditation as a way to demonstrate achievement of a set of nationally recognized, practice-focused and evidence-based standards. In 2009, PHS was selected to participate in the beta test conducted by the Public Health Accreditation Board to develop these standards. PHS is currently seeking to achieve national accreditation status, which involves the full integration of strategic planning, performance management system and quality improvement systems and processes, and sustain these national recognized practices into the future.
- b. *Roles & Responsibilities:*
  - 1) An Accreditation Committee, comprised of 12 subcommittees was formed in 2014 to work with the PIM to advise and assist in preparations to demonstrate compliance with national public health accreditation standards. This Committee will also support the maintenance of accreditation practices once PHS becomes accredited. Each subcommittee is comprised of staff across all PHS Branches, with special expertise in each of the individual Domains, some of whom also serve on the PIM Committee.
  - 2) The PIM, who serves as the Accreditation Coordinator, and other staff within the PHS-Administration Office, works closely with the Accreditation Committee to complete the seven-step process to become accredited.
  - 3) The PHO and Branch Chiefs are ultimately responsible for achieving Accreditation and ensuring that systems and practices are in place to achieve and maintain Accreditation status.

## **3. PHS Performance Improvement Management Committee (PIM Committee)**

- a. *Function:* The PIM Committee coordinates performance management, quality improvement and accreditation activities across PHS and in alignment with County and Agency priorities.
- b. *Composition and Meetings:*
  - 1) The PIM Committee is comprised of representation from all PHS branches.
  - 2) This Committee meets monthly.
  - 3) The operations of the committee are outlined in the PIM Committee Charter.

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*c. Activities of the PIM Committee fall under six priority areas:*

- 1) Align PHS to County priorities by developing measures and monitoring progress on key goals and objectives for PHS that align with the *Live Well San Diego* vision and County and Agency goals. This includes developing PHS objectives and measures for inclusion in the County Operational Plan and Departmental Excellence Goals.
- 2) Conduct Branch strategic planning, which refers to developing and refreshing the PHS Strategic Plan that includes goals, objectives and measures by individual Branches.
- 3) Maintain and report performance data by overseeing the use of the performance management application and ensuring processes are in place for accurate and timely (at least quarterly) reporting to Branch Chiefs, the PHO and other Agency and County leadership.
- 4) Coordinate quality improvement activities for PHS, which includes the conduct of at least one quality improvement (QI) project per Branch per year that follows accepted methodologies and schedule for completing and reporting out results for these QI projects. Representatives to the PIM Committee also play a role in monitoring implementation of QI recommendations to determine whether or not results were achieved.
- 5) Build staff capacity in performance management and QI by seeking out training opportunities and other ways in which staff can be mentored and developed in these skill sets. This includes supporting and participating in the QI Knowledge Hour.
- 6) Advance and support Accreditation efforts of PHS—both the pursuit of Accreditation as well as the maintenance of Accreditation status, or re-accreditation.

*d. Roles and Responsibilities of Key Staff:*

- 1) Performance Improvement Manager (PIM): The PIM coordinates the monthly PIM Committee meetings and is responsible for coordinating the key activities of the PIM Committee. The PIM is also assisted by staff within PHS Administration.
- 2) Branch Chief and Program Managers: Responsible for the performance of activities and programs and for initiating and overseeing quality improvement activities to

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address priority performance concerns. Branch Chiefs are directly accountable to the PHO and in turn County executive leadership. The Branch Chiefs are also represented on the PIM Committee — either directly or indirectly.

**4. Quality Improvement (QI) Efforts**

- a. *Function:* Increasingly, a QI program within an organization is viewed as integral to future success. For both public and private organizations, quality improvement techniques help organizations find the best path to meeting the needs of customers and achieving results while containing costs through more efficient practices.
- b. *Practice:* Each Branch/Program shall conduct at least one QI project each fiscal year. The QI project shall address a significant performance problem that aligns with County, Agency and PHS priorities.
- c. *QI Project Leads and their teams produce several key deliverables each year:*
  - 1) Team Charter that is shared with the PIM Committee during the 1<sup>st</sup> Quarter of the year;
  - 2) Presentation of the QI project to the PIM Committee during the course of the year;
  - 3) Final project report or storyboard which is shared with the PIM Committee at end of the fiscal year, and subsequently with the PHO within the 1<sup>st</sup> Quarter of the following year.
- d. *Staff QI Roles and Responsibilities:*
  - 1) QI Project Leads are key staff assigned by Branch Chiefs to lead the annual QI project for the respective Branches. The QI Project Lead may be the Branch representative to the PIM Committee or another individual within the Branch who has skills in leading a team, project management and continuous improvement approaches. The QI Project Lead coordinates the project, helps to ensure that the team successfully completes several key deliverables, and follows up to see that recommendations are implemented and results monitored.
  - 2) The Branch Chief serves as the QI Project Sponsor and is responsible for making sure that the QI Project launched is addressing a problem for which there is a clear need and aligns with PHS, Agency, and County priorities. It is the expectation of the PHO that the Branch Chiefs also provide leadership in the implementation of QI Project recommendations to achieve operational improvements.



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## **5. Performance Management Application**

- a. *Function:* PHS has utilized applications to help facilitate the capture, maintenance and reporting of performance data. The method by which data are tracked has varied over the years and will continue to evolve as new technology and applications become available. InsightVision is an application, procured in 2014, that is designed to capture performance data for collective impact initiatives like *Live Well San Diego* in which multiple partners inside and outside the County are contributing toward the results.
- b. *Practice:* Performance data for key measures and associated objectives will be collected at least quarterly by PHS, consistent with County and HHSA practice and the GMS. Objectives and measures will be captured in the application in the form of Scorecards and Strategy Maps—representing two different ways to display objectives and measures in order to communicate progress and strengthen accountability.
- c. *Roles and Responsibilities of Measure Owners, Super Users and Measure Maintainers:*
  - 1) Each Branch will identify Measure Owners, Measure Maintainers and Super Users to help maintain objectives and measures within the application.
  - 2) Measure Owners are executives, program managers, or program leads that are accountable for and/or play a role in the execution of the activity or objective being measured. Measure Owners are responsible for ensuring that the performance data accurately represents what is happening in the program, reviewing performance results for accuracy and entering comments regarding results into the system.
  - 3) Measure Maintainers are responsible for entering data into the system at least quarterly in order to keep performance results up-to-date.
  - 4) Super Users are staff who have had additional training and are available to assist individuals in their Branch in the use of the application.

## **6. Training and Education**

- a. *Function:* PHS is committed to expanding staff capacity in performance management and quality improvement. PHS actively seeks this type of training for its staff and has also developed its own internal training to complement training provided through HHSA's The Knowledge Center and the County's Department of Human Resources.

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- b. *Practice:* Examples of internal training offered by PHS for performance management and quality improvement include:
- 1) QI Knowledge Hour: Offered to PHS staff twice monthly, this training is hosted by the PIM and staff within the PHS Administration Office. Presentations are given on QI topics and methods to educate staff and to support QI Project Teams. The QI Knowledge Hour also provides a platform for discussion about progress of QI Projects.
  - 2) Lean Six Sigma and PDSA Training: PHS staff have participated in Lean Six Sigma Training offered by HHSA's The Knowledge Center, as well as training in other methodologies such as the Plan-Do-Study-Act Method, and shall continue to seek out opportunities in related continuous process improvement training.
  - 3) Performance Management: Classes have been, and will continue to be, offered to develop staff skills in formulating objectives and measures that align with strategic priorities. Also, training in the performance management application (InsightVision) is offered to designated Measure Owners, Measure Maintainers and Super Users.
  - 4) Additional Training: No- or low-cost training for staff to build capacity, including webinars, resource sites and discussion groups, shall be identified. Expanding quality improvement training opportunities is a priority goal in the PHS Workforce Development Plan.
- c. *Roles & Responsibilities:*
- 1) PIM: Coordinates and hosts The QI Knowledge Hour, assisted by staff within PHS-Administration. The PIM is also responsible for identifying and coordinating other training opportunities.
  - 2) PIM Committee: Will identify the no- or low-cost training opportunities and provide the PIM with advice regarding training needs and opportunities.
  - 3) Branch Chief and Program Managers: Responsible for elevating training needs in order to strengthen staff capacity to successfully undertake QI projects.

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**7. Quality Assurance**

- a. *Function:* Quality Assurance serves to build quality into the PHS approach and ensure that standards and best practices in performance management and QI are adhered to.
- b. *Practice:* The functioning of the performance management and QI system will be assessed on an annual basis. This includes:
  - 1) Assessing whether or not performance data are easily available, through the performance management application and utilized effectively;
  - 2) Determining the success in the implementation of recommendations from QI Projects; and
  - 3) Conducting surveys, to gauge the effectiveness of the system, to meet the needs of PHS leadership and staff.
- c. *Roles & Responsibilities:*
  - 1) PIM: Will ensure that a quality assurance process is undertaken each year that meets the needs of the PHO, and shall assist in the coordination of the effort, enlisting technical assistance as needed.
  - 2) PIM Committee: Will identify the priority concerns to be incorporated in the quality assurance assessment and help to ensure that recommendations are acted upon.
  - 3) PHO and Branch Chiefs: Ultimately responsible for the success of the performance management and QI system and thereby will ensure that any recommendations from the quality assurance efforts are implemented.

**VI. QUESTIONS / INFORMATION**

**Health Services Project Manager, Public Health Services : (619) 542-4183**

**VII. ATTACHMENTS**

- A. **Appendix #1:** [Performance Management Charter Org Chart and Membership](#)
- B. **Appendix #2:** [Performance Management and Quality Improvement Year Round Schedule](#)

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**VIII. SUNSET DATE**

Pursuant to the HHSA/PHS Clinical Quality Management (CQM) ([Policy and Procedure Document Renewal Policy](#) : HHSA-PHS-CQM-004) this policy shall be reviewed every three years. As such, this Quality Management Policy and Procedure Manual will be reviewed for continuance by **June 30, 2018**.

**IX. APPROVED**

Approved by: Sayone Thihalolipavan (Deputy Public Health Officer), Wilma Wooten (M.D., M.P.H.; Public Health Officer, Director of Public Health Services) 06/24/2015