

Welcome

Good afternoon! The all-staff meeting will start in a few minutes.

Please be sure to submit your questions in the Q&A feature or email them to publicaffairs@health.in.gov. We will reserve time at the end of the presentation.

Have ideas for future topics? Please send them to Erin McCreadie (emccreadie@health.in.gov).

Vaccination Clinic Returns

Flood recovery
resources



Pulse survey
closes Friday



Tuesday, Oct. 13, 8 a.m.- 3 p.m.
2N, Adams Auditorium

Use enrollment code IN97832
and select "CST State of Indiana-
IDOH 2N 10/13/26."



Pulse survey closes Friday

Vaccination Clinic



Flood recovery resources



The annual Pulse Survey closes Aug. 21. The survey feedback plays an important role in helping to understand employee needs and guide workforce priorities across State government.



Scan to take the survey

Flood recovery resources

Pulse survey closes Friday



Vaccination Clinic



Need information on helpful resources following the recent floods? The State of Indiana has created a new website full of information from all state agencies.



Scan to visit the website



Indiana
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ALL-STAFF MEETING

DR. LINDSAY WEAVER, STATE HEALTH COMMISSIONER

REBECCA BRELAGE, ETHICS OFFICER

ELDON WHETSTONE, DIRECTOR, HEALTH AND HUMAN SERVICES

BRIAN BUSCHING, DIVISION DIRECTOR, TRAUMA AND INJURY PREVENTION

MATT STUCKY, DATA GOVERNANCE ANALYST

BOB DAVIS, CHIEF PUBLIC HEALTH INTELLIGENCE OFFICER AND TRANSFORMATION OFFICER

KILEY HUNTINGTON, ASSISTANT DIRECTOR, EMERGENCY PREPAREDNESS

KELLY WHITE, DIRECTOR, EPIDEMIOLOGY

BROOKE MULLEN, DIRECTOR, OFFICE OF PERFORMANCE EXCELLENCE

SHARON PATTEE, FOOD SCIENTIST

BARBIE MARTIN, PROGRAM DIRECTOR

AUG. 19, 2026

Agenda

- Opening Remarks
- Agency Updates and Reminders
- Staff Accomplishments
- Rural Health Transformation Program
- Data Requests Overview
- Agency Pillar: Customers & Service
- Epi Update
- OPE Update
- The More You Know
- Staff Spotlight
- Q&A





Agency Updates



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RHTP CMS Site Visit

- Thank you for everyone's engagement and participation
- Great site visits to rural counties—Knox (8) and Orange (7)
- Positive feedback from CMS; impressed with Indiana's progress so far
- For BP2 and beyond: alignment with Initiative 12 and initiatives 1-11
- Implementation of what we've learned from feasibility studies
- “Failing fast” and leaning into what works



Staff Accomplishments

- Sally Petty's work leading the No Barriers Just Better Health project focused on improving access for persons with disabilities is a featured case study of the American Public Health Association
- Erika Chapman completed her Clinical Medical Assistant Certificate from IU Northwest and earned her Certified Clinical Medical Assistant Certification
- Lydia Porte, EHE Program Coordinator with Division of HIV/STI/Viral Hepatitis achieved her CPH this month
- Some highlights across the Finance team:
 - Chris Lucas and team have been hard at work getting the biennium change packets in place.
 - Louis Hurre and Alex Stultz expedited a tricky contract process and amendment for a critical behavioral risk factors data collection survey.
 - Jay Brinkmoeller, Louis, and team have been a critical part of RHTP and getting a very large number contracts out the door on a compressed timeline.

Staff Accomplishments

- Shay Bex completed Motivational Interviewing Foundations through the Centre for Collaboration, Motivation, and Innovation (CCMI)
- Maddie Heller completed the credentialing process to become a Heart Healthy Ambassador
- The Early Intervention team at CDHHE is fully staffed
- Job well done to the Public Health Genetics Autism and Developmental Disabilities Monitoring Network team (Azza Hagel-Agib, Antonia Smith, Lisa West, Julie Giacalone, and Rohan Mehta) for finalizing surveillance year 2024 data collection and file submission early

Staff Accomplishments

- A huge thank-you to the incredible subject-matter experts from HR, Finance, OTC, Admin Services, Trauma and Injury Prevention, Tobacco Prevention and Cessation, Administrative Assistants and OPE who partnered on the Begin Well, End Well onboarding/offboarding project
- And finally, celebrating our *Mail Avengers - Right Place, First Time* project team. This team includes subject matter experts from Admin Services, Legal, AA's, building liaisons, Fatality Review, Trauma and Injury Prevention, Vital Records, Maternal and Child Health, and Immunizations

Welcome New Team Members and Congrats

Please congratulate the following promoted team members:

- Marlena Key, financial analyst, Office of Finance
- Grace Franklin, IT project manager associate, Office of Data and Analytics
- Jason Carter, chemist, Chemistry
- Shelbi Cummings, Rural Health Director
- Jess Pinyerd, Regional Grant Manager

Please welcome the following new staff members and transfers:

- Michael Tudor, program director, Office of Performance Excellence
- Chelsea Carlisle, public health administrator, Office of Chronic Disease, Primary Care and Rural Health
- David Wozniak, chemist, Laboratories
- Benjamin Grimes, microbiologist, Virology and Bio-Preparedness
- Rebecca Chauhan, grant coordinator, Office of Grants Management
- Savannah Straub, program coordinator, Vital Records
- Shannon Wheeler, education consultant, CDHHE
- Claire Decker, education consultant, CDHHE
- Kimberly Kissoon, Microbiologist, Environmental Microbiology
- Faith Oldham, accountant, Office of Finance
- Ruth Hodson, laboratory technician, Clinical Microbiology
- Deloris Burkes, clerical assistant, CSHCS
- Taylor Golden, administrative assistant, Long-Term Care
- Julie Chobany, education consultant, CDHHE
- Oluwawemimo Dage, public health nurse surveyor, Long-Term Care
- Amanda Payne, public health nurse surveyor, Acute and Continuing Care
- Matthew Taylor, chemist, Chemistry

Shield Spotlight

Scan to
nominate:



Courtney Schaber
HIV/STI/Viral Hepatitis
Team Player Award

"Courtney deserves this award for her unwavering availability, her constant support of her team, and her steady presence as a true staple in the DIS world."

Whether stepping in to assist during challenging moments, offering guidance to colleagues, or ensuring that work moves forward seamlessly, she consistently demonstrates exceptional dedication. Her reliability, leadership, and commitment not only strengthen her team but also elevate the quality of the program."



LaShonna Thompson
WIC
Team Player Award

"LaShonna has consistently demonstrated what it means to be a team player. Although metabolic formula fulfillment for newborn screening falls outside her division's responsibilities, she has taken on this responsibility with exceptional reliability, communication, and care."

LaShonna's dedication, professionalism, and willingness to step in when the newborn screening program needed help makes her an invaluable team player to the agency!"

Rebecca Brelage – New Ethics Officer

- Senior Counsel in Office of Legal Affairs and Ethics Officer - 9.5 years at IDOH
- 3.5 years in civil litigation at the Indiana Office of the Attorney General
- 6 years with the Department of Child Services
- 10 years in practicing family law in Pennsylvania
- Former clerk for the Pennsylvania Court of Appeals
- 3 adult sons and 1 grandson plus 2 adult step-daughters and 2 step grandkids
- Reside in Irvington with my husband, my dog Vinny and my cat P.K.
- Participate in community theater with 4th Wall Players in Irvington





Bike Across Iowa (RAGBRAI)
6 days and 350 miles



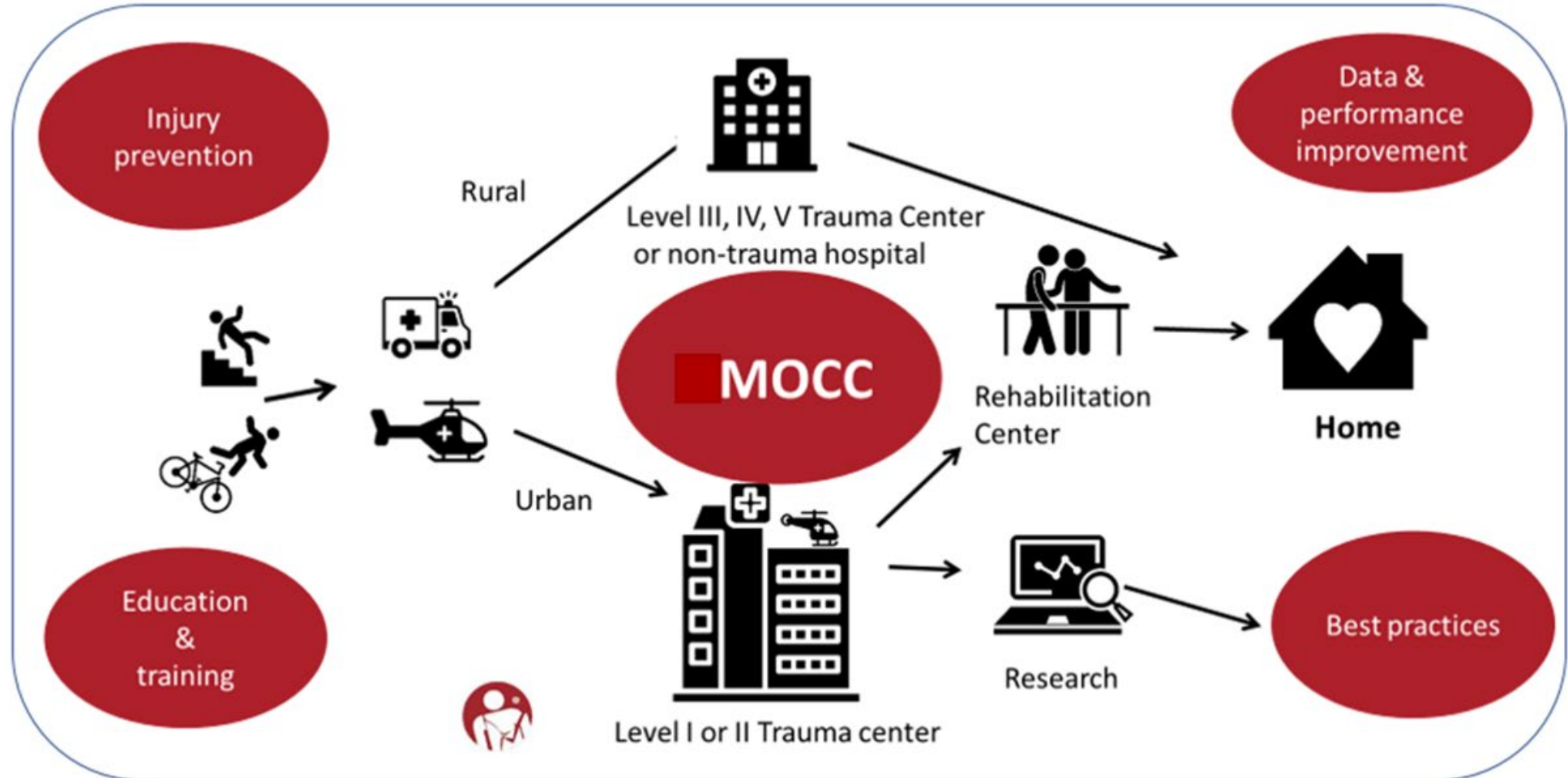
Rural Health Transformation



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Initiative 1: Growing Care Coordination Medical Operations Coordination Center (MOCC)

Daily MOCC Use for Coordination of Emergency Care



Initiative 1: Growing Care Coordination Medical Operations Coordination Center (MOCC)

Year 1 – to date:

- Executive Steering Committee – presentations from OR and STRAC, planning presentation from AL and AZ
- MOCC RFP – includes Service and System components, establishes an advisory committee to guide implementation
 - BlackBox Healthcare Solutions - Service
 - Juvare – System, Capacity
 - Pulsara – System, Patient Movement
- MOCC Program Manager

Next Steps:

- Hiring and onboarding operational staff and establishing Advisory Committee
- Planning for 1) implementation of Healthcare Emergency and Hospital Capacity System and 2) pilot programs, including identification of pilot areas
- Operationalize and begin utilization of Healthcare Emergency and Hospital Capacity System for facility status and patient tracking
- Implementation of MOCC utilization within pilot areas (TBD) for interfacility transfers (7/31/2027)

Future Activities

- Implementation of MOCC utilization within pilot areas (TBD) for behavioral health triage
- All Hospitals/EMS submitting data to the Healthcare Emergency and Hospital Capacity System



Data Requests



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IDOH Centralized Data Request

What

- Centralized REDCap intake plus a standardized review, approval, and documentation process.
- A single, mandatory workflow for all dataset requests.

Who

- All IDOH programs, ODA, OLA, Finance, and any external partners requesting agency-held datasets (excluding Subpoena, APRA and Media).
- Program Directors and their designees who review, approve, and coordinate fulfillment.

Why

- To ensure consistency, compliance, and transparency in how IDOH releases data.
- To eliminate informal request pathways (email, Teams, calls) that create risk and inconsistent documentation.
- To improve turnaround times, data quality, and leadership's ability to monitor system-wide activity.
- To support secure data handling and proper routing to Legal/Finance when needed.

IDOH Centralized Data Request

When

- Full mandatory use expected to go live in the final quarter of the year pending E-Suite approval.
- All programs must begin redirecting requestors at the go-live date
- Emergency requests from Executive leadership or Legislative session remain the only caveat.

Where

- Requests must enter through the Centralized REDCap form (IDOH form; LHDs have their own).
- All documentation, approvals, agreements, and data transfer dates must be recorded in the internal REDCap response form.
- OPA will create a new link on the IDOH website and change all existing links in program websites to the new one. Please contact IDOHData@health.in.gov with these links if you have not already done so.

Questions?

- Contact IDOHData@health.in.gov



Agency Pillars



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Customers & Service



Division of
**Emergency
Preparedness**

Division of Emergency Preparedness Customer Service Survey

- Launched in June 2026
- Intent is to measure the quality of information and interactions shared with both internal and external partners.
- Collecting feedback from our professional engagements as subject matter experts within the public health preparedness and response realm should result in improved content, stronger relationships, and trusted partners.

Customers & Service

Month 1- 30 responses
Month 2- 18 responses

Survey collects feedback for sections within the division and the option for individual staff by name.

Survey link is on each signature line.



Responses Overview

Active

Responses

48



Average Time

02:24



Duration

89 Days



1. Today's Date

[More details](#)

48

Responses

Latest Responses

"2026-08-06"

"2026-08-05"

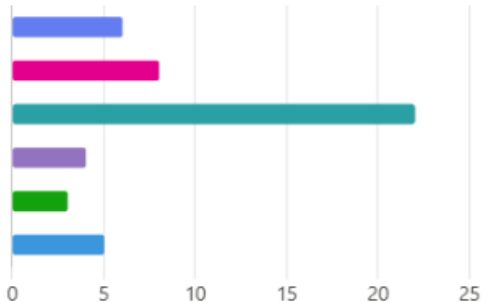
"2026-08-05"

...

2. Which Preparedness section did you work with?

[More details](#)

- Planning & Response (Planning, Training & Exercise) 6
- Safety, Resource & Logistics (Includes Admin Services) 8
- District & Local Readiness 22
- Mobile Response Operations 4
- I don't know 3
- Other 5



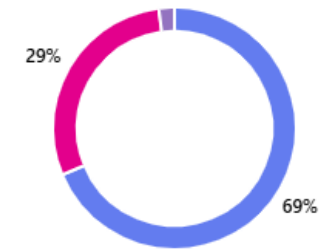
Customers & Service

- Overall customer service performance
- Description of staff interaction
 - Professional
 - Clear and cooperative
 - Knowledge and competency
 - Response to questions or concerns
 - Quality of content, resource or service provided
- Additional comments, questions or improvement suggestions

9. Overall, were you satisfied with the customer service performance?

[More details](#)

Very satisfied	33
Satisfied	14
Dissatisfied	0
Very dissatisfied	1



10. Please describe the interaction you had with staff.

[More details](#)

Very Satisfied Satisfied Dissatisfied Very Dissatisfied

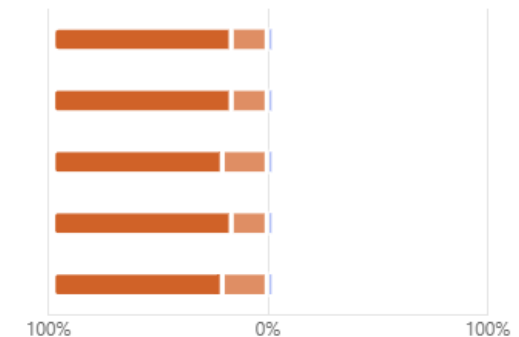
Professional

Clear and cooperative

Knowledge & competency level

Responsive to questions or concerns

Quality of content, resource or service provided



Customers & Service

- SOP was created to establish the process and cadence for reviewing content, sharing with staff, implementing improvement recommendations and tracking
- Recommend a recognition process for outstanding reviews, and filtering names from other staff when sharing feedback



Epi Update



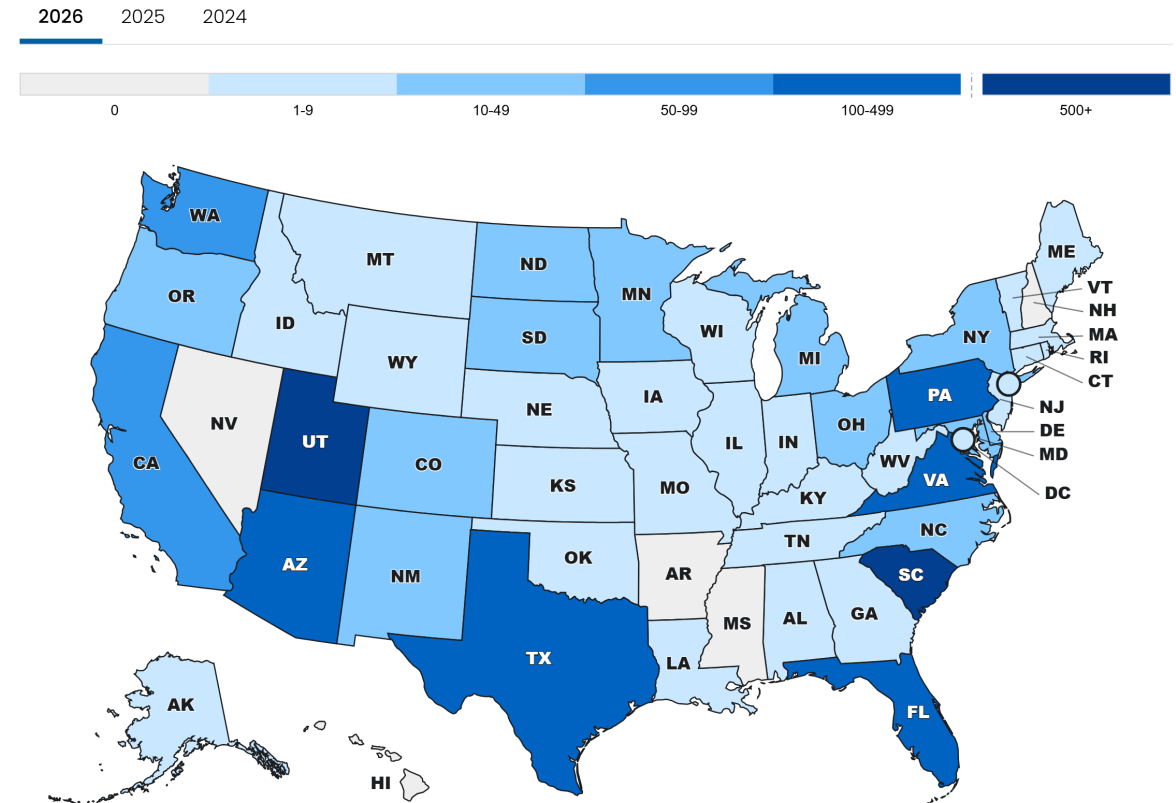
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National Measles Trends

- As of Aug. 13 there have been 2,566 confirmed cases of measles in the U.S.
- 94% of cases are associated with an outbreak
- Majority of cases are unvaccinated individuals
- Other Midwest states are experiencing similar outbreaks

Map of measles cases among U.S. residents

as of August 13, 2026



Measles in Indiana

- Indiana has reported two confirmed cases of measles as of Aug. 17
- Both patients are Parke County residents and neither created exposures in Indiana while infectious
- IDEPD VPD Team is handling increased measles assessments
- Stay up to date with the IDOH measles webpage

Indiana Measles Resources and Information

As of Aug. 4, there are two known measles cases in Indiana this year.

2026 Measles Cases by County of Residence

County	Cases
Parke	2

Data are provisional and subject to change.

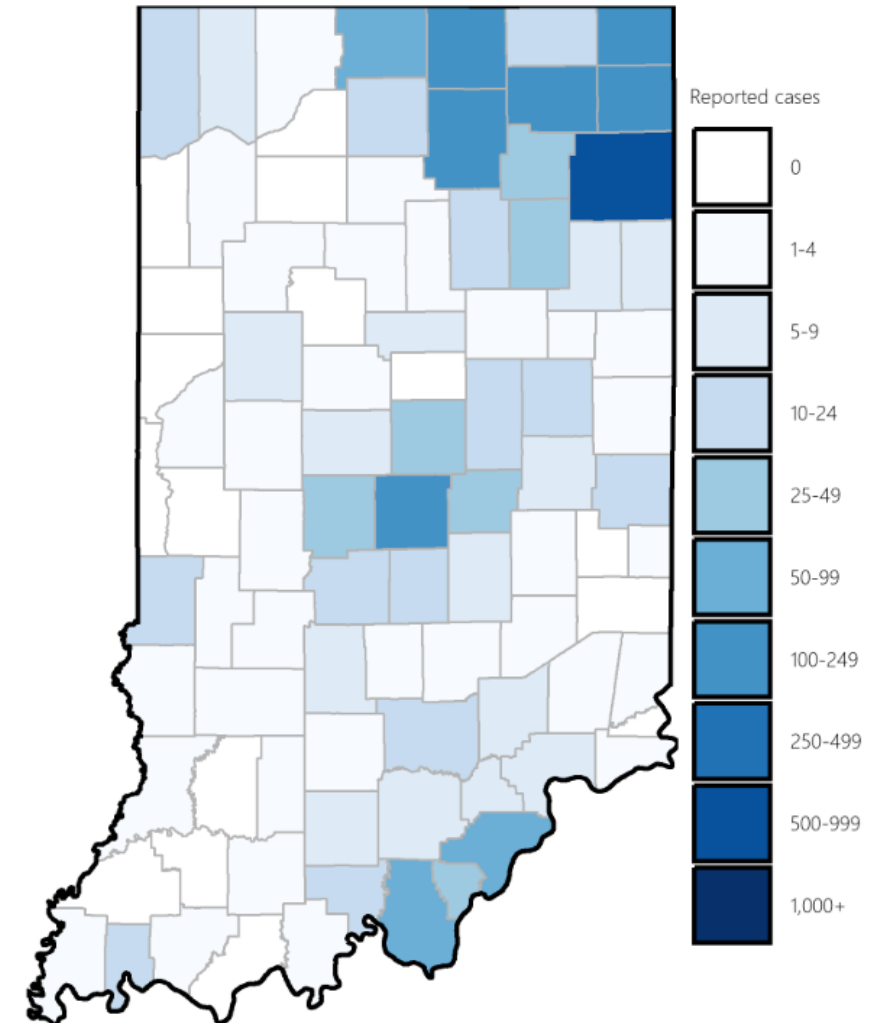
Cyclosporiasis Outbreak

- **2,048 reported statewide cases since May 1, 2026***
- 1,138 (56%) of cases are female
- 909 (44%) of cases are male
- Age range of cases is 0-98 years
- **677/2,048 cases in IN have been linked to the multistate outbreak associated with Taco Bell/iceberg lettuce**
- On July 17, Taylor Farms initiated a recall of all iceberg lettuce sourced from central Mexico
- The best-by dates for these recalled products have passed and they should no longer be available in stores or restaurants



Reported Cyclospora Cases by County

Indiana, n = 2,048



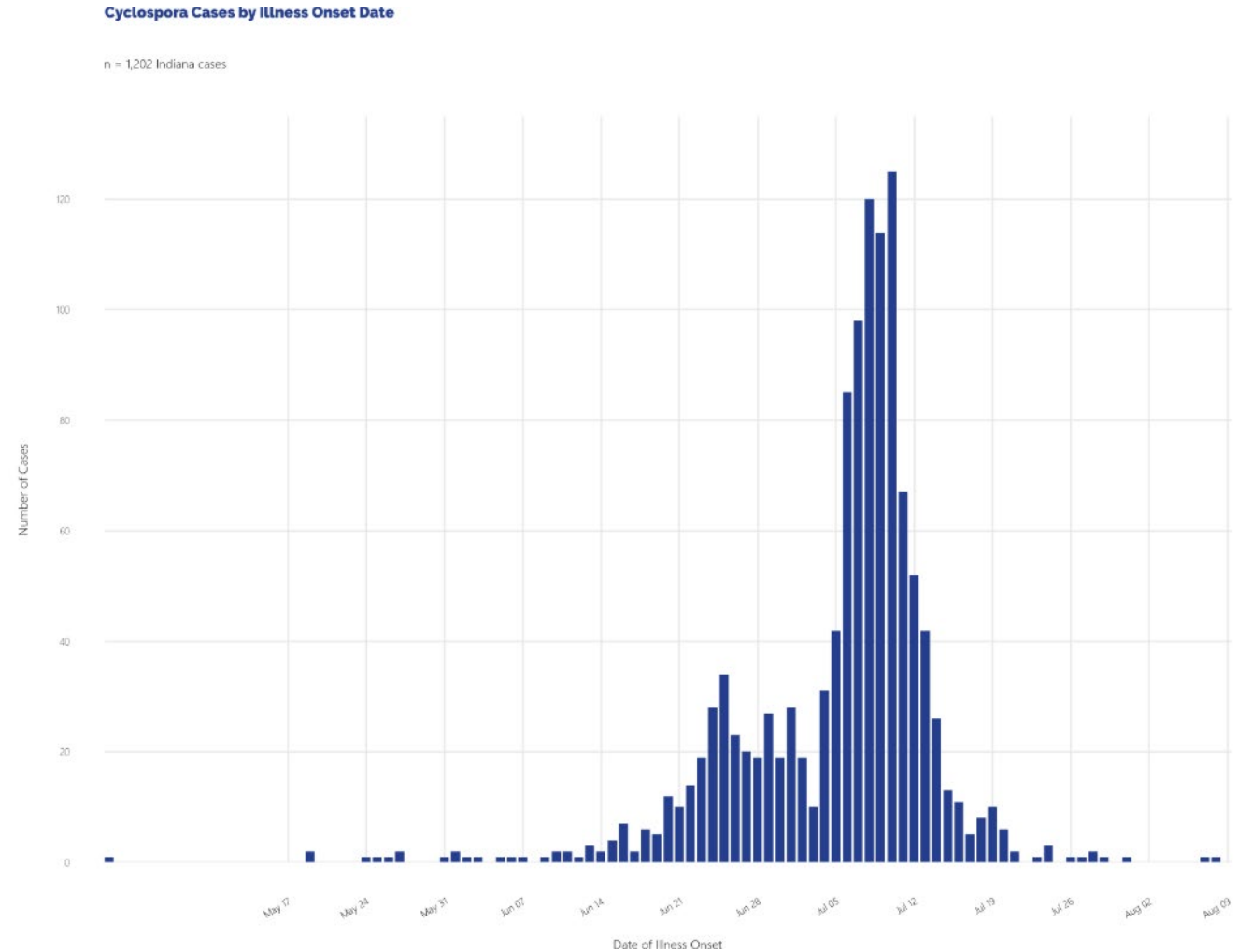
Data current as of August 17, 2026 at 12:00PM EDT Indiana Department of Health

*Statewide case counts as of 12:00pm 8/17/2026

Cases

Epidemic Curve

Based on illness onset, has been trending down since the second week of July



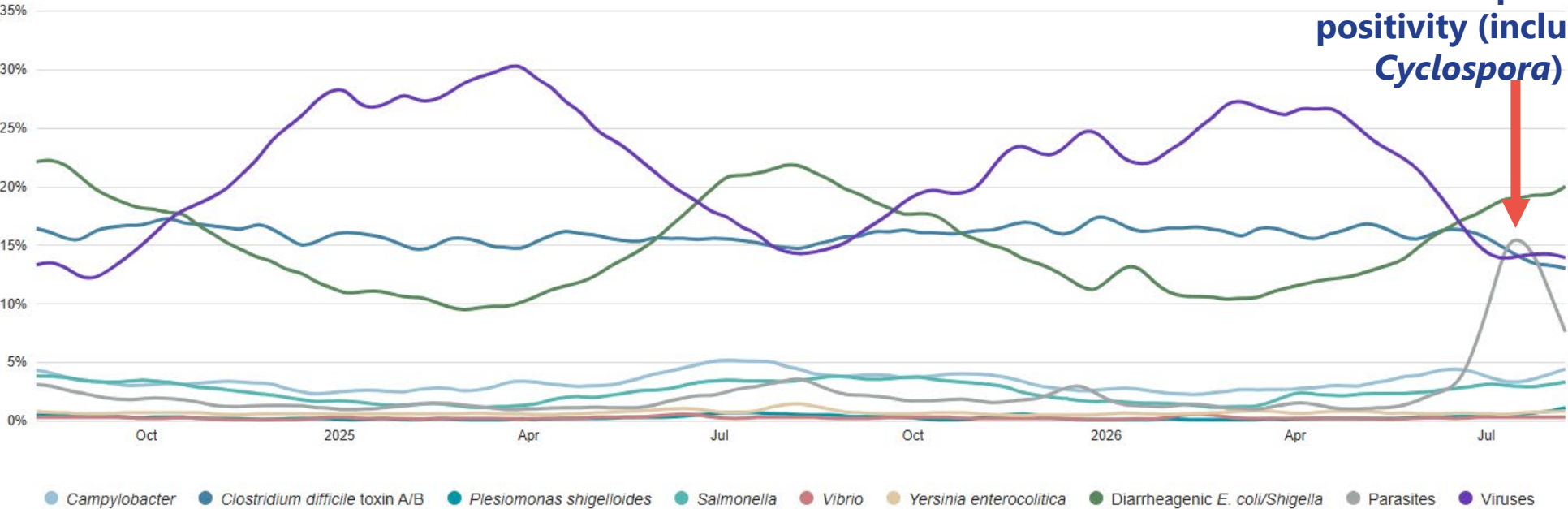
Cyclosporiasis Testing Trends, U.S., 2025-2026



BIOFIRE® FIREWORKS™: United States Trends



Gastrointestinal Pathogen Trends



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Source: [BioFire](#)

IDOH Enteric Team

- **Caitlin Shaw**, Enteric Epidemiologist II
CaShaw@health.in.gov, 317-234-8867
- **Madi Asbell**, Senior Enteric Epidemiologist
MAbell@health.in.gov, 317-234-9741
- **Brandon Halleck**, Enteric Epidemiologist II
BHalleck@health.in.gov, 317-233-7483
- **Jenna Nicodemus**, Enteric Epidemiologist
JNicodemus@health.in.gov, 317-760-3633
- **Brandon Collins**, Enteric Epidemiologist
BraCollins@health.in.gov, 317-464-7897
- **Nicole Stone**, Epidemiology Director
NStone2@health.in.gov, 317-234-2898

Questions?

- **Makayla Culbertson**
Mculbertson@health.in.gov
- **Jillian Saraney**
Jsaraney@health.in.gov
- **Tom Loftus**
Tloftus@health.in.gov
- **Madison Jordan**
Mjordan@health.in.gov





OPE Update



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Quality Improvement (QI)

- **Core Principals:**

- Data-driven
- Ongoing cycle
- System focus
- Customer Focused

- **Methodology:**

- Lean Six Sigma (LSS)
- [Go Lean Six Sigma.com](http://GoLeanSixSigma.com) (GLSS)



Lean Six Sigma Methodology



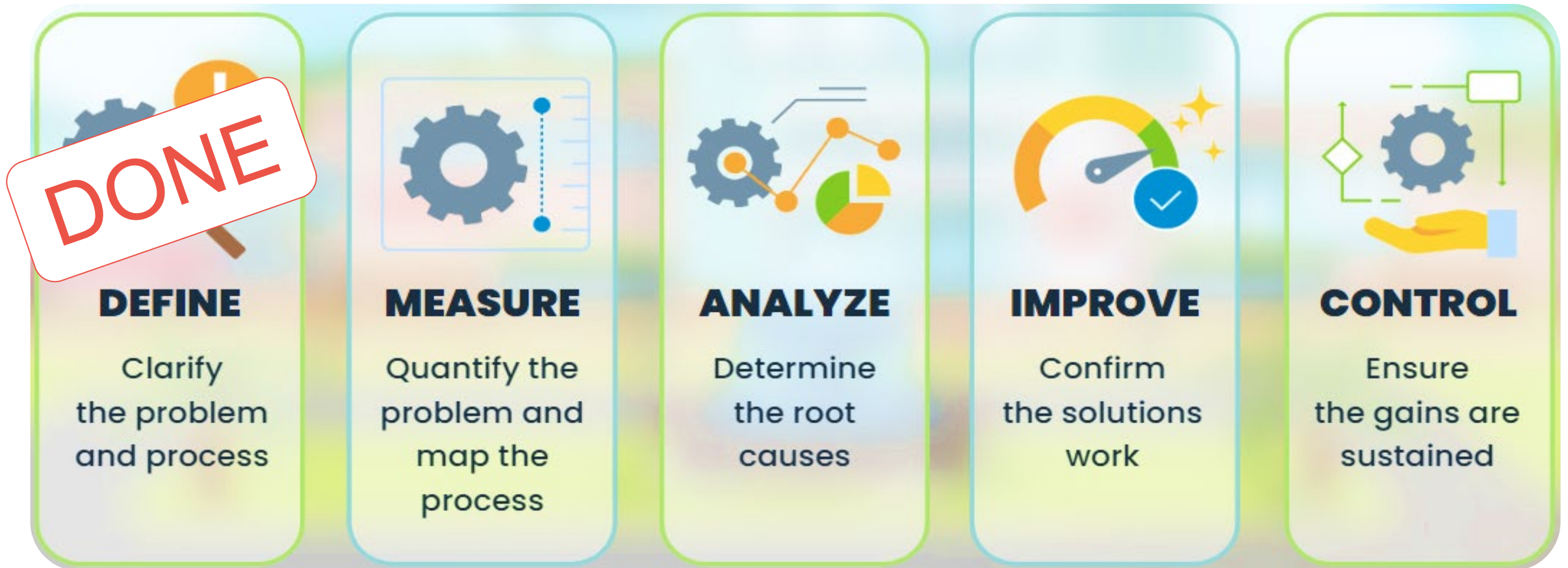
We hear YOU....

- **IDOH Mail Process**
- **Problem:** IDOH's mail process is not meeting our business needs because mail and packages are often misdelivered, delayed, or poorly addressed, causing programs/divisions/warehouse to receive incorrect items
- **Impact:** Delays disrupt vital programs and delayed productivity, misrouted mail risks compliance failures, lost visibility creates operational blind spots and can eroded trust between IDOH, partners, and the public

We hear YOU...

- **IDOH Onboarding and Offboarding Process**
- **Problem:** The current onboarding and offboarding process at IDOH is fragmented, inconsistent, and heavily manual, resulting in delays and errors
- **Impact:** Current process reduces operational efficiency and delays new-hire readiness, causing repeated work, misrouted or duplicate tickets, and inconsistent access provisioning. These issues slow productivity, increase administrative burden across multiple teams, and undermine the overall employee experience

What's Coming?





The More You Know: Summer Safety Series



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Nibbles of Food Safety: School Lunches



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Welcome, friends!

Today we are discussing some basic food safety guidelines, tips for your sending your loved ones back to school. Tall or small, a safe lunch is important for all.



Self Defense from Germs... Hand Washing

Make sure your students understand the importance of hand washing. Promoting the importance of hand hygiene is vital at all ages. Not just wiping hands on pants or a quick rinse, proper hand washing is a life skill that protects us all.

1. Wet hands under warm running water
2. Apply soap
3. Scrub... don't forget your nails!
4. Rinse well under running water
5. Dry completely with a clean towel



Tip: 20 seconds is singing The Birthday Song twice. Make it simple, keep it fun!

Don't roam, stay at home!

Symptoms of a food borne illness

- Diarrhea
- Vomiting
- Jaundice
- Sore throat with fever
- Lesions that can not be covered or wrapped



So, the doctor confirmed...

- H- Hepatitis A
- E- E. coli (shiga-toxin)
- N- Norovirus
- S- Salmonella
- S- Shigella
- Typhoid Fever



Definition of major food allergen

- Milk
- Eggs
- Fish such as bass, flounder, cod
- Crustacean shellfish such as crab, lobster or shrimp
- Peanuts and tree nuts, such as almonds, pecans, or walnuts
- Soybeans
- Sesame
- A food ingredient that contains protein derived from the foods listed in this subsection



Image source: FDA

Life Changing Education starts at Home



FOOD ALLERGY WARNING

**PLEASE BE ADVISED THAT OUR
FOOD MAY CONTAIN:**

**DAIRY, EGGS, WHEAT, SOYBEAN, PEANUTS,
TREE NUTS, FISH AND SHELLFISH**

**Students need to understand their own restrictions
to educate others.**

The allergen notification is not required to be on the menu but does have to be at the establishment where students and staff can view the warning and make informed decisions. Such as:

- Table tents
- Door or window decal
- A notice at the order counter
- A menu
- On the sneeze guard
- On a display case
- Anywhere it can be reasonably seen

Please inform the school of any allergies or sensitivities ahead of time.

Packed with Love

Reminders for a home packed lunch!

- Where are lunches stored?
- Does the school have a refrigerator?
- Keep it hot (above 135F) or keep it cold (below 41F)
- Is the insulated tote sufficient to stay hot for up to 4 hours?
- Was the produce washed before packed?
- Is your student sharing their lunch or trading food? Not all lunches are created equal😊
- What happens to left over food daily?
- How often is the lunch bag or box cleaned?



Have a happy and healthy school year!



Questions?

Contact:

Sharon Pattee

Food Protection Trainer & Standardization Officer

317-719-5433

spattee@health.in.gov





Staff Spotlight



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Get to Know Me – Barbie Martin

- Joined IDOH in June 2024
- Originally taught high school English then worked with students at Vincennes University
- Came to the state with the ICHE
- Married with two adult children and three cats
- Love reading, cooking, travel, and watching sports, especially the Cubs, the Bears, the Pacers, and the Fever



Get to Know Me – Barbie Martin



Quiz

What does MOCC stand for?

The 12th person to email the correct answer to publicaffairs@health.in.gov wins a **\$15 gift card!**



Questions & Answers

Please submit your questions
in the Q&A box or email them to
publicaffairs@health.in.gov.

Next All-Staff Meeting

Wednesday, Sept. 23, 2-3 p.m.

