

MARCH 2019

PULSE

A look at what keeps ISDH ticking

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FUN FACT

The soles of your feet contain more sweat glands and more pressure-sensitive nerve endings per square inch than any other part of your body.



**Indiana State
Department of Health**

Mission:

To promote, protect, and improve the health and safety of all Hoosiers

DR. BOX GOES TO WASHINGTON

One of my priorities this year is to do more to ensure that the good work our agency does to improve the health and safety of Hoosiers is recognized not just within ISDH and Indiana, but beyond its borders. I had the opportunity to do just that earlier this month when I attended the Association of State and Territorial Health Officials (ASTHO) Washington Week event.



**Kris Box,
MD, FACOG**

During the event, leaders in public health come together in Washington, D.C., to establish and strengthen relationships and to meet with key health officials.

For me, it was an amazing opportunity to meet with our two senators and five of our congressional representatives. During those meetings, I talked about a wide range of issues, from funding and infant mortality to hepatitis and the opioid

epidemic. I shared the impressive work you are doing here at ISDH while conveying how important their support is to our success.

Congresswoman Susan Brooks is always incredibly generous with her time and informed about preparedness and health issues, including infant mortality and substance use disorder. She was pleased to hear that Indiana is showing encouraging signs of improvement for drug overdose deaths in 2018.

Rep. Larry Bucshon, who is also a physician and a member of the health subcommittee, and I had a productive conversation about funding. ISDH relies heavily on federal funding to carry out our work, so it's important that the lawmakers involved in deciding how federal dollars are allocated understand that. I raised concerns about funding and how it impacts their districts with all the legislators I met.

I also met with Congressman Trey Hollingsworth, who especially appreciated the maps showing our hepatitis A outbreak

and how infant mortality impacts our state, and was encouraged to see that Rep. Jim Baird and Rep. Greg Pence, our two newest delegates, are already engaged in their committees.

Sen. Todd Young was most engaged about health and asked what he could do to help in the areas of HIV, hepatitis, infant mortality and tobacco and vaping. I was encouraged by his support for a number of issues, especially hepatitis C, which does not get as much attention nationally as it deserves.

While the week was an important opportunity to share our priorities and work with our congressional leaders, it also provided a chance to meet with other state health officers and discuss different approaches to some of the public issues we all face. I was proud to represent Indiana and share our story.

Keep the good work coming. We have a story to tell, and I am excited to share it.

**Yours in health,
Kris**

WELCOME BACK, DR. LIU

By Greta Sanderson

More than three years after Dr. Lixia Liu left as deputy director of the ISDH Laboratories, she's back home again in Indiana and at ISDH.

Her husband and two daughters never made the move to New Mexico, where she had been that state's lab director, and ultimately she gave in to the tug

pulling her back.

"I'm really glad to have the opportunity here," Liu said.

A native of China, Liu first came to the U.S. as a visiting scholar through the University of Illinois at Urbana-Champaign.



**Dr. Lixia
Liu**

She didn't think she would stay. But when a professor invited her to pursue a graduate degree, she accepted and has been in the United States ever since.

Liu realized something unexpected when a friend invited her to make a presentation in China a few years back. Although Chinese is her native language, her

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scientific training has been in English, so she had difficulty using the right translation of scientific terminology.

Dr. Liu specializes in molecular biology; after her postdoctoral training, she continued basic research in a new academic lab conducting a study on virulence-related genetic markers. She was also involved in method development for molecular diagnosis and a molecular epidemiological study of infections of cystic fibrosis (CF) patients.

During this study, they found bacterial strains from two CF patients – one from the East coast and another from the West coast – with the same genetic fingerprints, which linked these two CF centers together. The transmission from one patient to the other occurred when one patient visited a camp attended by the other. Seeing how this bacterial strain moved and infected these patients caught her attention. This discovery was her first true exposure to the field

of public health.

“That was eye-opening for me,” said Liu, explaining that’s when she began thinking outside basic research and about public health. “That wasn’t any path I thought I knew at the time.”

She focuses her efforts on applying cutting-edge technology to improve detection of public health significant pathogens, compounds etc.

“I can see my impact on a community’s health,” she said.

Liu is proud of the seen and unseen roles the lab plays, such as in the detection of the first U.S. MERS-CoV case; the 2015 HIV and the current hepatitis A outbreak investigations; and various compliance testing to ensure safe drinking water, dairy products and food. She’s also excited about the lab’s continued effort to curb antimicrobial-resistant infections.

“The lab is like home to me,” she said. “We want to be ready at all times.”

ERC CELEBRATES SUCCESSFUL NBS LAUNCH



The NEDSS Base System (NBS) team met Feb. 25 in Rice Auditorium to celebrate the implementation of the new electronic disease reporting and case management platform supported by the Centers for Disease Control and Prevention. On Jan. 1, the Infectious Disease Epidemiology, Tuberculosis, Sexually Transmitted Diseases and Viral Hepatitis programs transitioned their surveillance and monitoring systems to the centralized NBS. “A lot of planning went into this project over the last 2-1/2 years, which allowed for a relatively smooth transition from I-NEDSS. I want to thank all of the ERC NBS team members, our colleagues in OTC, and our local health departments for their hard work and patience,” said Charlie Clark, who took the lead on the NBS project.



Dr. Box and NBS team members listen to Karen Gordon, District 10 field epidemiologist, seated far left, during the NBS celebration.

WEIGHTS AND MEASURES SETS THE STANDARD

By Mike Miller

The primary responsibility of the Division of Weights and Measures is to protect the citizens and merchants of Indiana through numerous and varied enforcement activities.



The delivery of proper weight and measure and the elimination of fraud and misrepresentation in commercial transaction have been the objectives of this division since its inception as Indiana Bureau of Weights and Measures in March 1911. The acts of 1947 decommissioned the Indiana Bureau of Weights and Measures, changing the name to Division of Weights and Measures under the authority of the Indiana State Department of Health.

Weights and Measures inspectors protect both the buyers' and sellers' interests by providing equity in the marketplace. Inspectors examine and test with state-certified standards every weighing and measuring device used commercially in Indiana.

Inspectors also check weight on various prepackaged commodities, review commodity labels for compliance, and perform motor fuel quality testing and metrology calibrations. Inspectors investigated 132 consumer complaints concerning shortages and fuel issues and 18 Indiana Attorney General complaints, mainly fuel related.

The Division of Weights and Measures includes the following program areas:

Doug Stevens certifies the scale used to weigh race cars for the Indianapolis 500-Mile Race.



County, City and State Inspectors Program: Counties with a population of 30,000 or more shall have the authority to have a Weights and Measures inspection program. The city may provide an inspector if the population is 20,000 or more. There are a total of 57 local county and city jurisdictions (deputy state inspectors) under the direction of the Division of Weights and Measures.

The division also provides inspection of numerous vehicle scales and gas meter locations in 92 counties and state Weights and Measures programs test 36 compressed natural gas retail filling stations.

Device Inspections: Inspections of all commercially used weighing and measuring devices within the State are performed by 80 state and local Weights and Measures Inspectors. A total of 119,663 inspection tests were performed in 2017-2018, of which 11,238 were rejected. The statutory authority for all inspection activities is found in the Indiana Weights and Measures law under IC 24-6-3-2.

Motor Fuel Inspection Program: The program annually collects samples of petroleum products for quality analysis by a state or private laboratory. Testing determines the octane, ethanol, volatility and water content of petroleum products, as well as the presence of oxygenates. A total of 853 gasoline samples were inspected last year.

Once violation orders are issued, the service station owner will stop dispensing the mislabeled or contaminated fuel until the issue has been resolved and division officials have released the station for normal operation.

If the station owner refuses to correct the violations within a specific amount of time, a stop sale order will be issued and the inspector then has the option to padlock the rejected gasoline dispensers that are in violation of Indiana law. Two stop sale orders were issued in 2018.



Mike Miller, director of the Division of Weights and Measures, certifies fuel dispensers for the Indianapolis 500.

NEW STATE JOB BOARD

After months of planning and development, our new full-service internal and external job boards are finally live!

Current state employees applying for state jobs should use the internal job board at [Success Factors](#) (if you're logged in to the State network, signing in will be automatic). Then, select the "Careers" button from the drop-down menu. You'll see a user-friendly interface with helpful tools including custom job alerts and filtered searches of available openings. You can find detailed instructions [here](#).

Features such as resume importing make it quick and easy for users to create profiles. Once a profile is created, external candidates can opt in to receive notifications about jobs that align with their qualifications and interests.

Please share our new job site with your network, even those who may not be actively seeking a job change today. There may be a perfect fit for them in State government down the road, and our job board is a great way to stay informed about the latest opportunities!

Be sure to check out the [Statewide Monarch Initiative SharePoint Site](#), which contains a library of quick-step guides, demo videos and FAQs compiled by the project team.

You also can contact [Heather Whitaker](#) or email ISDHHR-Mail@spd.in.gov. Thank you for your support as we continue to roll out more significant software upgrades using SuccessFactors. The next software module to be implemented is the performance management module, so look for more information soon.

As you interact with the new software, please let us know if we missed anything. If you do come across an issue, be sure to submit a ticket. You can submit a ticket from the Monarch SharePoint Site by clicking "Submit a Ticket" on the link on the left side of the page.

MONARCH
initiative

HELP US REVIEW THE BEST OF ISDH

The accreditation team is excited about the progress made over the last couple of months. We have uploaded **227 out of the 357 documents**, and more are uploaded every day.

Nineteen people are reviewing these documents in our system to verify that they are clear and correct. These 19 people are able to:

- See examples from the amazing work ISDH is doing from across the agency.
- Get an understanding of the details within accreditation: what accreditation is, what activities are included in accreditation and what is expected from ISDH to become accredited.
- Be a part of an agency-wide movement of becoming the "best at getting better."

Are you interested in being a part of the review team? Your sharp eyes and mind are needed to make sure nothing is missed. After getting approval from your supervisor, you can email [Patricia Truelove](#) at to join the team.

What you can expect:

- Self-paced review of 2-6 documents each month
- Clear checklist to help direct you during the review process
- Time commitment of no more than 60 minutes per month
- Continual support from the accreditation coordinator along the way



LEVELS OF CARE RULES EXPECTED BY SUMMER

By Greta Sanderson

Indiana's delivering hospitals and certified birthing centers will be able to apply to receive their desired perinatal levels of care beginning this summer.

ISDH ended the public comment period on the levels of care rules with a public hearing on Feb. 19. Work is under way to finalize the rules so the designation process can begin.

The 2018 General Assembly passed Levels of Care legislation with the goal of making sure every baby in Indiana is delivered at the right place and at the right time based on the condition of both mother and baby.

The rules are based on best practice guidelines from the American Academy of Pediatrics and the American College of Obstetri-

cians and Gynecologists. The designation levels start with level 1 for an uncomplicated delivery and increase to level 4 for supporting the most complex perinatal cases.

"The goal is to improve outcomes for every mother and baby in the state and help more babies live beyond their first birthday," said Martha Allen, ISDH director of Maternal and Child Health.

Hospitals seeking a level 3 or 4 designation will have six months from the date the rules are final to apply. ISDH nurses will then begin the certification process supporting all of Indiana's delivering facilities. Allen believes that all hospitals will meet their desired levels of care.

"Our objective is to support hospitals in achieving their desired levels, whatever those levels may be," Allen said.

Level 3 and 4 facilities can also apply to become perinatal centers, which will mentor other hospitals and review outcomes. Hospitals may continue to transfer patients to the hospital selected by the provider caring for the mother and baby based on their clinical conditions and family preferences.

To support that process, ISDH plans to create a system to collect and analyze outcomes data for all of Indiana's delivering facilities.

The first designations should be made early next year, with the goal of having perinatal centers in place by 2021. Allen said it will likely take three years to complete all the certifications, at which point the recertification process will begin with a three-year cycle moving forward.

LHDs SHARE AND NETWORK AT SYMPOSIUM



ISDH hosted its spring 2019 Local Public Health Leadership Symposium March 13 at the 502 East Event Centre in Carmel.

The event is an opportunity for local health departments to hear about public health at the state level, learn about effective initiatives under way in other counties and network.

ABOVE LEFT: Ross D. Silverman, professor of health policy and management at the IU Fairbanks School of Public Health and of public health and law at the IU McKinney School of Law, speaks about how IU's Grand Challenge is addressing the opioid crisis in Indiana.

ABOVE RIGHT: LHD Outreach Division Director David Hopper introduces a panel to discuss Indiana's hepatitis A outbreak. Panel members included ISDH Immunization Director Dave McCormick, Foodborne and Waterborne Disease Epidemiologist Nicole Stone and Harrison Coun-



ty Health Department Administrator Carrie Herthel. Mindy Waldron, administrator for the Fort Wayne-Allen County Health Department, and Rhomonda Scifres of the Jackson County Health Department (not pictured) also participated.

The symposium also featured updates on legislation, preparedness and immunizations.

The fall symposium is scheduled for Oct. 23 at the Fort Harrison State Park Inn and Garrison Conference Center in Indianapolis.

EMPLOYEE ASSISTANCE PROGRAM IS HERE TO HELP

Interested in personal legal advice? Your EAP can help!

The **Employee Assistance Program (EAP)**, provided by the State of Indiana for employees and their dependents, offers free legal consultations in-person or by phone.

This service is also available to individuals living in employees' households. The EAP is completely confidential and provided at **no cost**. **The program is administered by Anthem, which means they do not see any employee data.**

Ask for a 30-minute in-person meeting or phone call with an attorney about legal concerns such as:



- Dealing with bankruptcy
- Learning about divorce, child support and custody
- Setting up a living will or power of attorney

- Taking care of real estate issues

Learn more about how the EAP can help you by visiting anthemeap.com, or make an appointment by calling 1-800-223-7723 and selecting **option 1**. Once you are connected with an EAP representative, ask about an appointment with an attorney.

The representative can help

you find an attorney who fits your needs and will guide you through the process of scheduling your first appointment. If you're not ready to speak to someone directly, you can access several resources online through the EAP website. Use company code: State of Indiana.

VITAL RECORDS IMPLEMENTS QUALITY IMPROVEMENTS

By Nicole Morley

Quality improvement team member Casey Kinderman conducted a kaizen-style event (i.e. Rapid Improvement Event or RIE) with the staff of the Corrections and Amendments program within Vital Records in August 2018. Several months after the initial event, follow-up shows the improvements continue to make a difference.

Birth records in Indiana need to be amended or corrected for many reasons, including adding a father's name to the record, legal name changes and misspellings. There was no standardized process for how these requests were formatted, which created inconsistent methods of submission for processing paper and electronic requests from local health departments (LHDs), courts, other state agencies and hospitals.

The five-day event asked staff to describe their processes step-by-step and identify where there was waste — in other words, where were there unnecessary steps, wasted time, stops in work, duplications or extra movement. After analyzing identified themes from the waste, Vital Records staff came up with a better way to process corrections and amendments that they worked to execute through the implementation of an action

plan. The solutions were met with enthusiasm by those involved, including those requesting the quality improvement event.

Vital Records Director Hilari Sautbine said leadership has played a crucial role in supporting and transitioning the corrections.

"The RIE helped us take a cumbersome process and streamline it. This resulted in a more efficient way of processing data, so staff were less overwhelmed in their daily tasks," she said.

"Also, this gave my staff the opportunity to really take ownership of their job duties, so implementing the changes was easier than anticipated since we were implementing their ideas."

Leadership played a crucial role in supporting and transitioning the Corrections and Amendments team to the full adoption of its "future state" by helping the frontline staff in procuring additional computer monitors, printers, and scanners for their desks in addition to stamps with dates and times — all identified as solutions responsible for reducing long process times.

Another key portion of completing a quality improvement event is the follow-up care with the team implementing the process change. Part of the team's action plan was to hold weekly huddles where they discuss how

the implementation of the new future state process is going and make adjustments as identified. As waste was eliminated from the process and deadline stress was alleviated, there was an apparent increase in morale among frontline staff. As the team hosted its 30-, 60-, and 90-day check-ins with the quality improvement team facilitator, it was identified that team members:

- Felt more empowered to experiment with new ways to set up their workspaces
- Were working to get cross-trained within the team to alleviate higher workloads
- Were taking charge of developing a standardized process that works for them
- Reduced overall cycle time for corrections and amendments by 85 percent
- Eradicated their backlog of corrections and amendments
- Reduced the number of paper touches required to process a correction and amendment from eight to three

Let's give a huge congratulations to the Corrections and Amendments Division of Vital Records on its success in adopting and applying quality improvement techniques within its processes. A big thank also you to Casey Kinderman for facilitating and supporting the team.

STAFFING UPDATES

ISDH would like to welcome these employees who joined the staff or transferred to ISDH in February:

New hires included Rachel Ragland, vital records epidemiologist, Vital Records; April Kendrick, administrative assistant, Emergency Preparedness; Amy Spencer, public health nurse surveyor, Acute Care; Brucelle Arizmendi, information security officer, Office of Technology and Compliance; Nitin Gavade, accountant, Finance; Stacey Ware, eligibility application coordinator, Children's Special Health Care; Jacob Sudduth, chemist, Laboratory; Joseph Rakoczy, environmental scientist, Environmental Public Health; Garry Davis, environmental scientist, Environmental Public Health; Emily Sargent,

preparedness analyst, Emergency Preparedness; Kristi Linson, integrated community services manager, Children's Special Health Care; and Hachem Alaoui, chemist, Laboratory.

Alexa Kelly, provider relations specialist in Children's Special Health Care, transferred in from the State Personnel Department.

Congratulations on their promotions go to Marlena Ratchford, HIV client services coordinator, HIV/STD/Viral Hepatitis; Ayriane Bailey, HIV care coordination program manager, HIV/STD; Lauren Nowlin, bilingual eligibility application coordinator, Children's Special Health Care; Hector Velez-Orengo, finance manager (HIV/STD), Finance; Sherry Adams, lab tech, Laboratory.



**LOOK WHO I MET
ON THE ELEVATOR!**

Tori A. Harvey



NAME: Tori A. Harvey

TITLE: Vendor consultant, Indiana Women, Infants, and Children (WIC)

JOB DESCRIPTION: Work in the WIC program to develop and help manage the program's food delivery system, ensuring vendors and participants follow federal and state policies regarding the food delivery system.

YEARS AT ISDH: 2

FAVORITE PART OF WORKING AT ISDH: Providing great customer service for a program that is much needed in the state of Indiana.

OTHER INFORMATION: I am married to a great guy (21 years in April), with two sons, one at Purdue (freshman) and one in fifth-grade. I have a male dog named Jumping Jack (J.J.). I am the only female in my crew!

MOMS HELPLINE MARKS THIRD YEAR

By Greta Sanderson

The MOMS Helpline celebrated its third year with a Community Baby Shower March 1 at Goodwill of Central and Southern Indiana. About 10 expectant moms and their families attended the event, which included Baby Shower Price is Right and Guess the Celebrity Baby Name games, cake and refreshments. Booths on a variety of programs had information on the Liv pregnancy mobile app, Safe Sleep, WIC, Help Me Grow and more.

"It was a great opportunity to engage and educate mothers and their families about the resources and services offered by the MOMS Helpline to help women take care of their health and have a healthy pregnancy," said MCH MOMS Helpline Manager Diana Feliciano.

Throughout the last three years, the MOMS Helpline has continued to grow and expand as it helps Hoosier women and families with referrals and information on a variety of needs, including health insurance, nutrition, clothing, housing and more.

Last year, transportation to medical appointments, baby supplies and financial assistance were top needs.

Also in 2018, the MOMS Helpline part-

nered with Indiana 211. That gave the helpline an upgraded resource database system. Another upgrade was the contact center solution, which allowed the MOMS Helpline to become the central access point for ISDH's new Help Me Grow system model, which identifies young children with behavioral or developmental concerns and links families to community-based services. The Help Me Grow model is piloting its services in Lake, La Porte, Elkhart, St. Joseph, Madison, Delaware, Grant, Marion and Scott counties.

Soon the Helpline will launch another enhancement by offering services by text message.

Gifts for moms at the MOMS Helpline Community Baby Shower.



ABOVE: Deputy State Health Commissioner and State Epidemiologist Pam Pontones and MOMS Helpline Manager Diana Feliciano (left) stand next to Goodwill Nurse-Family Partnership Senior Director Lisa Crane and Director of Operations Lynn Baldwin before the event.

RIGHT: From left, Lead Community Outreach Liaisons Charnel Forbes, Reina Almanza and Gabriela Peña-Rodriguez.

