



Eva J. Henry - District #1  
Charles "Chaz" Tedesco - District #2  
Erik Hansen - District #3  
Steve O'Dorisio - District #4  
Mary Hodge - District #5

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**STUDY SESSION AGENDA  
TUESDAY  
September 4, 2018**

*ALL TIMES LISTED ON THIS AGENDA ARE SUBJECT TO CHANGE*

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<b>10:30 A.M.</b>	<b>ATTENDEE(S):</b>	<b>Dr. John M. Douglas, Executive Director</b>
	<b>ITEM:</b>	<b>Tri-County Health 2019 Budget Request</b>
<b>11:30 A.M.</b>	<b>ATTENDEE(S):</b>	<b>Raymond Gonzales</b>
	<b>ITEM:</b>	<b>Administrative Item Review / Commissioner Communications</b>

(AND SUCH OTHER MATTERS OF PUBLIC BUSINESS WHICH MAY ARISE)

\*\*\*AGENDA IS SUBJECT TO CHANGE\*\*\*



## STUDY SESSION AGENDA ITEM

<b>DATE:</b> September 4, 2018
<b>SUBJECT:</b> Proposed FY 2019 Budget
<b>FROM:</b> John M. Douglas, Jr., MD
<b>AGENCY/DEPARTMENT:</b> Tri-County Health Department
<b>ATTENDEES:</b> John M. Douglas, Jr., MD, Executive Director Michele Askenazi, Director of Emergency Preparedness, Response and Communicable Disease Surveillance Jill Bonczynski, Director of Nutrition Ronnae Brockman, Executive Assistant Theresa Fox, Director of Administration and Finance Mame Fuhrman, Director of Human Resources Brian Hlavacek, Director of Environmental Health Jennifer Ludwig, Deputy Director Jeanne North, Director of Nursing Carole Adducci, Board of Health Member Rosanna Reyes, Board of Health Member Naomii Steenson, Board of Health Member
<b>PURPOSE OF ITEM:</b> To present our proposed FY 2019 budget to the County Commissioners
<b>STAFF RECOMMENDATION:</b> TCHD requests that the Commissioners consider approving our requested population and county per capita rate increases.

### **BACKGROUND:**

TCHD is the District Local Public Health Agency serving Adams, Arapahoe and Douglas Counties and is supported by general funds allocated by each county in addition to state general funds, categorical grants, state/federal funding sources, and some fee for services programs. The budget request will be presented to all three Boards of County Commissioners in August and September for consideration prior to a three-way discussion at the Ten-County Meeting.

### **AGENCIES, DEPARTMENTS OR OTHER OFFICES INVOLVED:**

None.

**ATTACHED DOCUMENTS:**

FY2019 PowerPoint presentation.

Link to our 2019 Proposed Budget book (we will also bring hard copies of the budget book to the study session): <http://www.tchd.org/DocumentCenter/View/5284/Proposed-FY19-Budget-Book>

**FISCAL IMPACT:**

Please check if there is no fiscal impact ☐. If there is fiscal impact, please fully complete the section below.

<b>Fund:</b>
<b>Cost Center:</b>

	Object Account	Subledger	Amount
Current Budgeted Revenue:			
Additional Revenue not included in Current Budget:			
<b>Total Revenues:</b>			

	Object Account	Subledger	Amount
Current Budgeted Operating Expenditure:			\$ 3,534,559
Add'l Operating Expenditure not included in Current Budget:			\$ 100,525
Current Budgeted Capital Expenditure:			
Add'l Capital Expenditure not included in Current Budget:			
<b>Total Expenditures:</b>			<u>\$ 3,635,084</u>

New FTEs requested: ☐ YES ☒ NO

Future Amendment Needed: ☐ YES ☒ NO

**Additional Note:**

TCHD budget request is similar for all three counties and is based on a population-based increase of 0.5% to match projected population growth and a per capita rate increase of \$0.12 (from \$6.72 to \$6.84). The rationale for the increased funding is to strengthen organizational core capacity and maintain high quality of services for community by supporting:

- A 3.5% merit pool increase for General Fund supported staff
- Increased complexity in informatics management system support which includes 1.0 FTE
- TCHD is requesting an increase of \$100,525.00 for 2019 bringing the requested amount for 2019 to \$3,635,084.00.

**APPROVAL SIGNATURES:**



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Raymond H. Gonzales, County Manager

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Alisha Reis, Deputy County Manager

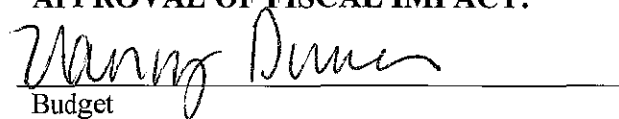
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Bryan Ostler, Deputy County Manager

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Patti Duncan, Deputy County Manager

**APPROVAL OF FISCAL IMPACT:**



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Budget

# **Tri-County Health Department 2019 Proposed Budget**

**John M. Douglas, Jr., MD  
Executive Director  
Tri-County Health Department**

**Adam County FY 19 Budget Study Session  
September 4, 2018**

# Overview

- Quick updates
  - Recent TCHD highlights
  - New funding support for high priority programs
  - Program efficiency summary
- FY19 Budget Request

# Follow-up on Questions from June BOCC Update

- Adams County
  - Nurse home visits — summary shared
  - Air quality issues—initial meeting July 23
- Arapahoe County
  - Household waste collection—clarifying email
- All counties
  - Metrics from substance abuse dashboard— summary version near completion

# Monitoring TCHD Substance Abuse Prevention Efforts

## ***Key health outcome measures***

- Deaths due to drug overdoses (opioids, other)
- Hospitalization due to drug overdose
- Youth substance use
  - Alcohol
  - Marijuana
  - Prescription drugs without a prescription
  - Controlled substances dispensed (% opioid)

## ***Key program measures***

- Youth prevention
  - # community coalitions actively engaged
  - # engaged partners in each coalition
- Public education
  - # public events
  - # media campaigns conducted
  - Campaign reach/impressions

## ***Key Program Measures (cont)***

- Provider training
  - # provider educational opportunities
  - # providers trained
- Disposal
  - # safe disposal locations
  - Pounds of medications collected
- Naloxone
  - # law enforcement agencies carrying/trained
  - # pharmacies dispensing
- Syringe access services
  - Clients served
  - Syringes distributed, collected, disposed
  - Naloxone kits distributed/used
- Treatment provider capacity



# Medication Takeback TCHD Area

--18 permanent locations established 2016-18  
--10 run by CDPHE

--Pounds of meds collected data only available for CDPHE locations

Permanent Medication Take-Back Locations

Site	City	County	Program	Date
Walgreens	Thornton	Adams	Walgreens	2016
Walgreens	Brighton	Adams	Walgreens	2016
Anschutz Medical Campus PD	Aurora	Adams	CDPHE	2016
Platte Valley Pharmacy	Brighton	Adams	CDPHE	2016
Brighton PD	Brighton	Adams	CDPHE	2017
Kaiser Permanente	Westminster	Adams	Kaiser	2017
Genoa Pharmacy	Thornton	Adams	CDPHE	2018
Walgreens	Aurora	Arapahoe	Walgreens	2016
Arapahoe County SO	Centennial	Arapahoe	CDPHE	2016
Littleton PD	Littleton	Arapahoe	CDPHE	2016
Kaiser Permanente	Centennial	Arapahoe	Kaiser	2017
Benzer Pharmacy	Byers	Arapahoe	CDPHE	2018
Glendale PD	Glendale	Arapahoe	CDPHE	2016
Walgreens	Highlands Ranch	Douglas	Walgreens	2016
Castle Rock PD	Castle Rock	Douglas	CDPHE	2016
All Health Network Pharmacy at Parker	Parker	Douglas	CDPHE	2017
Kaiser Permanente	Lone Tree	Douglas	Kaiser	2017
Parker PD	Parker	Douglas	CDPHE	2018

Updated safe disposal location information can always be found at [www.takemedsbac.org](http://www.takemedsbac.org). Includes list and interactive map.

Pounds of Medication Collected

County	Location	Q4 2016	Q1 2017	Q2 2017	Q3 2017	Q4 2017	Q1 2018	Q2 2018	Total Pounds
Adams	Anschutz Campus PD (Aurora)		74	40	118	41	77		350
	Platte Valley Pharmacy (Brighton)		43				44		87
	Brighton Police			183	101	99	47	127	557
	Genoa Pharmacy (Thornton)							36	36
Arapahoe	Arapahoe County Sheriff (Centennial)						228	151	379
	Littleton PD	108	403	359	399	239	460	192	2160
	Glendale PD	38	173	239	175	88	167	139	1019
Douglas	AllHealth Network (Parker)			177	147	170	199	97	790
	Castle Rock PD	139	197	426	255	243	195	273	1728
	Parker PD						116	442	558
TOTAL		285	890	1424	1195	880	1533	1457	7614

\*Data are limited: Only includes CDPHE sites using State vendor (10 currently). ACSO did not start using State vendor until 2018 even though have had box for several years; 2016 data are Nov-Dec only; 2018 Q2 is through May only.

## Bleak New Estimates in Drug Epidemic: A Record 72,000 Overdose Deaths in 2017

### Change in Overdose Deaths Last Year

Reductions in New England give some cause for hope, while the situation in the Midwest and Mid-Atlantic remains bleak.



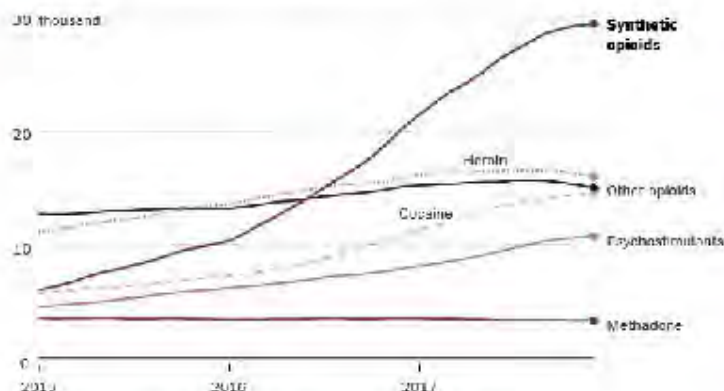
Note: These numbers are adjusted to account for some death investigations that are not completed. They may change slightly before they become final. Estimates for less populous states are highly variable.

Source: Centers for Disease Control and Prevention

In much of the West, overdose deaths have been flatter as the epidemic has raged in parts of the East and Midwest. That geographical pattern may be a result of the drug supply. Heroin sold west of the Mississippi tends to be processed into a form known as black tar that is difficult to mix with synthetic drugs. The heroin sold toward the east is a more processed white powder that is more easily combined with fentanyl.

### Synthetic Opioids Are Driving Up the Overdose Rate

Overdose deaths in thousands in preceding 12 months



Note: These numbers are adjusted to account for some death investigations that are not completed. Some deaths involve more than one drug.

By The New York Times. | Source: The Centers for Disease Control and Prevention

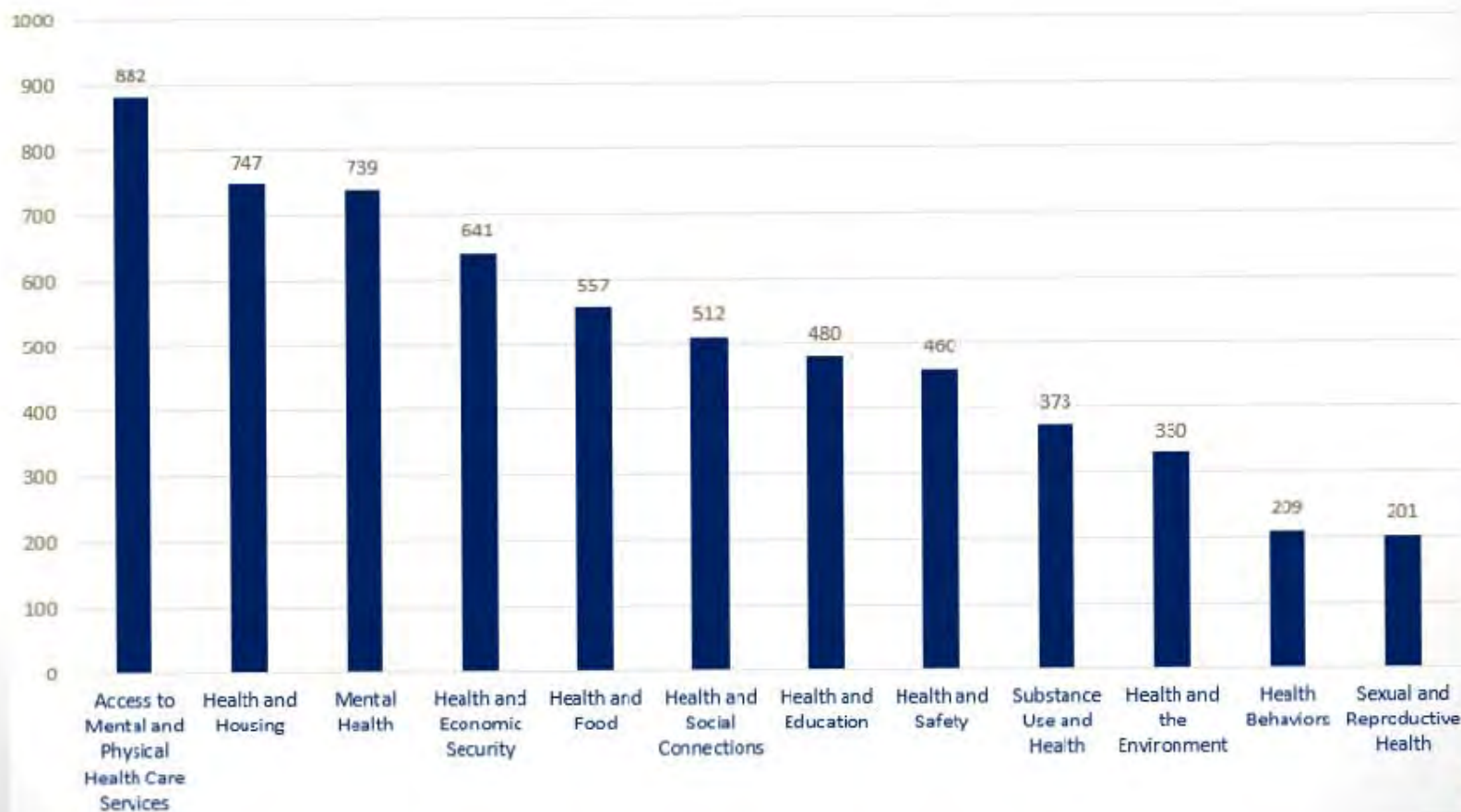
The epidemic could also intensify again. One worrying sign: Dr. Jones said there is some early evidence that drug distributors are finding ways to mix fentanyl with black tar heroin, which could increase death rates in the West. If that becomes more widespread, the overdose rates in the West could explode as they have in parts of the East.

Aug 15, 2018

# Update on Community Health Assessment

## TCHD CHA Prioritization Survey

Ranked most important health problems in your community (N=420)



# Update on Public Health Improvement Plan

- In July, using highlights from CHA
  - 3 Community Stakeholder meetings
    - 11 elected officials
    - 2 board of health members
    - 21 community partners
    - 7 community members
  - Forum with County Human Services staff
  - 2 TCHD staff discussions
  - Outreach to non-English speaking community residents
  - Next Steps
    - Framework Development
    - Develop Public Health Improvement Plan
    - Ongoing Community Implementation Planning



# Perfluorinated Compounds (PFCs) in South Adams County Water

- PFCs
  - Family of synthetic chemicals (3000+) with heat/stain resistant properties (e.g., Teflon, Scotchguard, firefighting foam)
  - Concerns arising nationally (eg, El Paso Co 2016)
- Detected in South Adams County water early July
  - Levels in several groundwater wells high
  - Levels in drinking water below EPA limit
- Current situation: District water is safe for consumers
- Next steps
  - TCHD has notified owners of 190 private wells to offer/encourage sampling for PFCs
  - Technical Working Group formed to identify possible source
  - Involved agencies planning for public meeting in near future.



Meghan Trubee, Water Quality Control Division | 303-692-6351 | [meghan.trubee@state.co.us](mailto:meghan.trubee@state.co.us)  
Theresa DeMouy, South Adams County Water & Sanitation District | 720-206-0560 | [tdemouy@sacwsd.org](mailto:tdemouy@sacwsd.org)  
Lisa McClain-Vanderpool, Environmental Protection Agency | 303-312-6077 | [mccclain-vanderpool.lisa@epa.gov](mailto:mccclain-vanderpool.lisa@epa.gov)  
Gary Sky, Tri-County Health Department | 720-200-1529 | [gsky@tchd.org](mailto:gsky@tchd.org)

For immediate release: July 12, 2018

## Perfluorinated compounds detected in water within the Quebec/I-270 Corridor

The South Adams County Water and Sanitation District recently detected elevated perfluorinated compounds (referred to as PFCs or PFAS) in samples of water tested from certain shallow groundwater wells in the Quebec/I-270 corridor that feed into the district's water supply prior to treatment. The district treats its raw water before delivering the final drinking water to its customers. The resulting levels of PFOA and PFOS in the district's final treated water supply are below the 2016 U.S. EPA health advisory limit of 70 parts per trillion (ppt). The district will continue to monitor for PFCs/PFAS.

The district has taken further steps to ensure its drinking water is safe. This includes increasing the amount of water it receives from other sources to blend with treated water and also evaluating ways to optimize treatment to respond to the presence of PFCs/PFAS in groundwater. For more information about the district's water, please visit its website: [www.sacwsd.org](http://www.sacwsd.org), call 303-287-6454 or email questions to [wqinfo@sacwsd.org](mailto:wqinfo@sacwsd.org).



# Salmonella Outbreak Arapahoe County Fair

- Aug 2: Report from 4-H family of cluster of ill persons, 1 Salmonella +
- Aug 3: TCHD investigation started
  - Coordinated w CDPHE, Dept Ag
  - 12 cases so far, linked to livestock exposure at fair
  - Interviews underway with 143 4-H kids from 98 households who were livestock exhibitors
  - Press release 8/10 with 22+ million media impressions
- Work in progress
  - Thus far appears to be a common point source with no ongoing transmission
  - Other potential cases being investigated



For Immediate Release: August 10, 2018

Contact: Tri-County Health Department Becky O'Guin, Strategic Communications Manager, 720-320-3087  
Arapahoe County Jenifer Doane, Communications and Community Relations Manager, 303-961-3410

## Tri-County Health Department Investigating *Salmonella* Outbreak

*Salmonella outbreak linked to Arapahoe County Fair and 4-H related events*



# Regional Mass Fatality Seminar

- TCHD collaboration with North Central Region/Urban Area Security Initiative Fatality Management Committee to present a daylong mass fatality seminar June 19<sup>th</sup>
- Focus: best practices and lessons learned from mass fatality incidents from around the country (e.g., Orlando, Las Vegas mass shootings, Washington state landslide).
- 100+ participants including public health, emergency management, law enforcement professionals and coroners from 10 county Metro + region
- Sparked discussion on how to prepare for these types of incidents including interest from NTSB in working with regional Healthcare Coalition to better engage hospitals



The flyer is titled "Mass Fatality: Best Practices & Lessons Learned" with the subtitle "Key Topics and Speakers". It features a background image of a crowd at night. The topics and speakers listed are:

- Pulse Nightclub Tragedy**  
*April Taylor | Deputy Emergency Manager | Orlando Office of Emergency Management  
Orlando, FL*  
Deputy Emergency Manager April Taylor will discuss Emergency Operations Coordination activities regarding mass fatality response during the Pulse Nightclub attack in June 2016. The presentation will focus on coordination activities after life safety and security priorities are addressed, and when the focus shifts to addressing fatalities and supporting families.
- Oso Landslide**  
*Major Mark Loos | Officer in Charge - Fatality Search and Recovery Team | Colorado Air National Guard  
Aurora, CO*  
Some national resources can be found in our own back yard. Major Mark Loos will introduce the function of the Fatality Search and Recovery Team (FSRT), provide insight into decedent transport during the Oso Landslide in Washington State in 2014, and expand upon how the FSRT coordinated activities during the landslide with local, state, and federal partners.
- Family Assistance Centers**  
*Elias Kontanis, PhD | Chief - Disaster Assistance Division | National Transportation Safety Board  
Washington, D.C.*  
The National Transportation Safety Board (NTSB) Disaster Assistance Division spearheads Family Assistance Center (FAC) initiatives for transportation related incidents. Elias Kontanis will describe the function and capabilities of NTSB coordinated FACs, focusing on interagency coordination and providing insight as to how to build a successful FAC program within the region using volunteers, government, and other resources.
- Keynote Speaker**  
**1 October: Las Vegas**  
*John Fudenberg, D-ABMDI | Coroner | Clark County Office of the Coroner/Medical Examiner  
Clark County, NV*  
On October 1, 2017, a gunman opened fire on a crowd of concertgoers at a music festival on the Las Vegas Strip in Nevada. The incident is the deadliest mass shooting committed by an individual in the United States. Coroner John Fudenberg will discuss his experience in responding to the incident and key topics of the shooting including on-scene investigation coordination, evidence collection, victim identification, first responder and employee wellness, and more.

# Awards from National Association of County and City Health Officials (NACCHO)

- 2018 Promising Practices:
  - *TCHD Cybersecurity*
- 2018 Model Practices:
  - TCHD
    - *Opiate Mapping*
  - Metro-wide collaboration
    - *Metro Denver Partnership for Health*
    - *Healthy Beverage Partnership*
- 2004-18
  - TCHD has received 21 Model Practices (plus 2 Metro-wide) over 15 consecutive years
- Inaugural National Advocate of the Year Award
  - TCHD one of two awardees nationally



# FY19 Non-County Sources for Strategic Priorities and Core Programs

• Cancer, Cardiovascular and Chronic Pulmonary Disease Grants	
• Diabetes Education Program	\$ 642,451
• Worksite Wellness	\$ 314,000
• Regional Food Access *	\$ 200,000
• Regional Breastfeeding *	\$ 144,858
• Human Papillomavirus (HPV)	\$ 77,135
• Healthy Beverage Initiative	\$ 53,000
• Regional Radon	\$ 10,000
• Retail Food – Inspection	\$ 188,000
• Nurse Family Partnership	<u>\$ 139,049</u>
Total	<u>\$ 1,768,493</u>

\* New Grant Funding

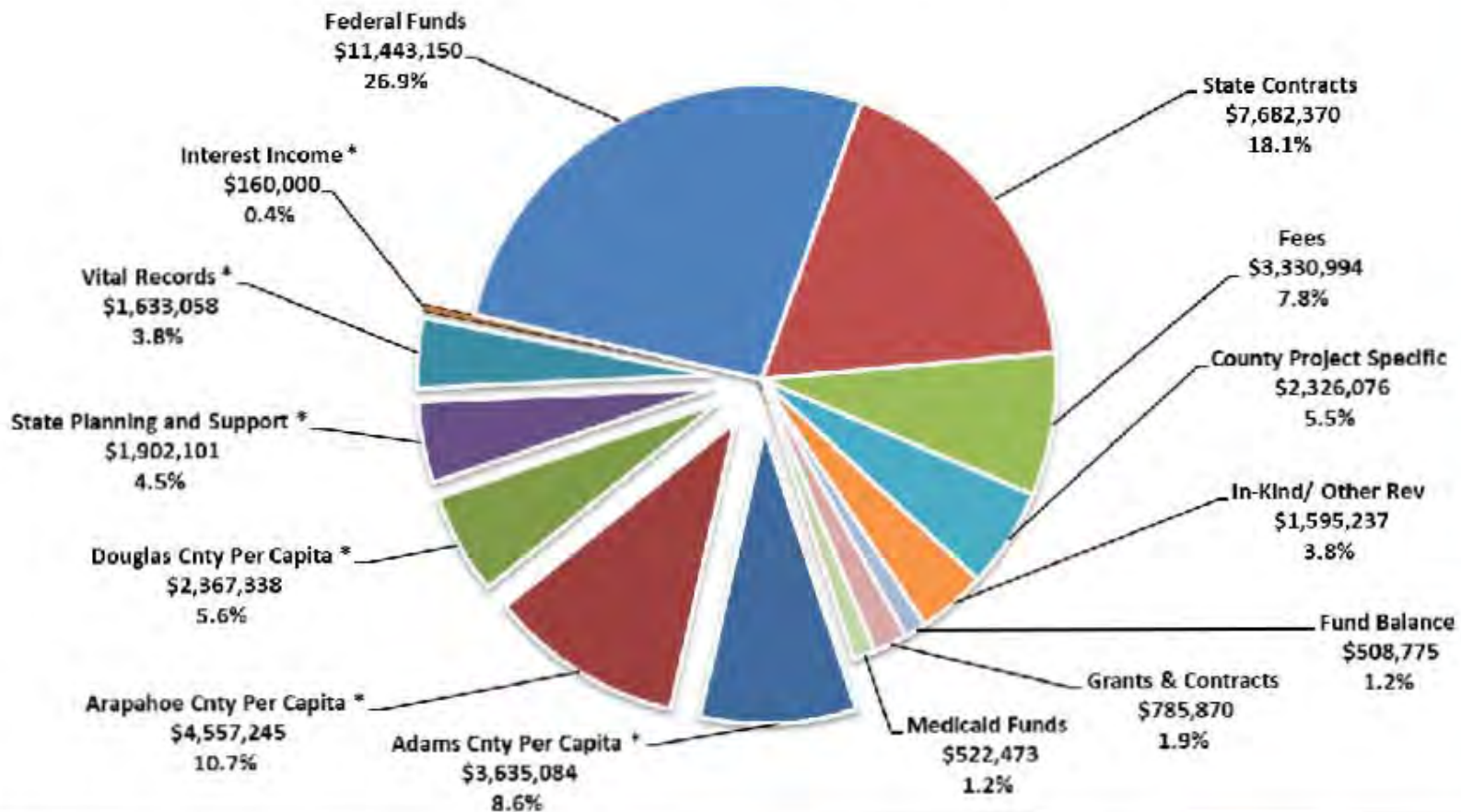
# Efficiencies in TCHD Operations

## ***Total estimated efficiencies savings: (\$215,000)***

- Facilities and Purchasing (\$91k)
  - Minimize cost for large scale office moves – no OT
- Information Technology (\$48k)
  - TCHD agency-wide copier replacement; Cell phone rate plan change
- Accounting, Financial Services and Vital Records (\$45k)
  - Automate employee and vendor payment processes
- Emergency Preparedness and Response (\$20k)
  - Cost reduction - free resource of the TCHD Emergency Notification System
- Human Resources (\$11k)
  - Automated system for FSA and open enrollment

# Tri-County Health Department 2019 Budget Request

## FY 2019 Proposed Sources of Revenues Total of \$ 42,449,771

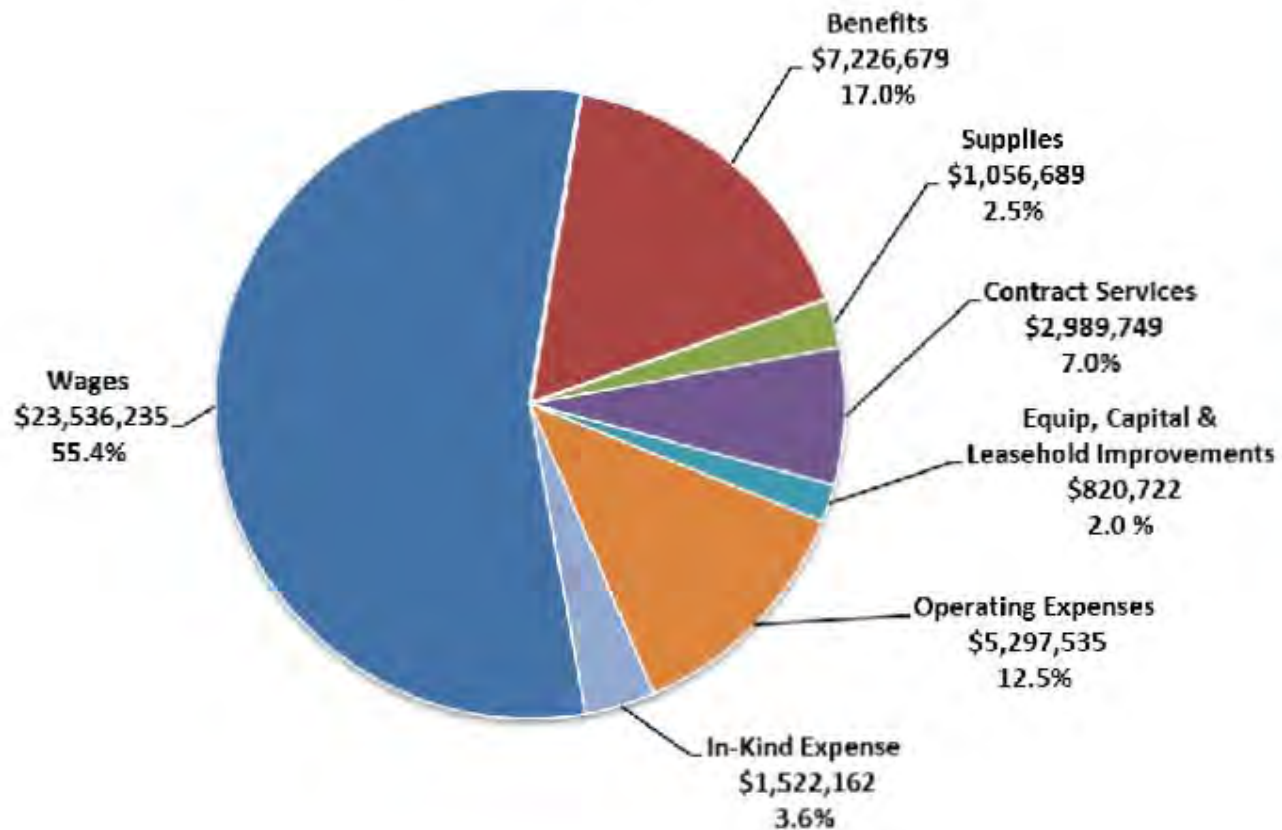


For all sources of revenue, FY 2019 Budget reflects a 2.4% revenue increase over FY 2018

\*Source is General Fund Revenue

## FY 2019 Proposed Expenditures by Type

Total of \$ 42,449,771



# Summary: County Population Change

## FY 2018 to FY 2019

<b>County</b>	<b>FY 2018</b>	<b>FY 2019</b>	<b>Change</b>
<b>Adams</b>	525,976	531,445	5,469
<b>Arapahoe</b>	668,604	666,264	(2,340)
<b>Douglas</b>	340,960	346,102	5,142
<b>Total</b>	1,535,540	1,543,811	8,271

Population Source: Colorado Department of Local Affairs

# Overview: FY 2019 Request for County General Funds

- County budget increase:
  - Population-based increase of 0.5% to match three-county population increase of 8,271 people \$ 55,581
  - Per-capita rate increase of 1.8%, or \$0.12, from \$6.72 in FY18 to \$6.84 in FY19 \$ 185,257
  - Total County budget increase \$ 240,838



# Summary: Proposed FY 2019 County Appropriation

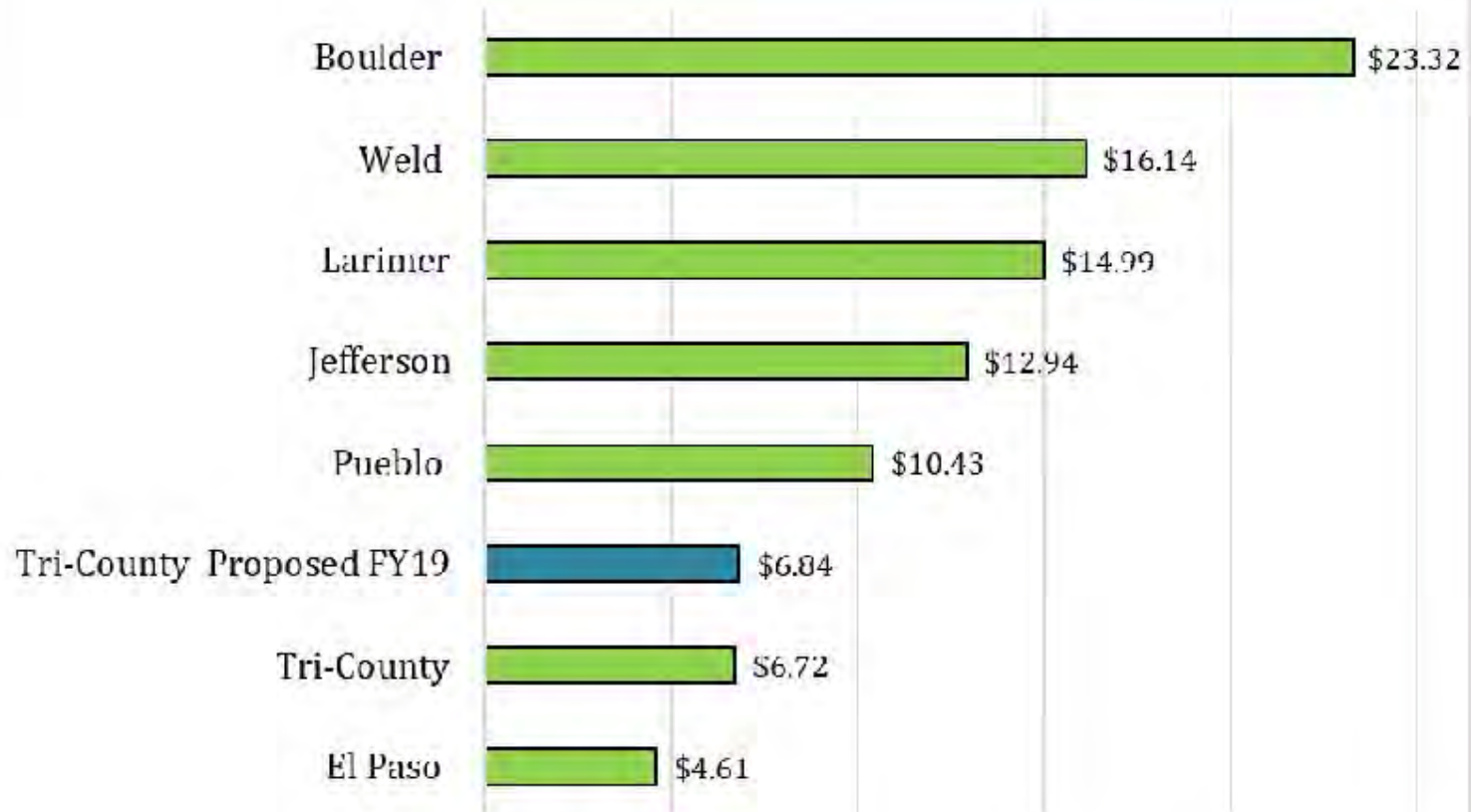
<b>County</b>	<b>FY 2018 Adopted</b>	<b>FY 2019 Proposed</b>	<b>Change</b>
<b>Adams</b>	\$ 3,534,559	\$ 3,635,084	\$ 100,525
<b>Arapahoe</b>	\$ 4,493,019	\$ 4,557,245	\$ 64,226
<b>Douglas</b>	\$ 2,291,251	\$ 2,367,338	\$ 76,087
<b>Total</b>	\$ 10,318,829	\$ 10,559,667	\$ 240,838



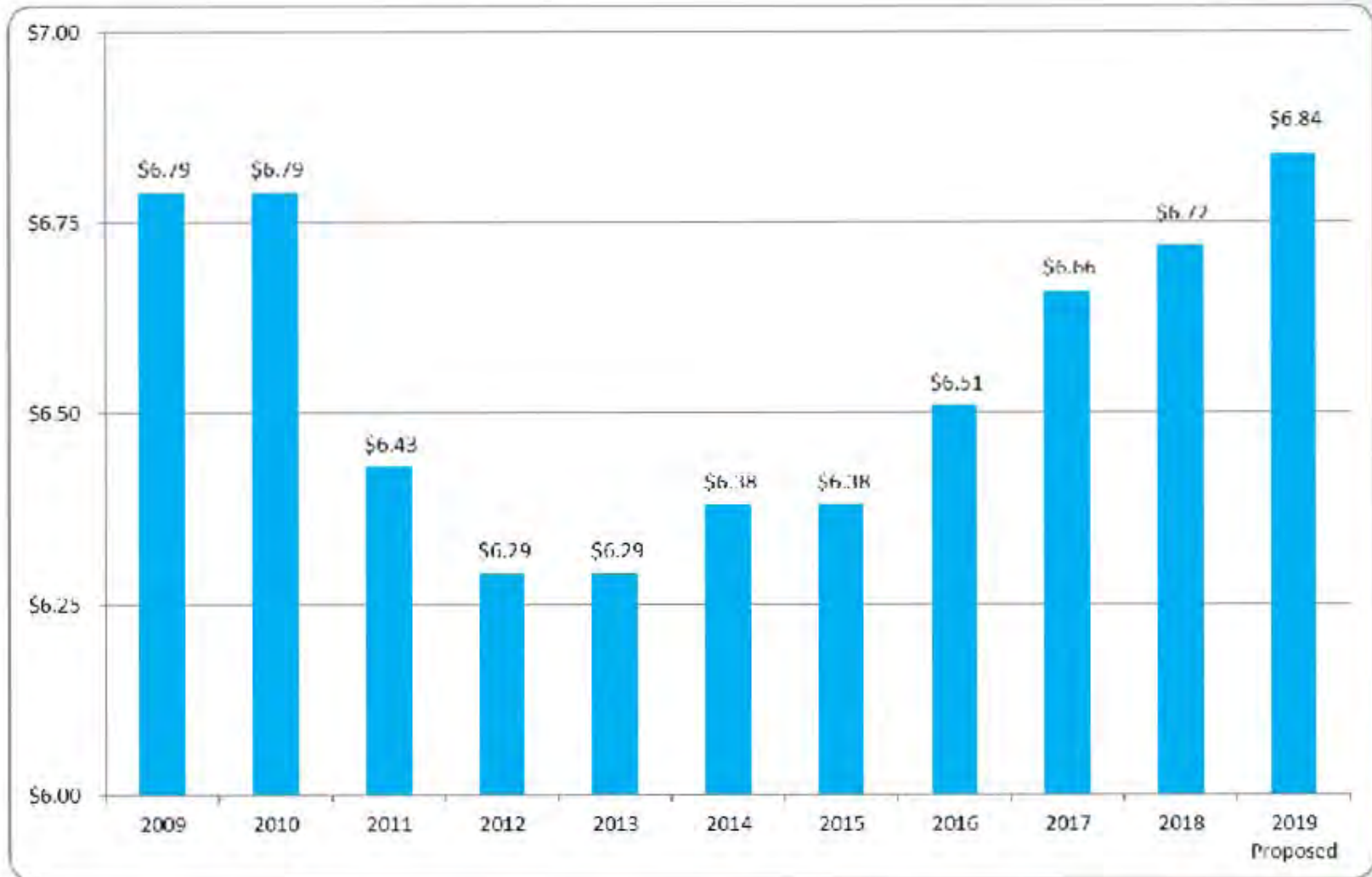
# Summary: Proposed FY 2019 County Appropriation Detail

<u>County</u>	<u>Population Change</u>	<u>Per Capita Rate Change</u>	<u>Total Change</u>
<b>Adams</b>	\$ 36,751	\$ 63,774	\$ 100,525
<b>Arapahoe</b>	\$ (15,724)	\$ 79,950	\$ 64,226
<b>Douglas</b>	\$ 34,554	\$ 41,533	\$ 76,087
<b>Total</b>	\$ 55,581	\$ 185,257	\$ 240,838

# Per Capita Rates for Front Range Local Health Departments FY 2018



# TCHD Per Capita Rate History 2009 - 2019



# Proposed Use of New FY19 County General Funds

- Salary merit pool increase for General Fund-supported employees (3.5%) \$ 124,077
- Informatics Project Manager (salary, fringe) \$ 105,019
- **TOTAL** \$ 229,096

# Rationale Regarding Requests for Increased County Funding: Salary Merit Pool Increase

- TCHD wants to maintain competitive salaries and benefits to recruit and retain optimal workforce in current economic climate
- Colorado has one of the lowest unemployment rates in U.S. (2.8%)
- High cost of turnover (e.g., recruiting and training new employees estimated by Society for Human Resources to cost \$20-\$30,000 per employee)
- In 2017 TCHD lost 20 employees because they found higher paying jobs (est. turnover cost \$400,000—\$600,000)
- A 3.5% proposed TCHD salary increase aligns with proposed county salary increases

# Increasing Complexity TCHD Software Backbone

- TCHD increasingly reliant on software systems for efficient/effective operations
  - 11 major systems ranging in complexity from 5k to 1+m records (e.g., EH, Nursing EHR, ArcGIS Mapping)
  - 8 major conversions/expansions planned over next 4 yrs.
- Software increasing faster than personnel or rent costs
  - Additional staff/licenses
  - New/updated applications to enhance efficiency
  - 2012-19: 262% increase (37%/yr.)
- Inefficient roll-out & management
  - Has resulted in suboptimal performance
  - Could result in lost data
  - Both cause wasted staff time/service delivery impact

Total Annual Software Expenses		
Year	Expense	Change from Prior Year
2012	\$ 308,606	
2013	\$ 377,181	22.2%
2014	\$ 514,048	36.3%
2015	\$ 646,218	25.7%
2016	\$ 401,487	-37.9%
2017	\$ 337,547	-15.9%
2018	\$ 641,170	89.9%
2019	\$ 1,124,250	75.3%

# Information Management Consultation

- 3 consultants considered to do needs assessment on TCHD informatics (information management)
- Slalom Consulting selected to:
  - Identify required informatics capabilities based on future-state needs – 2 areas of focus: *structure and capacity*
  - Develop a high-level roadmap to guide strategic investments in people, process, technology, and data
- Recommendations:
  - Modify structure to better align informatics within the agency
  - Increase capacity to provide better collaboration, guidance, governance, support and project implementation
    - Chief Information Officer
    - Informatics Project Manager

# Rationale Regarding Informatics Project Manager Position

- TCHD Informatics increasingly involved in organizational operations
- Recent informatics consultation (Slalom) identified several critical needs:
  - Recent/current
    - Software vendor interactions
    - Selection and implementation new software (e.g., new EHR)
    - Data integration needs (e.g., payroll and HRIS)
    - Licensing and updates
  - Emerging
    - Database management (e.g., legacy systems at risk of data loss)
    - Data quality assurance
- Recommended solution: Informatics Project Manager
- Expected outcome
  - More efficient and cost-effective identification of software solutions
  - Less waste (staff time)
  - Less potential for ineffective software applications, lost data
  - More effective services (e.g., clients of Nursing & EH programs)
  - More effective collaboration with county information management staff



# Key Informatics Functions at TCHD

DATA MANAGEMENT	APPLICATIONS MANAGEMENT	TECHNOLOGY (INFRASTRUCTURE) MANAGEMENT
	<i>Gap Analysis</i>	
Informatics Data Analytics: Business Intelligence, Data Mining, Data Mapping, Data Reports	Software Applications: Quality Standards, Project Management, Data Warehouse, Data Integration, Data Sharing, Communication between Data and Technology	Information Systems: Hardware, Network, System Security
<i>Recent achievement</i> NACCHO Model Practice Award - TCHD Opiate Mapping project	Cross Functional Objective - Project Management External Stakeholders - Data Exchange and/or Interface Rocky Mountain Arsenal Database Essence Database CDC Lead Poisoning Informatics COVIS Vital Records Database Paycor Cloud Program	<i>Recent achievement</i> NACCHO Promising Practice Award - TCHD Public Health Cybersecurity
	Internal Users - Operational Program Applications Licensing, Upgrades, HIPPA compliance, Best Practices in Applications Decade - upgrade to Acela Insight - upgrade to MyInsight Financial Systems assessment -10+ years old Civic Plus Microsoft Suites Zoom meeting	

# Consequences Without Budget Increase

Category	Amount	Consequence
Merit increase 3.5%	\$ 124k	<ul style="list-style-type: none"><li>● Less competitive salaries risk high employee turnover in tight labor market, increased hiring and training costs, service delays &amp; customer service impacts</li></ul>
Informatics Project Manager	\$ 105k	<ul style="list-style-type: none"><li>● Less cost-effective implementation &amp; use of software for data management</li><li>● Potential waste and duplication</li><li>● Reduced employee and program productivity, customer satisfaction</li></ul>

# Summary: Looking Ahead

- TCHD has well-recognized track record in provision of core public health services
  - Evidenced by 21 NACCHO Model Practice awards
  - Enhanced by recent Public Health Accreditation
- New Public Health Improvement Plan and Strategic Plan will allow us to continue to
  - Strengthen core services
  - Improve health of our communities by strengthening foundational capacities and prioritizing key population health issues
- Our county governments will continue to be key partners as we seek to maximize our impact

# Questions

# Efficiencies in TCHD Operations

***Total estimated efficiencies savings: (\$215,000)***

## ***Complete List***

- Facilities and Purchasing (\$91k)
  - Consolidated ordering to capitalize on quantity discounts
  - Minimize cost for large scale office moves – no OT
  - Implement GPS tracking for improved courier routing
- Information Technology (\$48k)
  - TCHD agency-wide copier replacement
  - Cell phone rate plan change
  - Replacing outdated internet circuits

# Efficiencies in TCHD Operations

## *List Continued*

- Accounting, Financial Services & Vital Records (\$45k)
  - Automate employee and vendor payment processes
  - Automate CORA Requests
  - Employee direct deposit conversion, eliminate manual checks
  - Eliminate duplication in Medicaid forms
  - Eliminate manual data entry by automating cash drawer transactions and printing costs
  - Automated answering service with menu options
  - Paperwork reduction from facsimile to e-mail process
  - Eliminate paper costs – use single order forms

# Efficiencies in TCHD Operations

## *List Continued*

- Emergency Preparedness and Response (\$20k)
  - Cost reduction - free resource of the TCHD Emergency Notification System
  - Global Meet Webinar system provides timely training for emergency preparedness (Ebola update, Zika webinar)
  - Health Alert Network (HAN) electronically posted on website reducing paper costs
- Human Resources (\$11k)
  - New Employee Assistance Program
  - Automated system for FSA and open enrollment
  - Streamlined Signature Authority on HR actions