FAIRNESS AND CONSISTENCY ARE KEY TO THE OFFICE OF PROGRAM INTEGRITY

Doing the right thing and exercising fairness and consistency are principles upon which the Office of Program Integrity, abbreviated as OPI, operates as an independent appraisal role vital to ADPH operations.

The office serves the State Health Officer by providing the following assurances:

- Integrity of the department’s financial systems
- Compliance with federal audit requirements
- Compliance with applicable state laws and regulations

OPI also serves as consultant for the programs, services, and functions of the department.

Debra Thrash, who holds the designations of both C.P.A., Certified Public Accountant, and C.I.A., Certified Internal Auditor, has directed the office since April 1999. Reflecting on her career with ADPH, she said, “I thoroughly love what I do, and I have been blessed to use my accounting degree and to be in this department. Throughout the years, we have had the opportunity to help identify weaknesses and problems and to make recommendations to foster changes.”

The audits identified errors with the application of departmental procedures, manual processes prone to errors, and redundancies in data that would lead to discrepancies. Improvements in information technology have allowed system development by the Bureau of Information Technology to address findings and recommendations from OPI, such as the electronic day sheet, HEART, HEART-II, TimeTrac, and the electronic HIPAA Log.

Formerly, the department used a manual day sheet system for fee collection and reporting. Audits found there were problems with the legibility of the handwritten reports, and the E-Day Sheet system has not only helped address legibility, the system sends an automated report to Financial Services. HEART, HEART-II, and TimeTrac combine weekly leave usage and cost accounting. These systems have helped from an auditing standpoint by eliminating manual calculations and by reducing the need for employees to input redundant information in multiple locations, which reduces reporting errors. Finally, the electronic HIPAA Log was developed to track and monitor the timely completion of documents.

When Ms. Thrash joined ADPH 33 years ago, the office was then known as the Office of Internal Audit. The name was changed to the Office of Program Integrity in the mid-1990s to better reflect the breadth of services provided. During that time, OPI had financial/administrative auditing staff that is customary with an internal audit shop, but also had nursing staff who evaluated medical records for quality of care. While the nursing component is no longer part of OPI’s routine auditing procedures, the scope of services has continued to grow.

OPI continues to include general audit and review services in the areas of internal controls, revenue and receipts, expenditures, property controls, and personnel. The priority remains federal program audits. The federal program audits include an examination of cost accounting, WIC, family planning, maternal and child health, immunizations, case management services, and remote patient monitoring. OPI also performs audits within the state level bureaus and divisions as staffing and time permit.

Subrecipient monitoring

OPI has been conducting subrecipient monitoring reviews for decades, and recently OPI expanded efforts in this area. Subrecipients are agencies with which ADPH has partnered to perform services using grant funds. OPI is not “the” subrecipient monitoring program for the department. The program managers have the primary contact with subrecipients, and program managers are responsible for their respective contracts and agreements.

OPI does have a role to help ensure ADPH is prepared for external audit. Ms. Thrash said, “We as an agency have to make sure we’re in compliance, and OPI will expand our

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SHARING POSITIVE LESSONS FROM COVID EXPERIENCES

As Noah and Karin Hopkins reflect on last year, they see bad and good consequences from their bout with COVID in October 2022. Together for nearly 40 years, they are each other’s support system. She takes care of him when he is not well, and he does the same for her. But ailing together left them helpless until an angel of kindness stepped in. That angel was Jan Fountain, a close friend who brought care packages to the couple every day.

Their COVID experience started when they tested at home and registered positive. After several days of isolation, they went to the Macon County Health Department and sat in their car as a nurse administered a follow-up COVID test. They were crushed when that test was also positive. However, this is when they found out about COVID relief services offered by the Alabama Department of Public Health (ADPH).

They were shocked yet grateful to learn about the Epidemiology and Laboratory Capacity for Prevention and Control of Infectious Diseases, which gets abbreviated to the ELC Program, according to Erongia Mahone.

She is a social worker and public health supervisor assigned to the East Central District, encompassing 11 counties, including Macon County. Ms. Mahone explained that ELC provides “wraparound services,” such as shopping and home delivery of groceries and other items, including cleaning and laundry supplies. And if people cannot safely quarantine at home, they can stay in a hotel for up to 5 days. The grocery store purchases and hotel bill are covered through an arrangement involving the state health department and United Way.

Anyone can tap into ELC after they have a confirmed case of COVID followed by a social worker’s assessment. The patient then has to call 211 and either the same day or within 24 hours, the delivery will be on their porch. Ms. Mahone says she typically gets this reaction from people concerning ELC, “Why am I just now hearing about this?” She says there is no budget to help spread the word, so her office distributes a flier at public events and in medical offices.

When Jan Fountain, the woman who had been their Good Samaritan, contracted COVID, the Hopkins helped her navigate the ELC process and she also welcomed the helping hand. “If a person has COVID and is able to get nutritional and personal items delivered to them with just a phone call and a few minutes of their time, it helps to ease some of the stress of being isolated.” Fountain is now an advocate for the program, saying, “I have shared this information with others who have COVID and they too were very appreciative.”

ADPH received multiple grant awards from the Centers for Disease Control and Prevention through the ELC program that totaled more than $500 million for response efforts associated with COVID-19 and other emerging infectious diseases.

By KARIN HOPKINS
responsibilities to make sure the department is complying and will assist bureaus and divisions to make sure they’re monitoring subrecipients appropriately. When we accept federal money, strings are attached, and the biggest requirement is documentation.”

Subrecipient monitoring can include many different activities. The key is to document how the activity relates to the award, and that the purpose of the activity was to monitor the subrecipient. For example, a program manager who conducts a Webex meeting or call with a subrecipient and asks how things are going is generally inquiring about the project’s goals and asking about the progress towards achieving the goals.

“This is monitoring,” Ms. Thrash said. “Document the meeting as a monitoring activity. On the fiscal side, expenditures must be reasonable, necessary, allowable, and allocable. They must be supported, and within the budget. Monitoring fiscal activities requires more than sending invoices to Finance for payment.” Other documentation of subrecipient monitoring may include the receipt of quarterly reports and attendee registration sheets to verify trainings were held.

The current focus is on auditing COVID-19 expenditures and to ensure compliance with 2CFR (Code of Federal Regulations) 200 Uniform Guidance which addresses all three phases of the grant life cycle: pre-award, during the award, and award close-out. To facilitate, OPI staff will offer technical assistance and provide a report to identify deficiencies and areas for improvement. OPI will then help managers work through a corrective solution. Guidelines are being created to clarify the 2CFR 200 requirements.

Challenges of OPI
One of the challenges of OPI is correctly evaluating the differing fees charged by county health departments because each county’s fees for certain services vary based on local legislation or a local fee bill. Vital Statistics fees, on the other hand, are uniform statewide because they are based on state law. The audit of revenues and receipts would be much easier if all counties charged the same fees.

OPI, like other offices, also faces staffing challenges. Once staffed with auditors in each of the public health districts, OPI now has two auditors who conduct audits statewide. There seem to be two main issues preventing growth in staffing. First, there is not a specific “auditor” register; OPI selects auditors from the “accountant” employment register provided by the State Personnel Department. Ms. Thrash dispelled a common belief that there is little difference between accounting and auditing. She explained, “Accounting processes financial transactions and generates reports and auditing evaluates those reports and the processes used to prepare them. An accountant may deal with one area of accounting, for example, receivables or payables; but in auditing we tend to touch all of them. If we don’t understand a particular area, we have to dig for it, so we must be ‘jacks of all trades.’ Thankfully, there are resources and people we can turn to in the department.” Second, the registers have very few applicants. “It has been our experience that only about one-third to one-half of the applicants request an interview for an auditing position that requires travel.”

When asked if the department had ever experienced any serious issues that were identified through audits, Ms. Thrash acknowledged there had been a few instances where employees were embezzling or misappropriating funds. She explained, there is a recognized “fraud triangle” whose components are “a perceived, unshareable financial need, perceived opportunity to commit fraud, and rationalization of committing the fraud.” Back in the 1990s, after receiving a report from the area staff that something was wrong, OPI conducted an audit to substantiate the claim. After the investigation, management presented the information to the employee and the employee was given the opportunity to resign and make restitution. In another case, several years later, after the auditor arrived, the auditor noticed that the receipts and deposit amounts did not match. The auditor contacted Ms. Thrash and was told to make inquiries. When asked, curiously, the employee said, “I didn’t expect you back so soon.” This employee was also embezzling money, and this case was turned over to the local district attorney for prosecution.

When asked about the difference between how the two employees were treated, she said, “I would have turned the first one over to the local district attorney.” She went on to explain, “My training has taught me, supervisors are often willing to let employees suspected of corruption go on to other positions; to free themselves up; and to not be bothered by the situation, they pass them on. My belief is that we must deal with it when it is discovered. For the employees who may have that “perceived, unshareable financial need,” I do have compassion. That’s what the Employee Assistance Program is for. Actions have consequences. And, not acting when action is required is detrimental to the rest of the staff and to the department. It sends the wrong message.”

Fortunately, instances like these are few and far between. Most often, audits are routine and involve ordinary test procedures and communications with local staff. Auditors engage with the nursing, social work, and other staff to review documents and communications with local staff. Auditors engage with administrative staff to monitor county imprest accounts used to pay utilities to verify they are reconciled. OPI evaluates internal controls and proposes segregation of duties.

OPI recognizes county health departments are short-staffed and tries to be as minimally invasive as possible when conducting their audits. In the past, audits took 3 to 4 weeks to complete on-site. Now, the on-site time has been reduced to about 1 to 2 weeks with the remainder of the work conducted remotely from the base. This change has cut down on some expenses for travel.

Meet the expert OPI staff
Heading the office is Ms. Thrash, who joined ADPH after earning a B.S. degree in accounting from Troy State University. An Andalusia native, she and her husband have been married for continued on page 4
34 years, and together have three children and will soon have six grandchildren. A Christian who loves serving the Lord, she enjoys music and her role as music director at Catoma Baptist Church.

In August, the couple relocated from their long-time home in a Montgomery subdivision to a river home 4 miles down a dirt road in Lowndesboro. She said, “There is peace there. I enjoy the simpler things—family and faith. The Lord has blessed me.” A 5-year breast cancer survivor, she is a strong advocate for mammograms. “People rallied around me when I was diagnosed. One lady gave me a treat bag on my surgery day, so I also give treat bags to others when they go in for breast cancer surgery. I believe that every breast cancer journey is different.”

In addition to her everyday responsibilities, since February 2021 she has served on the Supervisory Committee of the Alabama State Employees Credit Union which oversees the financial affairs and strength of the credit union. As a committee member, she works with internal and external auditors to ensure that all rules and regulations are followed.

Ms. Thrash is very proud of her employees. The OPI deputy director is Scott Burbank, C.P.A., who formerly worked as chief financial officer with the much smaller Alabama Tourism Department. “He is transitioning well into Public Health and the many different programs we administer.” OPI currently employs two full-time auditors, based in Coffee and Russell counties. The auditors are very detail oriented. Leslie Smith has been with the office since 2001. “She handles any task I assign her,” Ms. Thrash said with pride. Newly hired Katherine Grantham previously worked as the finance officer at the local Department of Human Resources office in Russell County. “She, too, is transitioning well into the auditing world. I am confident she will have a long future with Public Health.”

Two retired state employees provide audit support: Former WIC Nutrition Director Denise (Pope) Collins, R.D.N., and former audit director of the Department of Human Resources Steve Burden. Another retiree, Angie Garnett, brings life to the office, Ms. Thrash said. She formerly served as office manager for the Autauga County Health Department. “The Retired State Employee positions have been a blessing to our OPI team. Each position brings a unique skillset providing support to the office.” Rounding out the staff is talented Administrative Support Assistant Ashley Price who recently transferred from the Department of Conservation and Natural Resources to OPI. “We are fortunate to have Ashley on board. I am encouraged she will do very well in OPI.”

When looking at the entire picture of OPI, Ms. Thrash wants to make sure the office is fair and consistent. “I don’t want to cite a county in one part of the state for something that doesn’t get mentioned in another. I’m in a unique position to be on both sides of the audit table. This is how I view this office. OPI audits are preparing bureaus, offices, and clinics to be audited by the external auditors. We recognize that OPI visits are not always popular, but it is far better for us to identify problems internally than to have an external auditor shine a spotlight on a deficiency. When we identify the issues first, it allows us to demonstrate that ADPH is being responsible and proactive with the resources we have been given.”

Shown, from left, are OPI team members Steve Burden, Katherine Grantham, Angie Garnett, Leslie Smith, Ashley Price, Debra Thrash, Denise Collins and Scott Burbank.
More than 100,000 people in the United States are waiting for an organ transplant which means a second chance they can live a healthier, more productive life. On average, 17 people die each day waiting for a transplant.

Legacy of Hope is Alabama’s federally designated, non-profit organ procurement organization which coordinates organ and tissue donation for transplant and research. Its stated mission and vision are to end the wait and suffering by shepherding the gift of life to those in need of organ and tissue transplants with its core values being compassion, hope, dedication, integrity, collaboration, and belonging.

For individuals with end-stage organ failure, organ transplantation may be their only option for health and life. This need aligns with the department’s mission to promote, protect, and improve Alabama’s health. The organization also encourages people to make healthy choices which may keep them from needing a transplant.

“It is our hope to alleviate the misconceptions that pervade the donation community. In partnership with the ADPH, this endeavor is paramount to alleviating the number of men, women and children waiting on a transplant,” Dr. LaToya Bishop, multicultural educator at Legacy of Hope, said.

Donor registration is the most effective way to save lives through donation and is a sign of support to those who continue to wait. Currently, 54 percent of the U.S. adult population are registered organ, eye and tissue donors with about 40 percent of licensed drivers registered in Alabama. Yet, the number of people in need of transplants continues to outpace the number of organs donated.

Flyers will soon be available at county health departments to provide organ donation information to the public. In addition, volunteer ambassadors are located throughout the state to share information about donation and how it has impacted their unique journeys.

For more information, contact LaToya R. Bishop Ph.D., M.P.H., Legacy of Hope, 421 Richard Arrington Blvd., Birmingham, AL 35233, e-mail LaToyaRBishop@legacyofhope.org or call (205) 516-8645.

District Medical Officer Dr. Wes Stubblefield was chosen as a member of the Region IV Public Health Training Center at Emory University’s Public Health and Primary Care Leadership Institute (PHPC-LI) cohort. Dr. Stubblefield competed with 95 other applicants to become one of only 36 PHPC-LI fellows from state, local and tribal health departments or FQHCs/ FQHC Look-Alikes in the eight states in the southeastern U.S.

All PHPC-LI fellows manage programs, supervise staff and/or have demonstrated leadership potential within their organization. According to Region IV Public Health Training Center’s Director, Moose Alperin, EdD, MPH, MCHES, “This year’s fellows are a remarkable group of leaders who are instrumental in leading public health efforts in the eight Southeastern states.”

The Region IV Public Health Training Center at Emory University launched the Public Health Leadership Institute in September 2019 in partnership with the J.W. Fanning Institute for Leadership Development at the University of Georgia to advance adaptive and strategic leadership skills among public health professionals.

In 2022, with a new cycle of funding and increased efforts to integrate public health with primary care to improve health equity and health outcomes in the communities within Region IV, the Leadership Institute was expanded to include emerging primary care leaders from FQHCs/FQHC Look-Alikes along with emerging public health leaders from local, state and tribal governmental health departments or organizations.

The Institute is an 8-month experience providing 40 contact hours of online and in-person interaction and peer consultation. Applications for the 2023-2024 cohort will be accepted in mid-2023.

Funded by the Health Resources and Services Administration (HRSA), the Region IV Public Health Training Center works to build the capacity of the public health workforce to meet national, state and local needs. The Region IV Public Health Training Center is one of 10 regional HRSA-funded training centers throughout the U.S. and a member of the national Public Health Training Center Network.
ASSISTANT DISTRICT ADMINISTRATOR SERVES AS ALABAMA STATE NURSES ASSOCIATION PRESIDENT

James Hardin, MSc, BSN, RN, NE-BC, assistant administrator of the East Central Public Health District, was installed as president of the Alabama State Nurses Association (ASNA) at the association’s House of Delegates on September 20.

His role leading the association is especially important to ADPH as the department employs approximately 750 nurses who provide family planning, child health, and preventive and treatment services for disease control. Hardin is careful to make sure in serving in the dual roles that there is nothing in the ASNA mission that conflicts with the ADPH mission.

“Nurses are the largest workforce in healthcare and continue to be the ‘Most Trusted Profession’ as noted by Gallup Polls,” explained Hardin in an article in the Alabama Nurse. “As a nurse, I always see situations with a clinical lens and how decisions impact patients. Most nurses do, and that is why patients trust us. As someone who also has to balance a budget, I recognize that almost all resources are finite. For there to be a sustainable balance of care and costs, nurses have to be at the decision-making tables of healthcare organizations, universities, and legislation. Participating in ASNA is one way to meet that goal.”

After serving in the U.S. Air Force and Air National Guard as a medic, Hardin graduated from Troy State School of Nursing with an ASN in 1994. He then completed a BSN from Jacksonville State University. Hardin worked primarily critical care, rehabilitation, and home health early in his nursing career, before moving into educational and administrative roles. Hardin completed his Master of Science in International Management at the University of Liverpool with a concentration in Management of Health Systems.

During his ADPH tenure, Hardin has served as the East Central District Home Care Services Nurse Administrator and Response Team Director prior to moving into the Assistant District Administrator role. During the COVID pandemic, he has served patients directly through vaccine and testing clinics while maintaining an administrative role and perspective.

RETIRING CENTER FOR HEALTH STATISTICS EMPLOYEES HONORED

Debra Starks, left, and Kathie Cleckler are shown with State Health Officer Dr. Scott Harris at a retirement reception December 13. Coworkers in the Center for Health Statistics hosted the celebration. Ms. Starks retired with more than 32 years of service and Ms. Clecker had more than 29 years of state service.
INNOVATIVE PRACTICE SUGGESTION RESULTS IN AWARD FOR JANENE WOODS

Many variables are involved when nurses administer COVID-19 vaccines—vaccine product manufacturers, dosages, dilutions, time intervals since last vaccination, expiration dates, and instructions for usage. Each vaccine has different requirements and instructions. In the beginning of the pandemic, COVID-19 vaccine doses changed very frequently, so it could have been very easy for the registered nurse giving shots to multiple people, of different ages, with different vaccines, to make errors.

That’s why Infection Prevention and Control Nurse Janene Woods of the Tuscaloosa County Health Department wanted to help clear confusion and, importantly, prevent medication errors. Her solution was to design cards including vaccine name, proper age, proper dosage, proper dilution, and correct cap and vial color. If there were more than one age of patient or more than one type of vaccine to be given, the cards were to help keep the vaccines separated.

Janene’s supervisor was impressed with the color-coded cards in large type and sent them the Central Office where they were duplicated on card stock and distributed for statewide use.

“Although it is hard to put a monetary amount of cost savings to the state on this, I do not hesitate to say it saved many, many thousands of dollars by limiting medication errors,” wrote Assistant District Administrator Renee Cole. “Medication errors are not only monetarily costly, but can be costly in terms of loss of trust in the healthcare system.”

State Health Officer Dr. Scott Harris submitted the vaccine administration card suggestion to the State Employees Suggestion Incentive Program and its board chose her innovative idea for a special merit award.

Ms. Woods said, “I am honored to receive this award. When the pandemic began, I was fortunate enough to be chosen to be on the Infection and Prevention and Control Strike team. These past 2 years have been very challenging, yet unbelievably rewarding. Watching every employee of the West Central District rise to the challenge to serve our community has made me even more proud to be a part of this amazing team and the Alabama Department of Public Health.”

On January 25, Ms. Woods’ coworkers in Tuscaloosa surprised her with the presentation of both a monetary award from the State Personnel Department and a reception, complete with cake.

VACCINE SAFETY DISCUSSED

Commissioner Jane Elizabeth Burdeshaw of the Alabama Department of Rehabilitation Services and Ryan Alford of Tuscaloosa meet with State Health Officer Dr. Scott Harris to discuss the protection provided by COVID-19 vaccines and boosters.
In 2018, the Alabama Public Health Training Network (ALPHTN) was funded to be a community-based training (CBT) partner with the Region IV Public Health Training Center (PHTC) headquartered at the Rollins School of Public Health, Emory University in Atlanta, Georgia. Ryan Easterling, director of the Health Media and Communications Division, leads Region IV PHTC efforts for ADPH, along with Ken Harrison, workforce development director with the Office of Human Resources. The University of Alabama at Birmingham (UAB) School of Public Health plays an integral role in the network as the lead evaluation unit for the region.

The mission of the Region IV Public Health Training Center (PHTC) is to strengthen competence of the current and future public health workforce in HHS Region IV, introduce public health and health profession students to the value of working in local communities and medically underserved areas, and develop a learning community within the Region IV public health.

Funded by the Health Resources and Services Administration (HRSA), the Region IV PHTC network includes the central office at Emory, seven CBTs and three technical assistance providers including UAB. This network works collectively to improve the ability of the public health workforce to meet national, state and local needs.

The Region IV PHTC offers training on strategic public health skills, such as leadership and communication, as well as priority health concerns which include the following: cultural competency, data analytics, leadership and management, persuasive communication, public health preparedness and emerging infectious diseases. The ADPH works with both Emory and UAB to coordinate a student field placement program that aims to increase the number of skilled public health students working on projects in rural and/or underserved communities across Alabama.

The Region IV PHTC serves governmental public health professionals in the eight southeastern states: Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina and Tennessee. The R-IV PHTC is one of 10 regional HRSA-funded PHTCs throughout the U.S. and a member of the national Public Health Learning Network. For more information about the trainings and programs offered by the Region IV Public Health Training Center and its CBT partners, please visit the Region IV website at r4phtc.org.

Members of the Region IV PHTC Steering Committee represent a diversity of perspectives throughout public health across HHS Region IV, including local, state and federal public health and academia. Alabama participants were Ryan Easterling, Matt Fifolt, Ken Harrison, Elena Kidd and Becky Reamey.
Public health educators staffed a booth promoting immunization at the girls Alabama High School Athletic Association State Basketball Class 2A Girls Championship Game in Birmingham March 3. Pictured from left are Tanita Crowell of the East Central and West Central districts, Savannah Robinson of the Mobile, Southeast and Southwestern districts, with fan Chief Medical Officer Dr. Karen Landers.

Jarrett Johnson enjoyed receiving a backpack and other immunization-related "prizes" at the basketball championship game.

Wellness Nurse Candice Smith administers an influenza shot to Amanda Griffith for the Flu Shot Friday promotion at the Medical Association of the State of Alabama in Montgomery. The annual occasion encourages flu vaccination for ages 6 months and older.
The following departmental employees have retired recently:

**NOVEMBER**
- James Chalmers
  Northern Public Health District

**DECEMBER**
- Sharon Baker
  Northeastern Public Health District

**JANUARY**
- Malcolm Givhan
  Southwestern Public Health District
- Sandra King
  Children’s Health Insurance Program
- Teresa Lee
  West Central Public Health District
- Deborah Lemons
  Southwestern Public Health District
- Johnny Lykes
  East Central Public Health District
- Robin Montgomery
  Northern Public Health District
- Emma Morrow
  West Central Public Health District
- Jane Neill
  West Central Public Health District
- Lettie Powell
  West Central Public Health District STD
- Tamatha Ricks
  Southwestern Public Health District

**FEBRUARY**
- Nona Smith
  Family Health Services
- Nikki Turner
  East Central Public Health District
- Carol Brown
  Northeastern Public Health District
- Debra Capistran
  Facilities Management
- Rosemary Coggins
  Health Provider Standards
- Maleia Lafleur
  Southeastern Public Health District
- Michelle Pugh
  Southwestern Public Health District

**MARCH**
- Kenneth Blakely
  East Central Public Health District
- Kathy Brown
  Southeastern Public Health District
- Candelyn Harkins
  East Central Public Health District
- Robbie Stubbs
  Northeastern Public Health District

**CALENDAR**

**MARCH 30**
3- 3:30 P.M.
(CENTRAL TIME)
ADPH Statewide Staff Meeting
For more information, contact Health Media and Communications Division, (334) 206-5618.

**APRIL 20**
12 NOON – 1 P.M.
(CENTRAL TIME)
Bronchopulmonary Dysplasia Training: Nobody Puts Baby in the Corner
For more information, contact Health Media and Communications Division, (334) 206-5618.

**MAY 3**
12 NOON - 1 P.M.
(CENTRAL TIME)
Long-COVID Training
For more information, contact Health Media and Communications Division, (334) 206-5618.

**CAKE WALK BENEFIT**

Employees in the RSA Tower put their culinary skills on display to provide baked goods for a cake walk. Proceeds from the event benefitted the State Combined Campaign.
A celebratory roast and luncheon at the RSA Activity Center on February 22 honored Sherry Bradley upon her retirement after more than 45 years of service to the Alabama Department of Public Health.

A Sanitary Science degree graduate of Troy State University, she holds an M.P.A. degree from Auburn University at Montgomery. First employed as an entry-level Public Health Sanitarian in September 1977, she was assigned to work in Bullock County. She went on to employment with the Autauga, Lowndes and Elmore county health departments before promotions to the Central Office and advancements to assistant bureau director and bureau director.

In the past few years, Ms. Bradley expanded her focus to make effective and reliable wastewater disposal available to Alabama residents, especially people living in homes in the Black Belt, which have straight-piped, failing or nonexistent sewage disposal systems. The clay-like Black Belt soil makes it hard for filtration of water in these soils. Another significant obstacle is that many sewage disposal systems cost more than the value of the homes.

Addressing these needs is a challenge, especially with gaining the trust of skeptical residents. Local community leader Perman Hardy has assisted Ms. Bradley in the effort that created the nonprofit Black Belt Unincorporated Wastewater Program (BBUWP) in 2018. BBUWP’s mission is building a sanitation infrastructure for low-income residents. In addition to knocking on doors and speaking at community meetings, she held many meetings with industry partners and applied for grants. Progress has been made, and her activities have resulted in international attention and acclaim, including an appearance on the CBS News program 60 Minutes.

Among supporters wishing her well in retirement from ADPH was Ms. Hardy who said, “Sherry is a godsend for Lowndes County, and without her none of the progress that’s been made would have been possible.”

At the retirement celebration, hundreds of colleagues past and present, friends, and family members joined as speakers expressed their admiration for “The Woman, The Myth, The Legend.” Entertainment included a song-and-dance presentation by James Congleton and The Star Lights and a fun “Get to Know Sherry Bradley” game.

Among Ms. Bradley’s recent recognitions are the 2022 IWSH Award and selection as the Alabama Executive Branch Employee of the Year. IWSH is the International Water, Sanitation, and Hygiene Foundation which honored her for her exceptional contributions to IWSH programs seeking to bring clean water and safe, reliable sanitation to those most in need. The State Personnel Department designated her as the Alabama Executive Branch Employee of the Year. This month Ms. Bradley was inducted into the 2023 Class of Alabama Women Who Shape the State.

Ron Dawsey, M.P.H., the bureau’s former deputy director, was promoted to replace Ms. Bradley effective March 1. A 35-year veteran of the Bureau of Environmental Services in the Central Office, he previously served as an environmentalist at the Henry County Health Department for 10 years. In announcing his appointment, Chief of Staff Michele Jones e-mailed, “Ron has many years of experience in the environmental field and a wealth of institutional knowledge.”
The East Central District Disease Intervention Specialist Team assisted with a 6:52 Project Foundation testing and vaccination clinic in Montgomery November 19. Pictured from left are Fred Coley, Anthony Merriweather, Carlavia Edwards, Jennifer Johnson and Joseph Rightmyer.
Reducing infections from patient to patient and from nurse to patient is the goal of an initiative to provide patient care kits for home health patients statewide. The Bureau of Home and Community Services (BHCS) received funding designated for patient infection control measures. Portions of the funding were used to purchase personal hygiene items for the department’s Home Health and Remote Patient Monitoring program patients.

Choona Lang, director of the Bureau of Home and Community Services, said, “Our Business Manager, Mrs. Wanakee Williams, did the required research for the requested items from our Homecare field staff. After receiving a very expensive assembly quote for our 5,100 personal hygiene items, Team BHCS came up with plan B which included coordinating two internal teams (Team A and B) to handle this project. Team A and B, supported by ADPH warehouse hard working staff, completed this project in 10 days.

“I am very proud of the willingness of our team members who worked in a spirit of excellence to organize, prep and pack the patient care items in HH-labeled drawstring bags. It was more than our initial expectations, but Team BHCS made it happen with smiles and plenty of laughter. Actually, it became a friendly competition between teams A and B. They are all winners to me. Our team and the warehouse team should be commended for a job well done!”

Each of the 5,100 patient bags includes the following items: nail clippers, nail file, wash basin, no touch thermometer, 2 bath towels, 2 wash cloths, inflatable shampoo bowl with hand pump, walker bag, 7-day pill planner and electric razor set.

In addition to helping the patients and their families, this effort is much appreciated by home health staff who often dip into their own pockets to pay for needed items for their patients. The kits were provided with funding from the Federal Medical Assistance Percentage Grant to improve infection control during home health visits.

Warehouse staff who showed great hospitality to the teams, managed the flow of pallets and materials, and the distribution of kits were Kenneth Edwards, Andra Jackson, Ali Padgett and Iril Washington.

Participating office staff were Lacy Campbell, Bettie Dixon, Gregory Dodd, Charise Dudley, Minerva Flores, Adriana Gray, Dorothy Hall, Jacqueline Howard, Dr. Lang, Juvonia McCain, Cassandra Miles, Shenita Morris, Courtney Murphy, Alexandria Taylor, Jemekia Walker-Brown, Ellen Wells and Wanakee Williams.

One patient from the Northern Public Health District has already sent a handwritten thank you note highly praising the staff and stating, “Thank you for being a blessing to me. I loved it all.”

Skilled nursing, physical therapy, medical social work and home health aide services are available statewide through the department’s Medicare-certified home health agencies.

Job well done! That was the consensus of home health patients and staff alike.
State Health Officer Dr. Scott Harris greeted an Office of Health Equity and Minority Health (OHEMH) meeting January 20 by acknowledging the reality that where one lives or how far a person or their parents went in school should not determine how long one lives, and everyone should have the opportunity to be healthy.

The face-to-face training session was held in Montgomery for sub-grantees of the Centers for Disease Control and Prevention (CDC) Health Disparity Grant who hail from higher risk and underserved communities throughout the state. This session provided an opportunity for colleagues to network as well as receive updates on COVID-19, a Medicare/Medicaid Advantage option, and nutrition and physical activity plans. They were also provided important information about new requirements including preapprovals for purchases and other reporting.

Initiatives by sub-grantees to address disparities will help Alabama build healthier communities, and information is key in developing strategies. Dr. Harris said in addressing the group, “We need to track disparities to target resources of where we need to go with data collection.”

At the meeting, Dr. Wes Stubblefield, medical officer for the Northern and Northeastern public health districts, discussed the latest data on COVID-19. He noted that COVID-19 deaths peaked around the first of 2022, but “it doesn’t escape us that there are still many people who are ill with COVID-19.” When he is asked about concerns that vaccines are inadequately tested, he counters that there is more data on COVID-19 vaccines than any vaccines in history. “Science is an activity in which one tests hypotheses and assumptions, and we continue to learn more over time.”

Another challenge facing state residents is that 36 Alabama counties have more than 40 percent obesity in adults, Molly Killman, director of the Nutrition and Physical Activity Division, said in speaking with the subgrantees. The Alabama Wellness Alliance, formerly known as the Alabama Obesity Task Force, is a volunteer membership organization that continues to support a healthier Alabama through collaborations and initiatives that cross sectors and focus on improving health outcomes. Initiatives involve participation with Alabama municipalities “in places where Alabamians live, learn, work, play and worship.” Tashantia Stewart, director of Grants and Contracts, Bureau of Financial Services, stressed the importance of subgrantees getting preapproval for travel requests, and Dr. Bernadette Chapple spoke on WebEx about required evaluations and reports.

The re-envisioned Office of Minority Health is the now the OHEMH, which was established in 2021 and is located in the Office of Governmental Affairs and Community Relations. The OHEMH, with stakeholder input, has developed a 2-year blueprint for elevating health equity as a priority in Alabama. The office’s 2021-2023 Strategic Plan mirrors the mission and vision of the agency through an equity lens.

Goals are as follows:

Goal 1: Establish common language that ADPH staff and partners can use when communicating health equity strategies, applying an “equity lens” in daily work activities, and operationalizing health equity-specific public health best practices throughout the Agency.

Goal 2: Use data effectively to plan, monitor, and measure the equity impact of ADPH policies and programs, with a specific focus on the social determinants of health. This goal will be achieved in collaboration with the new Office of Informatics and Data and Analytics.

Goal 3: Utilize external partnerships established through the CDC Health Disparity Grant Sub-recipients to build stakeholder capacity, advise on equity-focused work and establish common language that partners can use when recommending health equity strategies.

OFFICE OF HEALTH EQUITY AND MINORITY HEALTH WORKS IN PARTNERSHIP WITH COMMUNITY STAKEHOLDERS

Shown are partners Paula Cheatwood, Executive Director, Southeast Alabama Area Health Education Center; Carolyn Bern, Director, Governmental Affairs and Community Relations; and Dr. Arturo Menefee, Director of Leadership Development, University of Alabama Center for Economic Development.
Goal 4: Work to attain the full potential of health and well-being of Alabama’s citizenry as a component of decision-making and policy formulation across all sectors.

Goal 5: Report annually on progress toward eliminating health disparities, achieving health equity, and attaining health literacy for the improvement of the health and well-being of all Alabamians.

United Healthcare representative Beverly Rudolph and OHEMH director Latisha Kennebrew speak following Ms. Rudolph’s presentation on her company’s Part C Medicare Advantage plan.

Naughty and nice children of ADPH employees were excited to convey their Christmas wishes to jolly bearded Santa and Mrs. Claus on December 21. Santa’s special helpers on hand at the RSA Tower were Dr. Gary Pugh, Medical Officer, Family Health Services, and his wife Kathi. Photographs of the children on the fun day with Santa were taken, and donations were contributed to each family’s charities of choice.

HENRY COUNTY STAFF GIVE GENTAMENTLY TO NURSING HOME RESIDENTS

The Henry County Health Department donated gifts to the Henry County Nursing Home residents for Christmas. Staff pictured from left are Deborah Coxson, Rachael Key, Ronald Berry, Mary Washington and Tracy Brannon. Not pictured are Dawn Bysiek and Sierra Fischer.
MOM USES COUNT THE KICKS, SAVES HER BABY’S LIFE

Shamari Cooke never expected that downloading a free app called Count the Kicks to track her baby’s movements during pregnancy would help save her daughter’s life. During pregnancy, Shamari learned about the importance of kick counting from her obstetrician/gynecologist, who suggested she use the Count the Kicks app to monitor her baby’s well-being. The Centers for Disease Control and Prevention (CDC) lists a change in baby’s movements as one of its 15 urgent maternal warning signs.

“My OB was insistent that I count kicks every day in the third trimester to help me track my daughter’s health. I created my kick counting routine based on when I noticed that my daughter was most active. The app was so easy to use and did help me learn my baby’s kicking habits,” said Cooke.

Count the Kicks is an evidence-based public health campaign that teaches expectant parents the method for and importance of tracking their baby’s movements daily in the third trimester of pregnancy. ADPH brought the program to the state in 2021. Research proves the importance of tracking fetal movement, and Count the Kicks encourages expectant parents to get to know the normal movement pattern for their baby by having daily kick counting sessions using the free Count the Kicks app. When the amount of time it takes to get to 10 movements changes, this could be a sign of potential problems and is an indication to call their provider.

Thanks to the app and monitoring Aspen’s movements every evening after dinner, Shamari noticed when her baby wasn’t moving like normal. She said, “It was very typical for my baby to be active when I laid down at bedtime, but on this day she was not. As I reflected, I realized the last time I felt her was several hours earlier. As the evening went on, my husband and I became more worried and decided to go to the emergency room around midnight to have our baby checked.”

Shamari received a non-stress test when she arrived at the hospital, and her care team found that her fluid level was very low despite having no symptoms. She was admitted and placed on IV fluids. When her fluid levels remained low, her care team made the decision to induce her.

“My husband and I are so grateful that my doctor shared the importance of kick counting, had the Count the Kicks educational materials, and was also willing to take my concerns seriously when I spoke up,” Cooke said.

Data in the Count the Kicks app acts as an early warning system for expectant parents so they can let their providers know when something feels off. Kick counting data within the app can even be emailed or texted directly to providers — a helpful way to determine the next best steps for mom and baby.

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Thanks to a partnership with the ADPH, nurses, doctors and hospital staff are able to order free Count the Kicks brochures, app download reminder cards, and posters to place in offices that care for pregnant patients and to share with expectant parents.

"Count the Kicks is a powerful tool in helping expectant parents evaluate and track their baby’s movements," said Samille J. Jackson, Maternal and Child Health Coordinator. "We are committed to improving birth outcomes and reducing stillbirths in Alabama, and we are proud to partner with Count the Kicks to provide these free evidence-based tools to families in our state. We are happy to know these resources were able to save a life and hope they will save many more in our great state."

Every year in the U.S., 23,500 babies are stillborn, according to the CDC, and an average of 534 babies are stillborn each year in Alabama. For expectant Alabamians, 1 in every 111 pregnancies will end in stillbirth. Disparities persist, and Black women are two times more likely to lose a baby to stillbirth than their white neighbor, friend or colleague. Recent research has also identified significant increases in stillbirth and maternal death since the COVID-19 pandemic began.

In Iowa, where Count the Kicks began, the state’s stillbirth rate dropped by nearly 32 percent in the first 10 years of the campaign (2008-2018). In the first 5 years of the campaign, stillbirth rates for African American families in Iowa dropped a promising 39 percent. Iowa went from the 33rd worst stillbirth rate in the country to third lowest, while the country’s rate as a whole remained relatively stagnant.
The Oral Health Office kicked off National Children’s Dental Health Month 2023 by announcing the winners of the sixth annual smile photo contest for third grade students in Alabama at a news conference January 24. A boy and a girl were selected from photo submissions as the overall winners of the “Share Your Smile with Alabama” campaign for 2023. Chosen were Braylen Colvin who attends LEAD Academy in Montgomery and Cailyn Patterson who attends Forest Avenue Academic Magnet School in Montgomery. The third graders are spotlighted in ADPH marketing campaigns to promote children’s oral health in the state.

The theme for this year is “Brush. Floss. Smile.” State Oral Health Office Director Dr. Tommy Johnson said, “We sponsor this annual contest to bring attention to children’s oral health care and to remind everyone of the need to brush and floss their teeth daily. We also want to encourage community water fluoridation and promote the FDA-approved HPV vaccine for children beginning at 9 years of age.”

In the annual holiday decorating contest at the Central Office, “The Grinch That Stole Christmas” by the Bureau of Prevention, Promotion, and Support was declared the first place winner, very closely followed by “Candy Cane Village” of the Office of HIV Prevention and Care. Other creatively designed runner up offices were “The Grinch/Whooville,” Financial Services, “The 12 Day of Christmas,” Bureau of Clinical Laboratories; “Home for the Holidays,” Center for Health Statistics; and “Winter Wonderland,” Office of General Counsel.
Employee Relations (ER) is a part of the Office of Human Resources. ER interprets policies and guides employees in following policies and procedures. ER acts as a liaison between employees and managers by providing guidance, suggesting ways in improving communication, and support.

Some of the issues that ER addresses include workplace conflicts, grievances, complaints, workplace discrimination, sexual harassment, violence in the workplace, workplace bullying, civil rights complaints, and Americans with Disability Act requests. ER maintains an open-door policy to ensure employees may discuss a complaint or make contact without fear of reprisal.

ADPH employees with complaints are encouraged to first discuss the problem with their immediate supervisor to bring resolution. However, if the employee believes that his or her immediate supervisor is biased or may have a conflict of interest in the matter, the employee may address the problem with the next higher-level supervisor. Employees with alleged discrimination complaints related to Equal Employment Opportunity (EEO) rights may submit them directly to Danita Rose, Employee Relations Officer (ERO). In addition, the ERO is responsible for the affirmative action report, coordinates the department’s recruitment program, provides training, advises supervisors and employees in resolving workplace dissension, and coordinates (through referrals) the Employee Assistance Program (abbreviated EAP).

Respectful communication is essential to building strong, quality working relationships and creating a happy, productive, and inclusive environment. Together we can achieve more.

Currently, the office staff consists of Ms. Rose and Shanika Andrews, who joined the office on October 16, 2022. ER is located in the RSA Tower; 201 Monroe Street, Suite 1698, Montgomery, Ala. 36104.

For their annual holiday project, employees from the East Central Public Health District and Central Office staff shared their giving spirit by collecting needed items for the Friendship Mission Shelter. Disposable eating utensils, hygiene products, cleaning supplies, and clothing were donated for the children, women, and men at the shelter. Oranges, apples and snacks were also provided for the children. Coordinating the project was Well Woman Social Worker Cynthia Foster, and District Administrator Tim Hatch lent his full support to the project. Making the deliveries on December 21 were Tarrance O’Field and Quincey Strickland.
Southeastern Public Health District Workforce Development Coordinator Stacy Jernigan conducts orientation classes for new district employees. On December 14, a class was held for 19 new employees in a wide range of classifications. Pictured seated from left are Bobbie Roland, R.N., Alabama Breast and Cervical Program (Coffee County base); Steve Huett, Environmentalist (Geneva County); Ilka Slemp, Language Interpreter (Coffee County base), Rachel Key, R.N., Nurse Coordinator (Henry County), Paige Stricklin, Public Health Social Worker (Butler County), Cassie Herring, Clinic Aide (Butler County), Amy Howell, R.D., WIC (Coffee County), Carmen Rogers, R.N., WIC (Pike County). Standing from left, Jim Bryan, R.N., Staff Nurse (Houston), Tammy Mullins, Custodial (Coffee County), Barbara Richardson, Clinic Aide (Dale County), Anna Thornton, R.N., Home Health Care Services, (Houston County base), Lynn Reeves, R.N., Home Health Care Services Supervisor (Houston County base), Yolanda Richardson, Administrative Support Assistant II (Barbour County), LaKenya Hamilton, Clinic Aide (Houston County), Jennifer Benton, Custodial (Houston County), Jennifer Trawick, R.N., Infectious Diseases & Outbreaks (Coffee County), Lisa Davis, Nutritionist Associate, WIC Program (Houston County), Brittany Senn, Nutritionist Associate, WIC (Dale County).

The New Employees Orientation Class held on February 8 welcomed the following: Seated from left are Amber Yeakle, R.N. (Houston County), Kayla Cole, R.N. (Houston County), Jennifer Price, R.N. (Barbour County). Standing from left are Jenna Floyd, R.N. (Pike County), Kachessa Upshaw, R.N. (Home Health-Crenshaw/Butler County), Shelby Gorey, Administrative Support Assistant II (Crenshaw County), Brandi Bedford, Clinic Aide (Covington County), Delana Hattaway, L.P.N. (Covington County), Jamaal Williams, IT, Southeastern District (Pike County base).