

**Wisconsin State Laboratory of Hygiene
Board of Directors Meeting
February 16, 2016
1:00 P.M – 4:00 P.M.
2601 Agriculture Drive
Madison, WI 53718**

**APPROVED MINUTES
November 3rd, 2015**

MEMBERS PRESENT: Dr. Robert Corliss (Chair), Jeffery Kindrai (Vice-Chair), Charles Warzecha (on behalf of Karen McKeown), Scott Hildebrand (on behalf of Darrell Bazzell), Barry Irmen, Gil Kelley (on behalf of Michelle Wachter), Steve Geis (on behalf of Mark Aquino), James Morrison, Carrie Lewis, and Dr. Charles Brokopp

WSLH STAFF PRESENT: Dr. Peter Shult, Dr. Daniel Kurtycz, Kristine Hansbery, Jan Klawitter, Steve Marshall, Cynda DeMontigny, Linda Johnson, Marie Ruetten, Steve Strebel, Dave Webb, and Nathaniel Javid

DNR STAFF PRESENT: Ron Arneson

GUESTS PRESENT: None

Chair Dr. Robert Corliss called the meeting to order at 1:00 P.M.

Dr. Brokopp opened the meeting noting that Mark Aquino has been appointed as the official representative from the Department of Natural Resources for the WSLH Board. Unfortunately, Mr. Aquino was unable to attend today's meeting, so Steve Geis is serving on his behalf. Gil Kelley is the new director of the DATCP lab and is serving today on Michelle Wachter's behalf.

Item 1. APPROVAL OF MINUTES

Approve the minutes of the June 18, 2015 board meeting as submitted. Jeff Kindrai made a motion to approve, seconded by Barry Irmen.

Item 2. REORGANIZATION OF AGENDA

There was no reorganization of the agenda.

Item 3. PUBLIC APPEARANCES

There were no public appearances.

Item 4. BOARD MEMBERS' MATTERS

Dr. Brokopp asked each of the agency leads to give a status update on what is happening at their facility. Scott Hildebrand from the Vice Chancellor for Finance and Administration's office mentioned that the Chancellor announced a supplemental compensation program for university employees. As of July 1, UW-Madison has their own, unique personnel system. We also now have the authority to do performance-based pay adjustments. Charles Warzecha, Wisconsin Department of Health Services, mentioned that they are focused on influenza this season. Mr. Warzecha advised everyone to get vaccinated. Steve Geis, Wisconsin Department of Natural Resources (DNR), mentioned that the DNR is going under a realignment process of their core function. This was made necessary due to a number of cuts inflicted on the department. Gil Kelley, Wisconsin Department of Trade and Consumer Protection did not have any news to report to the Board.

Item 5. SCIENTIFIC PRESENTATIONS

IT Projects Update

- 1) Linda Johnson, Interim Director, Office of Information Systems**
- 2) Steve Marshall, Assistant Director, WSLH**

Dr. Brokopp mentioned that we have greatly invested in IT projects over the last several years with the goal of modernizing our IT function at the lab. We have come a long way from where we were five years ago and reduced our number of systems so that we are running more efficiently and effectively. Steve Marshall mentioned that a decade ago we were running on nine to ten different systems and now we are down to four. Our old systems were highly customized, and as such, they were almost impossible to upgrade. Therefore, we needed to make a change. We created a LIMS change management team. Steve presented an IT projects and upgrades timeline with status updates of "done," "begun and committed," and "contractual obligation." Our current systems are Epic's Beaker and Psyche's WindoPath for clinical systems, ChemWare's Horizon for Environmental and Occupational Systems, and our own Phoenix system along with an external LAQC system for Proficiency Testing. One of the main reasons for making these system changes was to enable electronic data exchange with our customers. We have implemented an electronic interface with some customers successfully and will continue to do so as time goes on. For small volume customers, we used a web portal

exchange starting with cytogenetics in 2013 and cytology in 2015. For 2016-17, we plan to expand to microbiology, newborn screening, toxicology, and our Environmental Health Division. For large volume customers, we are using an HL7 interface. This was implemented with success in 2014: 1,566 orders were processed in the last two weeks with University Health Services. In 2015, we built the interface for University of Wisconsin Hospital and Clinics. In 2016, we plan to complete our interface with Dean/St. Mary's Hospital and may be expanding to Planned Parenthood and Montana NBS. We also made updates to our financial systems. When we completed the Beaker upgrade in 2012, we were able to upgrade to Reference Lab Billing, which is a single billing system with an automated interface allowing for online payment capabilities. We will also improve our accounting software, Microsoft Great Plains, in spring 2016. Linda Johnson provided some IT statistics to the Board: on average day, the WSLH receives 5,400 attacks on our network that we successfully keep out. 87% of our email is spam that never reaches the user's inbox. PHI is detected and automatically encrypted. Linda also noted some ongoing IT maintenance projects including decommissioning old systems, fiber optic upgrades, cat-6 line upgrades, PC software weekly updates, instrument PC upgrades, server hardware and operating system upgrades, monthly server patching, automated processes monitoring, and building moves. IT continually supports systems for DHS and the CDC along with maintaining service management and documentation systems.

Influenza: WSLH Efforts to Support National Surveillance

1) Dr. Pete Shult, Director, Communicable Disease Division, WSLH

Dr. Shult provided some background on influenza to the Board. Influenza A and B are the major human pathogens. Most organisms we encounter are DNA based; Influenza, however, is RNA based. This is significant because RNA has the ability to change, and is therefore one of the most genetically unstable viruses that we know of. This poses a public health challenge.

There are two major surface proteins of A and B viruses, hemagglutinin (HA) and neuraminidase (NA). These are important to initiating and causing the replication cycle and our immune response is directed towards those surface components. Influenza has the ability to change every year, and as such, we are re-developing the vaccine every year. The estimated annual burden of seasonal influenza in the United States results anywhere between 3,000 and 49,000 deaths and 54,000 – 430,000 hospitalizations with a direct medical cost of approximately \$10.4 billion. Vaccine development typically begins in January with distribution available in September. Pandemics tend to happen with Influenza A. This is because influenza A is naturally a zoonotic infection. In nature, there are over seventeen different hemagglutinin subtypes and ten different neuraminidase subtypes. A new subtype is a necessary ingredient for a pandemic. The effects are widespread: e.g., they can affect pigs and poultry, and as a result, our food supply. Over the last century we've had four major pandemics: the Spanish influenza of 1918, H2N2 in 1957, Hong Kong Flu in 1968, and H1N1 in 2009. In 2015, there was an emergence of novel influenza A (H5Nx). Nearly \$50M chickens were affected. Although

there wasn't a single human case involved with the outbreak, it raises the question of what will happen in the next flu season.

This highlights the need for a robust influenza surveillance system. The three key elements to proper surveillance are virologic, morbidity, and mortality surveillance. Health departments communicate this information to the CDC. There are four key goals in influenza virologic surveillance: provide situational awareness, detect novel or reassortant viruses, inform vaccine strain selection, and detect and monitor antiviral resistance. Testing is initially performed at the state and then sent to the CDC for analysis. The CDC can do a number of things including monitoring for antiviral resistance. In 2009, CDC's capacity was exceeded (being the reference lab to fifty states). In response, they identified a small number of public health labs who could take on some of this work. This brought forth the concept of national influenza surveillance reference centers. Wisconsin was selected as one of three centers. In Wisconsin, we're responsible for eighteen states, and study four additional states for vaccine effectiveness. The benefits are shared mutually as we are paid per specimen. Dr. Shult mentioned that the WSLH has also been selected as a pilot site for whole genome sequencing which would signify a quantum leap in virologic surveillance. The complexity, not only in the laboratory but with IT and data transfer, is staggering. The data is sent to a cloud managed by APHL. Dr. Shult mentioned that CDD is also involved in Food CORE/PulseNET testing and is applying to be a TB WGS reference center. Dr. Shult thanked a number of people in the lab including our IT staff who helped make all of this happen.

Item 6. FY16 CLOSEOUT REPORT

1) Marie Ruetten, Financial Manager, Wisconsin State Laboratory of Hygiene

Marie Ruetten provided the FY16 closeout report. For total support and revenue we are under budget by \$318,167 at \$10,607,758 YTD actual compared to \$10,925,925 YTD budgeted. Most of this variance is in non-agency laboratory services revenues. The FY16 approved annual budget under total support and revenue was \$43,645,752. For expenses, we are \$5,683 over budget YTD at \$10,811,419 actual compared to \$10,805,736 budgeted. The FY16 approved annual budget with expenses was \$44,361,228. In all, our net operating income is a loss at \$323,850, and a \$225,089 loss with a modified net operating income. Compared to FY15, we are under in total support and revenue from last year by \$282,941. For expenses compared to FY15, we are under by \$1,563. This gives us a net operating loss of \$281,378 with a modified net operating loss of \$209,135.

For cash obligations, our cash balance as of September 30, 2015 is \$12,026,567. Subtracting restricted cash, deferred revenue, and encumbered payables, our available unrestricted cash balance as of September 30, 2015 is \$2,992,930.

Item 7. STRATEGIC MAP UPDATE

1) Steve Marshall, Assistant Director, Wisconsin State Laboratory of Hygiene

Steve Marshall presented the strategic map update to the Board. Mr. Marshall presented a graphic outlining a three-year plan with different categories including growth and sustainability, connectivity and data use, workforce enhancement, research and education support, and quality improvement. Each category includes sub-areas. Mr. Marshall went over the process with the Board including developing objective workgroups, action item charters, review processes, and timelines. Mr. Marshall described the action items for 2015-2016 in each category. Some key action items from each category include a revenue cycle administrative process review, HL7/web portal expansions, coordinating and defining research/education support, documentation tools under quality improvement, staff recognitions and meetings under staff recruitment, retention, engagement and inclusion.

Item 8. CONTRACTS REPORT

1) Dr. Charles Brokopp, Director, Wisconsin State Laboratory of Hygiene

We have one contract with the FDA at \$240,000/year for five years to perform radiological testing for food. We have one contract with The Nature Conservancy for \$12,600 and one contract with UT BATTELLE, LCC for \$25,000. We also have fourteen contracts with the Wisconsin Department of Health Services totaling \$3,102, 700. The grand total for contracts this fall is \$3,380, 300.

Item 9. DIRECTOR'S REPORT

1) Dr. Charles Brokopp, Director, Wisconsin State Laboratory of Hygiene

The next Board meeting will be on February 16, 2016. Dr. Brokopp asked the Board to review the packet for more information on the following dates. There are several key public and environmental health incidents this fall including *Blastomyces dermatiditis*, *Francisella tularensis*, HazMat assistance, *Salmonella Poona*, mumps, Campylobacter, and viral meningitis – enterovirus. We had 3,724 water systems tested, of which 122 received a boil water notice. Dr. Brokopp mentioned that we have renewed OSHA contracts totaling \$1,834,000 for the lab and \$1,955,598 for health and safety consultation. Our Cytology Program received its full three-year accreditation. The College of Agriculture and Life Sciences is the academic home for the Cytology Program. There has been an expansion of PT testing in which APHL, CDC and the

WSLH provide a viral proficiency testing panel including measles and mumps PCR testing at five samples per challenge. PT testing has also been expanded with the WSLH providing a bacterial meningitis proficiency testing panel for *Haemophilus influenzae*, *Streptococcus pneumoniae*, *Neisseria meningitidis* at six samples per shipment. Dr. Daniel Kurtycz, WSLH Medical Director, was an editor/contributor for The Paris System for Reporting Urinary Cytology and a contributor to The Bethesda System for Reporting Cervical Cytology. Dr. Brokopp mentioned that Dr. Jennifer Laffin, Dr. Patrice Held, and Dr. Curtis Hedman received promotions and Dr. Christopher Vlangos and Dr. Catherine Paschal received clinical fellowships at our laboratory. Dr. Curtis Hedman and David Rogers published an application note for studying fluoroquinolones in fish. Recently our lab performed a CAP inspection at the New Mexico Department of Health in Albuquerque and the Cadham Provincial Lab in Winnipeg, Manitoba. CAP will be inspecting the WSLH prior to November 15th. AIHA will be inspecting the WSLH Occupational Health Lab next week. Dr. Patrice Held, as principle investigator, was awarded a \$20,000 NBS training grant by APHL. We will be hosting training webinars for newborn screening funded by a cooperative agreement with APHL and the CDC. Laura Liddicoat has been selected to receive the 2016 Robert F. Borkenstein award. Dr. Brokopp was also inducted into the Delta Omega Honorary Public Health Society.

Dr. Brokopp concluded the Director's Report by announcing his retirement in the first part of 2016. Dr. Brokopp took a moment to express his gratitude for being able to serve as Secretary of the Board and thanked the board members for the opportunity to serve with them. Dr. Brokopp mentioned he will miss the laboratory greatly but sees great things for the future of the WSLH.

Chair Dr. Robert Corliss made a motion to adjourn meeting at 4:00 P.M. **Carrie Lewis** seconded the motion. The motion passed unanimously and the meeting was adjourned.

Respectfully submitted by:



Charles D. Brokopp, DrPH
Secretary, Wisconsin State Laboratory of Hygiene Board of Directors