

February 5, 2013

Ms. Pam Derby
CPS HR Consulting
241 Lathrop Way
Sacramento, CA 95815

Dear Ms. Derby:

With genuine interest and excitement, I would like to apply for the position of Chief Health Officer of the Southern Nevada Health District. Over the last two-and-a-half decades, I have consistently demonstrated excellence in both educational and professional arenas. In addition, I have been fortunate to serve in multiple leadership positions, including director of two separate health departments. Please allow me to highlight some of my attributes and experiences that directly align with this particular position:

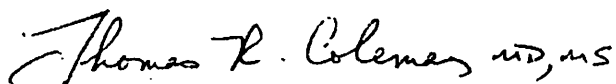
- I have extensive experience in public health practice (including administrative experience in three separate states, each with a different organizational structure), as well as population-based responsibilities in the nonprofit and private sectors. In conjunction with these leadership positions, I have served on numerous community and public health workgroups at the local, regional, statewide, and national levels.
- My fundamental management and leadership style directly revolves around continuous quality improvement, a core component to achieve public health accreditation, with an emphasis on transparency and "management by data". As Director of the Volusia County Health Department (VCHD), I focused all health department activities within a framework using the Sterling model, based on the Malcolm Baldrige Criteria for Performance Excellence. To exemplify my commitment to this emphasis, the person who was initially hired as my quality improvement coordinator ultimately became my Assistant Director for Administration. My underlying goal for any organization for which I am given responsibility is to build an environment of inclusiveness, where each employee feels that their opinion and feedback are anticipated and appreciated.
- I accept the fundamental responsibility to enforce all public health statutes and requirements, but realize the need to do so in a respectful and conscientious manner. This is especially important when broad emergency powers need to be utilized. Public health is inherently intertwined with the political arena, but I strive to communicate in an open and transparent manner. I understand politics, but try to avoid being "political".
- On numerous occasions previously, I partnered with community organizations to provide services as needed for the benefit of the community. For example, I spearheaded the development and implementation of a community-wide initiative on diabetes self-management as a vehicle to raise awareness of the concept of health literacy. But when it became apparent that the health department was not the optimal entity to continue to be a "primary care safety net" provider, I authored the plan to transition that care to a local Federally Qualified Health Center (including the transfer of a specialty care network to a third-party administrator). Within my leadership capacity in public health, I have uniformly tried to make strategic organizational decisions based on the needs of the community and its various partners. To do so currently, it is

incumbent on our organization to continue to build the epidemiologic infrastructure to prioritize programmatic interventions and I have been intimately involved with this in my time with SNHD.

- I have substantial experience in the preparation and presentation of multimillion dollar budgets (including state and federal grants, fees, and other local revenue sources) and have been ultimately responsible for a workforce greater than 300 employees. In FY 2007-2008 for VCHD, we lost over 20% of our budget due to cuts, which led to the elimination of 78 positions; however, only 13 people were ultimately impacted because of prior planning.
- In addition to an inherent focus on the 10 Essential Public Health Services, I realize that public health preparedness is fundamentally the eleventh such service. I have had direct experience in hurricanes, wildfires, and flooding, and understand the need for an “all hazards” focus. As Director of VCHD, I managed a Legionnaires’ Disease outbreak in a local hotel two weeks before the Daytona 500 in a tourist-based economy and prepared for other regularly-scheduled special events. Further, I led our organization from the devastating effects of the “Groundhog Day tornado” in 2007, when we suddenly lost four separate buildings encompassing over 37,000 square feet, including our largest clinic facility, Environmental Health headquarters, and an EH field office. I am proud to note that through the efforts of our staff and community partners, more than 90% of our services were reestablished within three days.
- I served as the primary mentor for two consecutive Florida Epidemiologic Intelligence Service fellowship awardees and was appointed as Clinical Assistant Professor at the regional campus of the Florida State University College of Medicine. In addition, I served as the Chair of the Public Health Committee of the Volusia County Medical Society as a member of the Executive Committee of that organization. I am currently an adjunct faculty member at the Touro University Nevada College of Osteopathic Medicine, serve on the Nevada State Medical Association Commission on Public Health, and am actively involved with mentorship of our CDC-assigned EIS Fellow.
- Finally, my personality is inherently focused on innovation and “what can be”, not “the way it has always been”. I have always had the ability to think through a situation linearly, while still assessing more global ramifications of what could occur. As our organization continues to strive to build a world-class health department during this period of transition, it will be critically important to have a leader with this capability.

I would welcome the opportunity to discuss my qualifications and vision for this position further with you and members of the Board of Health. Thank you so much for your consideration of me for this exceptional opportunity.

Sincerely,



Thomas R. Coleman, M.D., M.S.

Thomas Ross Coleman, M.D., M.S.
Southern Nevada Health District
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(702) 759-1286 (work) – (702) 544-9221 (cell) – (702) 759-1412 (fax) – colemant@snhdmail.org

PROFESSIONAL SUMMARY

Over 20 years of eclectic education, training, and experience in clinical medicine, public health administration and leadership, quality improvement, and consultancy. Superb administrative and analytical ability in population-based medicine and public health combined with outstanding interpersonal skills. Particular interests include the integration of public health and clinical medicine (including informatics); evidence-based clinical and community preventive services, especially related to underserved populations; and the significant issues of low health literacy and health disparities. Board certified in Public Health and General Preventive Medicine, with scores greater than 90th percentile on both components of exam.

PROFESSIONAL EXPERIENCE

Southern Nevada Health District (SNHD) – Las Vegas, NV **2011 - present**
Director of Community Health (07/2012-present)

- Serve as highly responsible public health physician who in consultation with, and under the direction of the Chief Health Officer, plans, directs, manages, and oversees the activities and operations of the Community Health Division.
- Regularly serve as Acting Chief Health Officer in absence of the incumbent.
- Serve as SNHD Project Director for recently-awarded Community Transformation Grant, in conjunction with award to Clark County School District.
- Appointed to Commission on Public Health of the Nevada State Medical Association.

Medical Epidemiologist, Chronic Disease and Injury Prevention (09/2011-06/2012)

- Provided epidemiologic and clinical expertise to physicians, other health care practitioners, SNHD personnel, and community leaders.
- Served as collaborator and reviewer of several grant proposals, including responsibility as Principal Investigator for pending Tobacco Regulation Awareness, Communication, and Education Program (TRACE) grant to the U.S. Food and Drug Administration.
- Appointed as Adjunct Assistant Professor for Public Health & Preventive Medicine, Touro University Nevada College of Osteopathic Medicine.

Volusia County Health Department – Daytona Beach, FL **2005 - 2009**
Director

- Responsible for public health in county to include community assessment, prevention, education and outreach programs, environmental health, and variety of direct clinical services; oversaw 300+ employees and administration of \$25+ million budget.
- Led recovery from devastating tornado in February 2007, with sudden loss of 37,000+ square feet of clinical and other facilities; more than 90% of services reestablished within three days.
- Authored plan for transition of primary care services from health department to Federally Qualified Health Center system within county (along with transition of specialty care network to third-party administrator).
- Appointed as Clinical Assistant Professor, Florida State University College of Medicine.

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- Appointed to Florida Department of Health Policy Review Workgroup, after explicit request to participate by State Surgeon General.
- Appointed to Florida Department of Health Medical Directors' Advisory Group by Deputy State Health Officer.
- Appointed as member of Clinical and Disease Control subcommittees for Florida Association of County Health Officers.
- Appointed as Public Health Committee head for Volusia County Medical Society in conjunction with service as member of Executive Committee.
- Served as primary mentor to 2 consecutive Florida Epidemiologic Intelligence Service fellowship awardees.
- In conjunction with O'Neill Foundation for Community Health and numerous community partners, developed and began implementation of community-wide initiative on diabetes self-management, with focus on improved health literacy in African-American, Hispanic, and elderly populations.

Consultant to Florida Medical Quality Assurance, Inc. – Tampa, FL

2000 - 2005

Physician Coordinator

- Provided population-based clinical, epidemiologic, and methodologic direction for all outpatient and managed care projects for Florida's Medicare Quality Improvement Organization.
- Educated hospitals, other community providers, and physicians throughout Florida on Centers for Medicare & Medicaid Services' Sixth and Seventh Scopes of Work, with emphasis on Continuous Quality Improvement methods.
- Developed recruitment methodology for Physician Office Project for Seventh Scope of Work based on Agency for Healthcare Research and Quality's "Put Prevention Into Practice" model and achieved 150% of targeted participant goal (802 physicians and physician extenders).
- Developed unique methodology using Medicare claims and geodemographic (PRIZM® from Claritas) data to target breast cancer screening in female African-American and Hispanic beneficiaries and disease management in African-American diabetic beneficiaries at the community level.
- Gave Medical Grand Rounds presentations at University of Florida and University of Florida at Jacksonville and other invited presentations at conferences sponsored by Office of Equal Opportunity and Minority Health and Bureau of Chronic Disease of Florida Department of Health, Hillsborough County African-American Men's Health Forum, Institute for African-American Health, and Southern Region Consortium of Medicare Managed Care Organizations.
- Developed, wrote, and gave numerous other talks, radio, and television presentations to laypersons, both live and taped.
- Served as member of Florida Department of Health-sponsored statewide Diabetes Implementation Workgroup and provided expertise to governor-appointed Diabetes Advisory Council when requested.
- As consistent with Healthy People 2010 Objectives, emphasized "elimination of health disparities" within all above activities.

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American Cancer Society, Florida Division, Inc. – Tampa, FL **1998 - 1999**
Vice President for Cancer Control

- Responsible for entire spectrum of cancer control activities throughout Florida, from primary prevention through end-of-life issues; oversaw 5 direct reports and department of 10 employees.
- Served on nationwide team that developed initial comprehensive plan to attain goals in conjunction with Healthy People 2010 Objectives.
- Spearheaded pilot Patient Services Center in Southwest Region, with ultimate goal of enhanced customer service statewide.
- Initiated annual Cancer Control College, a two-day multidisciplinary training.

Southside Health District, Virginia Dept. of Health (VDH) – Halifax, VA **1996 - 1998**
District Health Director

- Responsible for public health in tri-county area to include community assessment, prevention, education and outreach programs, environmental health, and variety of direct clinical services; oversaw 46 employees and administration of \$2.5 million budget.
- Facilitated Total Quality Management/Continuous Quality Improvement (TQM/CQI) evaluation/modification of clinical activities.
- Appointed to variety of public health committees and task forces, to include:
 - Healthy Virginia Communities task force.
 - Perinatal Subcommittee Workgroup on Access to Obstetrical Care.
 - VDH task force on employee training (involved with both epidemiologic and information technology training for approximately 5000 employees).
 - VDH task force on implementation of VISION, a statewide information system.

Comprehensive Community Healthcare – Stoneville, NC **1993 - 1995**
Solo Practitioner of Preventive Medicine

- Practiced General Internal Medicine with focus on primary and secondary prevention.
- Appointed to Healthy People 2000 workgroup for Rockingham County.

Georgia Dept. of Human Resources, Division of Public Health – Atlanta, GA **1985 - 1987**
State Statistician

- Integral staff member of Metropolitan Atlanta Developmental Disabilities Project from its inception, the prototype for subsequent Centers for Disease Control and Prevention-sponsored registry for 26 Georgia counties:
 - Researched, developed, and documented epidemiologic and biostatistical theory for ambidirectional (nested case-control) study.
 - Created system for data collection and performed initial descriptive analyses of data.

University of North Carolina School of Public Health – Chapel Hill, NC **1983 - 1985**
Teaching Assistant

Resource Systems Corporation – Clemmons, NC **1981 - 1983**
Senior Programming Analyst (1982-1983) and Computer Programmer (1981-1982)

EDUCATION AND TRAINING

UCSD-SDSU General Preventive Medicine Residency Program-- San Diego, CA
Resident in General Preventive Medicine, 2009-2011

- Chief Resident, 2010-2011 academic year.
- Member of Graduate Medical Education Committee, 2009-2010 and 2010-2011 academic years, University of California, San Diego (UCSD) Medical Center and School of Medicine.
- Member of Resident Physician Council, 2010-2011 academic year, UCSD Medical Center and School of Medicine.
- Served as clinician in County of San Diego Public Health Services Refugee Health Assessment Program, in conjunction with Catholic Charities-hosted clinic.
- Actively participated on development team and served as principal clinical advisor during implementation of monthly screening health fairs at Linda Vista Health Care Center.
- Served as physician advisor to Por la Vida, a National Cancer Institute-funded cancer prevention program targeted to Latinas through Comprehensive SDSU-UCSD Cancer Center Partnership, with multiple face-to-face teaching sessions with promotoras (lay health workers).
- Achieved 4.00 Grade Point Average on all coursework at San Diego State University (SDSU) Graduate School of Public Health, broadening Master of Science degree to “MPH-equivalent” (including courses in Health Services Administration, Environmental Determinants of Human Health, Theoretical Foundations of Health Promotion, and Epidemiology of Infectious Diseases).
- Inducted into The Honor Society of Phi Kappa Phi, emblematic of top 10% of all graduate students at SDSU.
- Completed American Medical Informatics Association-sponsored 10x10 course on Public Health Informatics through University of Utah, with capstone project on electronic lab reporting in conjunction with County of San Diego Public Health Services Community Epidemiology.
- Completed UCSD Division of Biomedical Informatics course on Principles of Biomedical Informatics and semester-long series of weekly team meetings to learn more about biomedical informatics activities within Kaiser Permanente.
- Completed systematic review of colorectal cancer in African-Americans as capstone project.

Moses Cone Memorial Hospital – Greensboro, NC
Resident in Internal Medicine, 1991-1992

- Assisted with development and presentation of course in clinical epidemiology for peers.

University of North Carolina School of Medicine – Chapel Hill, NC
Doctor of Medicine, 1991

- Alpha Omega Alpha Honor Medical Society induction, May 1990.
- Honors for 1989-1990 academic year (top 25% of class).
- Chancellors Scholars Forum selectee, November 1989.
- Honors for 1988-1989 academic year (top 15% of class).
- Lange Medical Publications Student Award, 1988-1989 academic year.
- Medical Student Fellowship awardee, Epilepsy Foundation of America, 1988.
- Honors for 1987-1988 academic year (top 15% of class).

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University of North Carolina School of Public Health – Chapel Hill, NC

Master of Science, Biostatistics with supporting program in Epidemiology, 1989

- Faculty commendation for highest score on 1985 Master's qualifying examination.
- Chairperson, Student Union Board (the student governmental entity for the school), 1984-1985.
- Graduate Student Research Service Award recipient, National Cancer Institute, 1983-1985.

University of North Carolina at Greensboro – Greensboro, NC

Bachelor of Science, Mathematics, 1983

PUBLICATIONS and POSTER PRESENTATIONS

- Co-author of A Review of the Clark County School District Height and Weight Data Collection, 2010-2011 School Year, February 2013.
- Accepted presentation on "A Systematic Review of Publications on Colorectal Cancer in African-Americans", National Cancer Institute Center to Reduce Cancer Health Disparities-sponsored Cancer Health Disparities Program Meetings, Bethesda, Maryland, July 2011.
- Comprehensive Efforts to Combat "The Captain of the Men of Death", The Journal of the Florida Medical Association, Inc., Vol. 87, No. 1, August 2001, pp. 19-26.
- Pneumococcal Disease Update and Discussion, Annual Convention Issue of "Immunization – A Family Affair", a quarterly periodical of the National Medical Association under a cooperative agreement with Centers for Disease Control and Prevention, Summer 2001, p. 3.
- Power Curve Production for a Case-Control Study Using SAS/GRAPH®, Master of Science Paper, 1989.
- Numerous articles on primary and secondary prevention in *PROPartner, Physician-to-Physician*, and *To the Point* publications by Florida Medical Quality Assurance, Inc., that were disseminated throughout Florida to practitioners and providers.

MEDICAL LICENSURES AND PROFESSIONAL AFFILIATIONS

- Active medical licensure in Nevada (# 14424), California (# C54234), North Carolina (# 36162) and Florida (# ME 79276); inactive licensure in Virginia.
- Diplomate of the American Board of Preventive Medicine (Public Health and General Preventive Medicine), January 1, 2012 through January 31, 2022.
 - Scored at 95th percentile on Core component and 91st percentile on Public Health and General Preventive Medicine component on October 2011 board examination.
- The University of North Carolina General Alumni Association, Lifetime Member.
- American Medical Association, 1987 to present.
- American Public Health Association, 1996 to present.
- Association for Prevention Teaching and Research, 2000 to present.
- Florida Public Health Association, 2001 to present.
- American College of Preventive Medicine, 2005 to present.
- American Association of Public Health Physicians, 2006 to present.
- Florida Society for Preventive Medicine, 2007 to present.
- American Medical Informatics Association, 2009 to present.

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- Council of State and Territorial Epidemiologists, 2011 to present.
- Nevada Public Health Association, 2011 to present.
- Clark County Medical Society, 2012 to present.
- Nevada State Medical Association, 2012 to present.
 - Appointee, Commission on Public Health.
- San Diego County Medical Society, 2010 to 2011.
- National Association of County & City Health Officials, 2005 to 2009.
- Florida Association of County Health Officers, 2005 to 2009.
- Volusia County Medical Society, Executive Committee member, 2005 to 2009.
 - Chair, Public Health Committee.
- American College of Physicians, 1991-1997.
- North Carolina Medical Society, 1991-1996.
- American Medical Student Association, 1987-1992.
 - Treasurer, UNC chapter, 1988-1989 academic year.

**SOUTHERN NEVADA HEALTH DISTRICT
CHIEF HEALTH OFFICER
Preliminary Interviews**

Candidate: Dr. Tom Coleman

QUESTIONS

1. **What attracted you to apply for this position? How does this opportunity fit in with those plans?**
 - *He knows he can do the job and move the District forward – doesn't want the job by default. He can provide the leadership needed to get the organization through a stressful and fluid time. There are significant health problems – feels there has been serendipity in his career and that he came to Vegas for a reason – the organization needs a leader willing to cooperate with all staff.*
 - *Would focus his time on short and long-term goals – Dr. Middaugh is trying to open communications and be transparent – he would continue that*
 - *They need to focus on five things: 1) Community Health Assessment – look at health priorities – current strategic plan does not address community health assessment – it's really more about infrastructure; 2) Public Health Preparedness; 3) Financial Viability – Nevada has the lowest per capita Public Health funding – they are looking at unit cost of services – have byzantine business systems – wants to manage by data and they don't have the right infrastructure – need to build epidemiologic capacity and the financial system isn't set-up for tracking federal dollars; 4) Service Excellence – believes in continuous quality improvement – need an internal communication plan – need to develop concerted training plan – want them to be an employer of choice; 5) External Customer Service – he isn't wed to a particular quality system – they need to be hearing input and measuring what stakeholders want.*
 - *He will put them on path to accreditation – they need to manage from a quality improvement perspective*
 - *Need to wed HR/Finance*
 - *What should health priorities be - need to document issues they have and look for dollars to address those specific issues*

2. **What, if anything, do you know about Southern Nevada Health District?**
 - *There has been a schism with the Union. They do support him because he has been trying to foster open communication. He told them he can't promise them anything, but there won't be the vitriol that there has been in the past. They had many unions in Volusia and in four years he never met a union representative – so you can have good relationship.*

3. **Describe your most relevant position (to this opportunity) and its responsibilities.**

- Current role
Organization- Current position with SNHD
Title-
Staff-
Scope-
Budget-
Report to-

4. Please describe your **background** (i.e. experience in and management of) in:

Communicable Disease Control or
Epidemiology (disease surveillance and control)-

- *Is very comfortable in this area*

Chronic Disease Prevention-

- *More adept at chronic than at acute disease investigation - more fluency in chronic – need federal chronic disease funding*

Strategic Planning-

- *He did a strategic plan in Volusia City – there is no performance excellence component at SNHD – he spearheaded that process in Volusia*

Public Health Preparedness (i.e. response to infectious disease outbreaks,
bioterrorism, and other public health threats)-

-

Grant development-

- *Has been in positions in three different states and the grants were top down – has been working with grants from bottom up at SNHD*

Relationships with diverse Board members and/or community partners-

- *Technically he was a state employee in Florida – but integrated with Community Services so has worked with non-profit boards – SNHD Board is a very disparate group – this is a political position – he is an active listener and he would continue*

to educate the Board and public about what Public Health is and that it needs to be based on data as much as possible – wants open/honest dialogue with the Board

5. How would your employees describe your management style and what would they change about you?
 - *Staff: 300 Budget: \$25M – management can be a double-edged sword; tries to have open/honest communication – tries to make sure everyone is informed – he is approachable – wasn't sure what they would want to change*
 - *Right now there is an honeymoon period with the union – will have to see how things are after arbitration and the determination of exempt/non-exempt positions which will be more closely aligned with the Department of Labor's definitions*

6. What steps do you take with your organization to **build or maintain teamwork**? Please share an example of the most challenging issue if you can and how you approached/resolved it.
 - *Patience and flexibility*

7. How do you **hold your staff accountable** for their performance?
 - *There is a distinct difference between management and leadership – have reciprocal discussions with them regarding goals and expectations – hire great people, coach/mentor them; inherited a staff in Volusia that were in the wrong positions*

8. Please summarize your experience in developing **staff and creating a succession plan**.
 - *Workforce and staff development is critically important – they need to develop a global training plan for the next generation*

9. What has been your experience in **representing an organization with outside agencies and officials**? Please describe.
 - *Must be externally visible and building relationships – very large part of the job, BUT, internally must set a strategic plan*

10. How do you **measure the success or failure** of a public health organization you are managing? How can you tell if you are doing a good job?
11. The District is committed to **maintaining quality disease control services** despite a service population growing faster than available funding. As the Chief Health Officer how would you lead the District in this effort?
12. What is your most **innovative accomplishment** in public health services?
13. Is there anything in your background that might be considered **negative or controversial** that should be discussed before further consideration of your candidacy? If so, please explain.

The interview ran very long and I did not have an opportunity to ask Dr. Coleman the final four questions. He provided considerable information regarding what he thinks should happen in the District and provided some additional stream of consciousness information:

- *He has met with each individual department and has tried to give them a flavor of him through e-mail – there are a lot of great people at the District*
- *He is an internist and very good at systems/processes but also looks at unexpected consequences – they do not have good policies/procedures at the District and they need to be more assertive in getting things rectified*
- *The District has a lot of great people but enormous infrastructure problems that can be turned around – they are frenetically reactive now*
- *The District was teetering on disaster – Dr. Sands made the right decision in shutting the building down, but it should have been more transparent. The former Director of Administration was an authoritarian and was threatening lay-offs even though there was money in the reserve.*
- *He knows there will be challenges in this position – but he faced major challenges in Volusia – he is a seasoned administrator and he walks the walk and is consistent; this is a really hard job, but he wants the opportunity to make a substantial difference in public health*

Consultant Comments: Dr. Coleman is very passionate about public health and SNHD. He strongly believes he is the right person for this position and can help get the District back on its feet.