PHAB Documentation
Training 101

February, 2015
Dan Ward, MPA
Performance Improvement Manager
Objectives

Participants will be able to:

• Define acceptable pieces of documentation.
• Understand the required elements to meet PHAB documentation standards.
• Identify compliant document examples ready for upload.
Agenda

- Must read references
- What is documentation?
- Key elements for documentation
- Acceptable programs and activities
- Required elements
- Selection of documents
- Web content
- Email content
- Guided Practice
Guidance on Appropriate Examples from Programs and Activities for Use as Documentation for PHAB Accreditation

January 2016

PHAB accreditation provides an opportunity for public health departments across the United States to demonstrate excellence in public health services and programs. Accreditation is a voluntary process that requires departments to meet or exceed national standards in areas such as public health promotion, disease prevention, and health protection.

The focus of PHAB’s Standards and Measures is on population-based disease prevention, health promotion, and health protection.

- Population-based approach to developing and implementing public health services.
- Population-based standards and measures that are measurable and data-driven.
- A framework for continuous improvement in public health services.

For more information, contact:
Public Health Accreditation Board
1600 Uddo Street, Suite 200
Alexandria, VA 22311-3160
Phone: 703-779-4840

www.phaboard.org

Overarching Principles for Activities and Services Outside of PHAB’s Scope

Overarching principles about what PHAB’s accreditation does not cover include the following:

1. Individual patient care and associated interventions, whether provided in the inpatient, hospital, or other facility such as a school or correctional facility, or which have case management components are not included in PHAB’s scope of authority.

2. PHAB’s liability does not extend to the ensuring of the availability of a health care system to provide individual patient care services.

3. Even though PHAB recognizes that some health departments in the community, standards and measures that would assure patient care would look very different than the population-based standards and measures. Additionally, for health departments who also operate Federally Qualified Health Centers (FQHCs), there may be accreditation available through the Joint Commission (JCAHO). For individual services and interventions related to mental health services, health departments can also consider those specialty accreditations.

4. Programs for the reimbursement for health care services, such as Medicaid or other health care insurance programs are outside of the scope of PHAB accreditation.

5. These programs have oversight from either the Center for Medicaid and Medicare Services (CMS) or from state insurance commissions or authorities.

6. Social services and educational supports programs, such as those for the developmentally disabled, services for disabled adults, child welfare programs, child abuse intervention, domestic violence, intimate partner violence intervention and advocacy, low income housing, and other social services, are not included in PHAB’s accreditation process.

The distinction between programs between public health and social services. The definition of “social services” is an activity designed to improve social well-being, specifically organized philanthropic assistance (as of the disabled or disadvantaged) (http://www.merriam-webster.com/dictionary/socialservices).

7. Individual professional and facilities licensure and certificate programs are outside of the scope of PHAB accreditation.

8. Individual professional and facilities license and certificate programs are unique to state licensure laws and state-authorized functions. Health facilities licensure and certification activities are not included in PHAB’s accreditation standards since that oversight is often a combination of federal contracting, state law, and state or local rules and regulations. This also includes Certificate of Need (CON) functions.

9. Animal health programs, such as animal shelters, catch-and-release efforts, and rabies vaccination clinics, are outside of the scope of PHAB accreditation.

PHAB has no standards that relate to animal health or animal control in any capacity.
DPH Policies

- **Review** the Division Documentation Guidelines Policy: DPH - 021. This aligns with PHAB Standards AND Best Practice

### Division of Public Health Documentation Guidelines

<table>
<thead>
<tr>
<th>Type of Documents</th>
<th>Examples</th>
<th>Is it Authentic?</th>
<th>Is it Dated?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Policy/Procedures</td>
<td>See Policy and Procedure Template</td>
<td>Actual Signature</td>
<td>X</td>
</tr>
<tr>
<td>Meeting Agenda</td>
<td>See Agenda &amp; Minutes Templates</td>
<td>X</td>
<td>M/D/Y</td>
</tr>
<tr>
<td>Meeting Minutes</td>
<td>See Agenda &amp; Minutes Templates</td>
<td>X</td>
<td>M/D/Y</td>
</tr>
<tr>
<td>Guidance Documents</td>
<td>Plans, Manuals, Flowcharts, Organization Charts, Desk Manuals, Job Aides, etc.</td>
<td>X</td>
<td>M/Y</td>
</tr>
<tr>
<td>Reporting Documents</td>
<td>Data summaries &amp; analysis, Audit reports, After-action reports, Work plans, Financial reports, QI reports, etc.</td>
<td>X</td>
<td>M/Y</td>
</tr>
<tr>
<td>Communications</td>
<td>Email, Memos or Letters, Distribution lists, Health alerts, etc.</td>
<td>To/From</td>
<td>X</td>
</tr>
<tr>
<td>Educational/Presentation Materials</td>
<td>Brochures, Flyers, Websites, News releases, Newsletters, Posters, Power Point, etc.</td>
<td>X</td>
<td>M/Y</td>
</tr>
</tbody>
</table>

Revised: December 4, 2014
What is DOCUMENTATION?

It is evidence how a health department can prove they are conforming to the PHAB measures

Reports
Brochures & flyers
Plans
Policies & procedures
Meeting agendas
Media communications
Training presentations
Sign-in sheets
Documents presented at meetings
Meeting minutes

AND MORE!
Minimum Requirements for Documentation

No draft documents
No confidential information
Must be in effect and in use at the time of submission
  If no specific timeframe is cited, all documentation must be within the last five years (July, 2011 – July, 2016)
Two examples per measure, plus one alternate, unless noted.
Multiple documents can be combined to create one example.
PDF format, whenever possible
No sideways documents
Documents may be used for more than one measure
  i.e., Can use same document more than once
Completely paperless process
# MINIMUM REQUIREMENTS CHECKLIST

<table>
<thead>
<tr>
<th>Measure:</th>
<th>Reviewer:</th>
<th>Date:</th>
</tr>
</thead>
</table>

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Is the document <strong>FINAL</strong> (no draft)?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>2</td>
<td>Is the document in <strong>PDF format</strong> for PHAB submission?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>3</td>
<td>Does the document comply with DPH Policy – 021 Document Guidelines?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>4</td>
<td>Does the document meet the measure in the time line measurement based on a June, 2016 ePHAB submission date</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>5</td>
<td>If the document contains CONFIDENTIAL (personal information, identifiers) information, is that confidential information <strong>DELETE</strong>D or COVERED?</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>6</td>
<td>Is this document <strong>in effect</strong> and <strong>in use</strong> at the time of submission?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>7</td>
<td>Is the <strong>documentation</strong> (policy, protocol, brochure) done by <strong>another agency</strong> on behalf of the Division? If yes, include the evidence of such agency acting on behalf of the Division, such as MOU, letter of agreement, contract, executive order, ordinance, rules/regulations, etc.</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>8</td>
<td>Are multiple documents used to demonstrate <strong>one</strong> measure? If yes, does it include an explanation that describes how the documents, together, demonstrate conformity with the measure?</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>9</td>
<td>If there are multiple documents, are they formatted in PDF?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>10</td>
<td>If minutes of a meeting are used to meet this measure do any attachments referenced in the minutes need to be included?</td>
<td>☐ Yes ☐ No ☐ N/A</td>
</tr>
<tr>
<td>11</td>
<td>Is there the correct number of examples provided, plus one extra?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>12</td>
<td>Does the document indicate which section addresses the measure (highlighted in yellow) and PHAB measure indicated?</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

**These are the minimum elements required for uploading to SharePoint.**

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*January, 2015*
Acceptable Programs and Activities

Population vs Individual

• If it’s population based then okay to use
• If individual, personal or clinically based, then not acceptable.
• If questions, go to your team lead.
Examples

• **Acceptable**
  “. . . Documentation of population health education about the use of condoms for disease prevention . . .”

• **Not acceptable**
  “. . . Documentation on individual HIV testing and counseling . . .”

(Public Health Accreditation Board Standards and Measures Version 1.5 Approved December 2013, pg. 10)
PHAB Requirements

Must reflect the work of our Division
Must not contradict or conflict with other documentation
Must be verifiable
Must be representative of the entire range of programs and services in the division
Must be dated and show Evidence of Authenticity
Selection of Documents

• Only submit the needed portion of the document.

• Highlight the applicable section, unless it is the entire document.

• Indicate which measure is being met. Must be printed (e.g. insert text box or print on a label).

• Make the document a PDF, if possible.

• If multiple documents are needed; combine into one PDF.
Evidence of Authenticity

Highlight

What meets
The measure

Measure

PHAB 9.1.6

Evidence of Authenticity

Single Document Example

Division of Public Health
Idaho Department of Health and Welfare

PHAB 9.1.6

Division of Public Health SFY15 Strategic Plan

Policy Statement:
"Health care is vital to all of us some of the time, but public health is vital to us all of the time."
-C. Everett Koop, Former U.S. Surgeon General

Public Health Defined:
Public Health is the science and practice of protecting and improving the health of a community, as by preventive medicine, health education, control of communicable diseases, application of sanitary measures, and monitoring of environmental hazards" (American Heritage Dictionary).

Public health systems are population-based and focus on delivering public health services and health promotion programs that affect populations as a whole, but also address the needs of special and underserved groups in accessing needed services. Collectively, Public health prevents disease, injury, and disability; protects against environmental hazards; promotes physical and mental health; responds to disasters and emerging diseases; and prevents spread of infectious diseases.

Public Health in Idaho:
The Idaho Division of Public Health serves the entire state by providing the infrastructure for population health initiatives and acts as the first responder during times of public health need. The Division aligns itself with the Centers for Disease Control and Prevention's Ten Essential Public Health Services and the Public Health Accreditation Board Standards.

The Division of Public Health upholds the principle that policy and prevention provide a strong foundation for good, overall population health. During times of disease outbreaks or environmental threats within the state, the Division of Public Health stands ready to lead the response and mediate the activities of federal, state, local, and private partners.

Public Health in Idaho serves the entire population from infants to the elderly in the areas of nutrition, immunization, physical activity, safety, and disease prevention, detection, and control through safety net programs and policy influence behavior.

In achieving the greatest impact, the Division of Public Health strongly believes that public health is not limited within the traditional boundaries of the health structure, but must be woven across all those who serve people, including but not limited to local public health departments, private physicians, community organizations, hospitals, schools/dayscares, and private businesses. The Division of Public Health encourages public-private partnerships in achieving the maximum benefit for all citizens, of all generations.

Adopted October 2014
What if multiple documents are needed to fulfil one measure?
Evidence of Authenticity

Date

AGENDA

Statewide Idaho Home Visiting Summit
Tuesday, October 28, 2014
9:00 a.m. – 4:00 p.m.
Lookout Room, Boise State University Student Union Building
1910 University Dr., Boise, ID
Parking: Lincoln Parking Structure (on the corner of S. Lincoln Ave. and W. University Dr.)

9:00 a.m. – 9:30 a.m.
Welcome, Introductions, and Overview of Summit

9:30 a.m. – 11:30 a.m.
Collective Impact,
Nora Carpenter, Director,
United Way Treasure Valley

11:30 a.m. – 11:45 a.m.
Break

11:45 a.m. – 12:30 p.m.
Survey Results: Statewide Home Visiting Program Assessment
Deborah Drain, State Lead,
Maternal, Infant, and Early Childhood Home Visiting Program

12:30 p.m. – 1:30 p.m.
Lunch (provided)

1:30 p.m. – 2:30 p.m.
Application: Root Cause Analysis and Discussion Tables
Dan Ward, Performance Improvement Manager, Division of Public Health
Jacque Wilson, Manager, Maternal and Child Health Program
Gary Rilema, Family and Community Health Services Director, Eastern Idaho Public Health
Holly Whitworth, Early Childhood/P&T Program Coordinator, Help, Inc.
Diane Demarest, Chief Operating Officer, Family Advocates

2:30 p.m. – 2:45 p.m.
Break

2:45 p.m. – 3:30 p.m.
Root Cause Analysis and Discussion Tables (Continued)

3:30 p.m. – 4:00 p.m.
Future Agenda Setting and Reflection

4:00 p.m.
Adjourn
### Multi Document Example 2 of 4

#### Evidence of Authenticity

**Date**

**Measure**

**Highlight**

**What meets the measure**

---

**Division of Public Health**

*I* *Idaho Department of Health and Welfare*

**PHAB 9.1.6**

**Evidence of Authenticity**

**Multi Document Example 2 of 4**

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**Division of Public Health**

*Idaho Department of Health and Welfare*

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### Idaho Immunal Home Visiting Summit: October 28, 2014

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Email</th>
<th>Organization</th>
<th>Date Attending</th>
<th>Time</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Armenta</td>
<td>Linda</td>
<td><a href="mailto:linda@strongandsafe.org">linda@strongandsafe.org</a></td>
<td>Family Advocates</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>L. Armenta</td>
</tr>
<tr>
<td>Bock</td>
<td>Cheryl</td>
<td><a href="mailto:chchion@iph5.idaho.gov">chchion@iph5.idaho.gov</a></td>
<td>South Central Public Health District</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>C. Bock</td>
</tr>
<tr>
<td>Bologa</td>
<td>Sandrea</td>
<td><a href="mailto:sandrea@boisestate.edu">sandrea@boisestate.edu</a></td>
<td>Boise State University</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>S. Bologa</td>
</tr>
<tr>
<td>Bowerfield</td>
<td>Alicia</td>
<td>alidahstrongandsafe.org</td>
<td>Family Advocates</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>A. Bowerfield</td>
</tr>
<tr>
<td>Bergeron</td>
<td>Kristin</td>
<td><a href="mailto:kristin@idhw.idaho.gov">kristin@idhw.idaho.gov</a></td>
<td>Department of Health and Welfare</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>K. Bergeron</td>
</tr>
<tr>
<td>Bird</td>
<td>Diana</td>
<td><a href="mailto:diana@iph5.idaho.gov">diana@iph5.idaho.gov</a></td>
<td>Pendleton Health District</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>D. Bird</td>
</tr>
<tr>
<td>Bird</td>
<td>Cortnie</td>
<td><a href="mailto:cortnie@iph5.idaho.gov">cortnie@iph5.idaho.gov</a></td>
<td>South Idaho Public Health</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>C. Bird</td>
</tr>
<tr>
<td>Chu</td>
<td>Sandy</td>
<td><a href="mailto:sandychu@gmail.com">sandychu@gmail.com</a></td>
<td>Boise State University</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>S. Chu</td>
</tr>
<tr>
<td>Clisbaugh</td>
<td>Lil</td>
<td><a href="mailto:lclisbaugh@gmail.com">lclisbaugh@gmail.com</a></td>
<td>St. Alphonsus</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>L. Clisbaugh</td>
</tr>
<tr>
<td>Crooks</td>
<td>Christy</td>
<td><a href="mailto:chriscrooks@idhw.idaho.gov">chriscrooks@idhw.idaho.gov</a></td>
<td>Department of Health and Welfare</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>C. Crooks</td>
</tr>
<tr>
<td>Davis</td>
<td>Donna</td>
<td><a href="mailto:donnadavis510@gmail.com">donnadavis510@gmail.com</a></td>
<td>Intern</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>D. Davis</td>
</tr>
<tr>
<td>Demarest</td>
<td>Diane</td>
<td><a href="mailto:diane@strongandsafe.org">diane@strongandsafe.org</a></td>
<td>Family Advocates</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>D. Demarest</td>
</tr>
<tr>
<td>Demarest</td>
<td>Allison</td>
<td><a href="mailto:allison@strongandsafe.org">allison@strongandsafe.org</a></td>
<td>Family Advocates</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>A. Demarest</td>
</tr>
<tr>
<td>Donnelly</td>
<td>Jill</td>
<td><a href="mailto:jill@stvincentdepaulidaho.org">jill@stvincentdepaulidaho.org</a></td>
<td>FAST Program of St. Vincent de Paul</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>J. Donnelly</td>
</tr>
<tr>
<td>Drain</td>
<td>Deborah</td>
<td>drainidaho.gov</td>
<td>Department of Health and Welfare</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>D. Drain</td>
</tr>
<tr>
<td>Dupont</td>
<td>Kathleen</td>
<td>kath@<a href="mailto:eenduppong@gmail.com">eenduppong@gmail.com</a></td>
<td>Treasure Valley AEYC</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>K. Dupont</td>
</tr>
<tr>
<td>Fournier</td>
<td>Lorraine</td>
<td><a href="mailto:lorraine@cdid.idaho.gov">lorraine@cdid.idaho.gov</a></td>
<td>Central District Health Department</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>L. Fournier</td>
</tr>
<tr>
<td>Gessew</td>
<td>Kyle</td>
<td><a href="mailto:kyeesew@nsmlhs.org">kyeesew@nsmlhs.org</a></td>
<td>Mountain States Early Head Start</td>
<td>Oct 28, 2014 at 9:00 AM to 6:00 PM</td>
<td>9:00</td>
<td>K. Gessew</td>
</tr>
</tbody>
</table>
MIECHV
Home Visiting Summit

Presentation:
Root Cause Analysis

October 28, 2014

By Dan Ward, MPA
Performance Improvement Manager
Idaho Department of Health and Welfare,
Division of Public Health

PHAB 9.1.6
Measure
All 4 of these documents = one example

Combine all into one PDF
Web Content

Web Content Must Contain:

- Web address
- Date
- Complete content
- Evidence of Authenticity
- Measure
Evidence of Authenticity

Measure

Date

Web Example

What meets The measure

PHAB 9.1.6

Web Address

Web Content

• Just a copy of web link – **Not Acceptable**

http://www.houstontx.gov/health/
Email

Email Content Must Include:

- Sender
- Recipient(s)
- Date
- Evidence of Authenticity (i.e. Signature/Division of Public Health)
- Readable
- Complete communication
- Measure

February, 2015
Guided Practice

Using the list of required PHAB elements, identify any missing element in the following examples
**List the missing required elements**

PHAB 9.1.6

### Three Stooges Meeting

**Agenda**

<table>
<thead>
<tr>
<th>Location: PTC – 4th floor conference room</th>
<th>Date: 2/3/2015</th>
<th>Time: 1:00pm</th>
</tr>
</thead>
</table>

**Participants**

<table>
<thead>
<tr>
<th>Larry</th>
<th>Curly</th>
<th>Moe</th>
<th>Shemp</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Time Allotted Agenda Item</th>
<th>Discussion (Key Points, Decisions, etc.)</th>
<th>Objective/Decision Needed</th>
<th>Due Date</th>
<th>Responsible Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 mins</td>
<td>Call to order</td>
<td></td>
<td>2/3/15</td>
<td>Larry</td>
</tr>
<tr>
<td>15 mins</td>
<td>How to make people laugh</td>
<td>Make people laugh</td>
<td>2/3/15</td>
<td>All</td>
</tr>
<tr>
<td>20 mins</td>
<td>Comical fight</td>
<td>No real objective. This is what they do in each episode</td>
<td>2/3/15</td>
<td>All</td>
</tr>
<tr>
<td>Next Meeting Agenda</td>
<td>Repeat everything they did today at the meeting</td>
<td>No real objective</td>
<td>3/4/15</td>
<td>All</td>
</tr>
</tbody>
</table>
List the missing required elements

## Three Stooges Meeting

### Minutes

<table>
<thead>
<tr>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Larry</td>
</tr>
<tr>
<td>Cudy</td>
</tr>
<tr>
<td>Moe</td>
</tr>
<tr>
<td>Shemp</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Discussion (Key Points, Decisions, etc)</th>
<th>Action Required</th>
<th>Due Date</th>
<th>Responsible Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call to order</td>
<td>“Hello, Hello, Hello . . . Hello”</td>
<td>None</td>
<td>2/3/15</td>
<td>All</td>
</tr>
<tr>
<td>Make people laugh</td>
<td>Show pictures from their TV show and movies</td>
<td>See collection of pics</td>
<td>2/3/15</td>
<td>All</td>
</tr>
<tr>
<td>Next Meeting Agenda</td>
<td>Repeat everything they did today.</td>
<td>Nothing</td>
<td>3/4/15</td>
<td>All</td>
</tr>
</tbody>
</table>
List the missing required elements
If all were combined together would it be acceptable?

### PHAB 9.1.6

#### Three Stooges Meeting

**Agenda**

<table>
<thead>
<tr>
<th>Time Allocated</th>
<th>Discussion (Key Points, Decisions, etc)</th>
<th>Objective/Decision Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>15 mins</td>
<td>Call to order</td>
<td></td>
</tr>
<tr>
<td>15 mins</td>
<td>Have people laugh</td>
<td>Make people laugh</td>
</tr>
<tr>
<td>15 mins</td>
<td>Contact agent</td>
<td>Make a decision</td>
</tr>
</tbody>
</table>

**Next Meeting Agenda**

- Repeat everything they did under the meeting
- Make a decision

**Participants**

- Larry
- Moe
- Shemp

**Minutes**

<table>
<thead>
<tr>
<th>Agenda Item</th>
<th>Discussion (Key Points, Decisions, etc)</th>
<th>Action Req</th>
</tr>
</thead>
<tbody>
<tr>
<td>Call to order</td>
<td>&quot;Hello! Hello! Hello! Hello!&quot;</td>
<td>None</td>
</tr>
<tr>
<td>Make people laugh</td>
<td>Show photos from their TV show and movies</td>
<td>Set collector</td>
</tr>
<tr>
<td>Next Meeting Agenda</td>
<td>Repeat everything they did today.</td>
<td>Nothing</td>
</tr>
</tbody>
</table>
Remember to make the job for PHAB as easy as possible!