

## 5930 Work Plan Consolidated Contract Deliverable

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**Performance Measure #1** – Increase the uptake of new and under-used child and adolescent vaccines; specifically focusing improvement efforts and reporting on Varicella, Rota Virus, HPV and Pediatric Influenza.

**Reporting Measure**

**A:** Number of doses of vaccine ordered by each LHJ

**B:** Number of doses administered as recorded in CHILD Profile

PM#	Objectives / Strategies	Action	Status As of Dec. 31, 2009
1A	Increase utilization of new and underused vaccines through education of target audiences	Educate public, medical providers, school nurses, parents, and employers	<ul style="list-style-type: none"> <li>• 3 Radio presentations discussing the importance of vaccinations and specifically H1N1 vaccinations</li> <li>• Community Rotary presentation 10/8/09</li> <li>• Epi road Show presentation- Provider education plan</li> <li>• School nurse updates via email and fax.</li> <li>• 4 school nurse vaccine update meetings.</li> <li>• KCPHD web site links to vaccine information</li> <li>• 2 drive – through Seasonal Influenza community clinics</li> <li>• 2 H1N1 Community clinics</li> <li>• 27 on-site H1N1 school vaccination clinics</li> <li>• 4 onsite free school vaccination clinics in 2009</li> <li>• One Saturday Spring free immunization clinic in 2009</li> <li>• 166.8% increase in the four target vaccines from 2008 to 2009</li> </ul>
1A	Increase number of patients completing vaccine series; reduce	Implement reminder/recall system	<ul style="list-style-type: none"> <li>• Reminder/recall utilized by</li> </ul>

	number of students with immunization exemptions	from CHILD Profile and assist local providers with same	<p>KCPHD for H1N1 2<sup>nd</sup> dose needs of school participants,</p> <ul style="list-style-type: none"> <li>• KCPHD tested measles reminder recall in 2008. Some local providers participated in the MMR recall.</li> <li>• Local providers stated no time to fully implement this system for all vaccines.</li> </ul>
1A	Develop a reporting tool for communicating immunization rates to public health partners	Hire 1 FTE Assessment Coordinator I <b>Gained and lost</b>	<ul style="list-style-type: none"> <li>• Provider Immunization Report- includes parent &amp; provider survey responses, graphs of adolescent immunization rates and most common response rates.</li> </ul>
1B	Provide a baseline estimate for coverage levels of new and underused vaccines	Check for use of new and underused vaccines during AFIX visits	<ul style="list-style-type: none"> <li>• Conducted one more than the required number of AFIX visits in 2008 and 2009</li> <li>• Created &amp; administered Adolescent survey</li> <li>• Compiled survey &amp; data collection results</li> <li>• Each provider received data collection results specific to their facility</li> </ul>
1B	Increase the use of CHILD Profile by local providers	Facilitate training for local providers on the use of CHILD Profile and CHILD Profile Vaccine Ordering Module	<ul style="list-style-type: none"> <li>• Facilitated creation of electronic link between electronic health records used by local providers and Child Profile registry.</li> </ul> <p>Currently 6/7 are utilizing child profile. One on one education is provided at AFIX/VFC visits.</p>
1B	Assist local providers with back data entry of immunization information into CHILD Profile	Hire 1 FTE Public Health Clerk I	<p>Gained and lost position of PH Clerk 1</p> <p>Offered back data entry support to local clinics, they declined assistance.</p>

**Performance Measure #2** – Improve the timely, complete identification and standard, effective investigation of notifiable conditions per WAC 246-101.

**Reporting Measure**

**A:** Percent of notifiable condition cases reported to the LHJ within the required timeframe (per WAC)

**B:** Percent of notifiable condition cases reported to the LHJ where investigation was initiated within the timeframe

specified in the Guidelines

**C:** Percent of notifiable condition cases reported to the LHJ with a completed investigation as indicated by completion of “essential fields”

PM#	Objectives / Strategies	Action	Status As of Dec. 31, 2009
2A	Increase proper reporting of CD cases to LHJ by local providers	<ul style="list-style-type: none"> <li>• Provide CD training to providers about reporting requirements</li> <li>• Distribute updated notifiable conditions educational materials to providers</li> </ul>	<ul style="list-style-type: none"> <li>• Conducted annual CD notifiable conditions presentations to all providers included new reporting tools</li> <li>• Written educational materials include notifiable conditions charts for all provider &amp; lab stations.</li> <li>• Developed new EMR reporting &amp; investigation templates.</li> </ul>
2B	Initiate investigations within the timeframe specified in the guidelines	Use PHIMS reporting to monitor investigation initiation timeframes	<ul style="list-style-type: none"> <li>• EMR reportable disease template</li> <li>• Quarterly audits</li> </ul>
2B	Use After Action Reports to update policies and procedures that will ensure more complete investigations for CD cases, including outbreak investigations	<ul style="list-style-type: none"> <li>• Conduct After Action QAs with LHJ staff and medical providers to identify areas for future improvement</li> <li>• CD coordinator will work with assessment coordinator to make document changes</li> </ul>	Conducted AAR on Pertussis, Norovirus, Salmonella, and H1N1 (Initial assessment of activities)
2C	Increase timeliness and completeness of data entry into PHIMS databases	<ul style="list-style-type: none"> <li>• Public Health Clerk I to update tracking system for notifiable conditions</li> <li>• Develop routing slip for notifiable cases</li> </ul>	Completed in 1/09 updated in 1/10

**Performance Measure #3** – Develop and implement effective community and health care system interventions to address obesity and its consequent burden of chronic disease. Interventions may target worksites, schools, communities, or primary medical care.

**Reporting Measure**

**A:** Number and description of LHJ activities and interventions to address obesity or chronic disease and association risk factors in the community.

PM#	Activity	Resources	Status As of Dec. 31, 2009
3	Compile data for Shape Up Kittitas County staff to be used in their program	Assessment Coordinator to	<ul style="list-style-type: none"> <li>• Assessment coordinator</li> </ul>

	planning and interventions	compile chronic disease data, including incidence and demographic data	<p>and Shape Up staff designed, distributed, and analyzed a survey regarding a sharrow pilot project conducted during Summer 2009.</p> <ul style="list-style-type: none"> <li>• Assessment staff provided updated BRFSS and HYS data for Shape Up educational materials.</li> </ul>
3	Compile data for WIC and/or Breastfeeding Coalition to be used in their program planning and interventions	Assessment Coordinator to work with WIC coordinator to gather and compile required data	WIC program is no longer with Kittitas County Public Health Department