

5930 Work Plan Template Consolidated Contract Deliverable

LHJ Name: Kittitas County Public Health Department
 Date: 02/05/2010
 LHJ Work Plan Contact: Linda Navarre
linda.navarre@co.kittitas.wa.us
 509-962-7068

Due: February 15, 2010
 Send to: tiffany.escott@doh.wa.gov
 FAX (360) 586-7424

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
1	SAMPLE: Visit every provider in the county that uses state supplied vaccine at least 1x this calendar year to provide education and training on CHILD Profile and recruit / improve their participation.	Hire 1 new RN (1FTE)
1	SAMPLE: Work with providers to incorporate the use of the reminder / recall portion of CHILD Profile to increase child vaccine timeliness and administration	Contact providers and help them implement reminder/recall activities.
1A	Increase provider immunization rates of new and underused vaccines through adoption and implementation of new policies and procedures to immunize at every opportunity.	<ul style="list-style-type: none"> • Provide educational in service to all provider clinics. • Promote the adoption of new immunization policy and procedures to vaccinate at every opportunity. • Implement standing orders for clinic nurses to administer vaccines. • Develop a quick access vaccine contraindications tool for use by providers to evaluate the appropriateness of providing a vaccine to a client.
1A	Increase community awareness of HPV disease, benefits of prevention through vaccination, and opportunities to receive vaccination through educational presentations targeting parents and adolescents.	<ul style="list-style-type: none"> • Develop a media campaign to target parents and adolescents. • Provide one onsite presentation per secondary school.
1A	Increase public awareness of new and underused vaccines through education to target populations.	<ul style="list-style-type: none"> • Develop a social media plan targeting high risk groups. • Educate parents and the general community through the use of innovative outreach opportunities through social media venues:

		<p>movie theatre preview ads (slides promoting uptake of recommended vaccines and resources to receive them) school parent group email list serves, childcare and home-based childcare centers, KCPHD web site, mother's support groups web pages & list serves (ex:MOPS).</p>
1A	Decrease the barriers to new and underused vaccines through on-site school vaccination clinics.	<ul style="list-style-type: none"> • Provide on-site school vaccination clinics for Kindergarten registration and 6th grade entry orientations. • Select one additional school district for onsite seasonal Influenza vaccinations (total of 2 school districts targeted).
1A	Decrease immunization exemption rates in Kittitas County.	<ul style="list-style-type: none"> • Target and provide school district immunization gatekeepers and providers with tools for increasing communication strategies on successful dialogs with parents who are resistant to vaccinations.
1B	Increase accuracy of school immunization records through provision of CPIR back data entry and immunization document analysis support to school nurses.	<ul style="list-style-type: none"> • Continue to employ Public Health Clerk I for data entry support. • Provide support to all school nurses with one public health immunization data entry specialist. • Complete a data assessment analysis of school immunization record accuracy by comparing previous school immunization records to CPIR data (one elementary school).
1B	CPIR Technical support will be offered to every provider clinic to increase quality improvement project development.	<ul style="list-style-type: none"> • All providers will receive demonstrations of CPIR data collection tools for immunization uptake

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
2	SAMPLE: Hire additional new staff; send to CD and PHIMs training; familiarize them with 2002 guidelines in PHIM; focus contact investigation and follow-up with every Chlamydia case.	Hire .5 FTE of disease investigator
2	SAMPLE: Conduct an in-house training on the policy for timely and complete case investigation	----
2A	Increase rates of notifiable conditions reported within required timeframe by providers through educational trainings.	<ul style="list-style-type: none"> • Provide CD training to all providers on an annual basis. • New providers will receive CD training within one month of active practice.
2B	Improve database capabilities for reporting communicable diseases and bidirectional sharing of health information with providers.	<ul style="list-style-type: none"> • Build a CD reporting template into our county’s EMR health information exchange. • Develop two new reportable disease EMR templates for public health staff. • Facilitate the activation of a bidirectional functional link of CD template reporting directly into PHIMS (Currently we have double data entry)
2B & 2C	Meet Washington State’s DOH reportable disease requirements for case investigation timeframes and completeness of reporting requirements by assuring adequate communicable disease staffing to perform disease investigations, coordinate outbreak responses and complete surveillance and reporting activities.	<ul style="list-style-type: none"> • Incorporate use of current disease investigation protocols into annual performance expectations of staff. • Annually review and revise, if needed, the disease investigation protocols. • Perform a cost analysis for increase in hours for a CD clerk for data entry, and additional public health nurse hours for CD and TB work • Prepare and evaluate annual disease surveillance report summary • Improve school-based

		<p>absenteeism surveillance system.</p> <ul style="list-style-type: none"> • Ensure access to regional epidemiologist with .2 FTE routine support. • Develop enhanced protocols for TB outreach and case management.
2B	After Action Reports will be used to update policies and procedures to ensure a more complete investigation process.	<ul style="list-style-type: none"> • Conduct After Action QAs with LHJ staff and medical providers to identify areas for improvement. • Implement quality improvement measures by incorporating changes into the policies and procedures, reporting forms and EMR templates.
2C	Increase completeness of essential data entry fields into PHIMS database through in house staff training and utilization of PHIMS training tools.	<ul style="list-style-type: none"> • Conduct quarterly quality improvement chart reviews. • Ensure all new CD nurses receive PHIMS training and ongoing performance evaluations to determine additional training needs.

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#	Objectives/Strategies/Activity	Resources/Action
3	SAMPLE: Contract with xyz organization to conduct community health assessment on obesity related topics	Contracted services
3	SAMPLE: Initiate a coalition with a local school district to provide obesity prevention education	---
3	Organize and facilitate a local coalition which focuses on increasing access to healthy foods and nutrition education in order to address obesity.	<ul style="list-style-type: none"> • Recruit additional coalition members for representation from school parent groups, local businesses and local government. • Develop focus areas and a plan for 2010 • Implement strategies.
3	Provide support for community activities which increase access to healthy foods and nutrition education in order to address obesity	<ul style="list-style-type: none"> • Assist with planning and recruiting volunteers for gleaning project, • Assist with writing a WIC fruit and vegetable grant, • Help promote community gardens
3	Work with coalition and other community partners to conduct a community food assessment to highlight both community resources and areas of need in terms of access to healthy food and nutrition.	<ul style="list-style-type: none"> • Work with the Coalition to develop a food assessment survey. • Implement survey in target areas and within target populations using both electronic and written formats to assure accessibility and equal representation of the community. • Analyze and report data to key stakeholders to influence policy at the local level.
3	Review and evaluate local city and county healthy food policies.	<ul style="list-style-type: none"> • Review current city and county health food policies. • Research best practices from other city and counties. • Develop one new Kittitas County policy for implementation in 2011.
3	Through the Kittitas County electronic medical record health information exchange, access and report chronic disease and obesity data to influence development and use of 'best practices' for chronic disease management and prevention by local providers.	<ul style="list-style-type: none"> • Develop a report to extract chronic disease data beginning with BMI and Diabetes. • Assess chronic disease data quarterly. • Research best practices for obesity and diabetes management. • Develop EMR templates to support change in care

		<p>delivery.</p> <ul style="list-style-type: none">• Prepare for 2011 implementation of new care delivery strategies including evaluation and quality improvement activities.• Support providers in securing reimbursement for innovative services from payer sources.
--	--	---