

## Whatcom 5930 Work Plan 2010-2011

LHJ Name: Whatcom County  
Date: February 12, 2010  
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Due: February 15, 2010  
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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
1	Increase linkage to and effective use of Child Profile <ul style="list-style-type: none"> <li>▪ By December 31, 2011, one provider practice that does not routinely download data into Child Profile or do not upload data will demonstrate improved use of Child Profile (Target: 3 practices)</li> </ul>	<ul style="list-style-type: none"> <li>▪ Provide incentives/ supports for providers downloading patient immunizations into Child Profile.</li> <li>▪ Health Dept PHN's will use CHILD Profile when assessing provider's immunization rates and while encouraging practices to increase their usage of CP.</li> </ul>
1	Increase uptake of first dose of Tdap, Meningococcal vaccines for 11-12 year olds and third dose of HPV for 11-12 year old females.	<ul style="list-style-type: none"> <li>▪ Health Dept PHN's will use CHILD Profile for assessment.</li> <li>▪ Health Dept PHN's will encourage use of vaccines through newsletter, monitoring and encouraging individual provider vaccine usage.</li> </ul>
1	Increase uptake of Rota virus and pediatric influenza.	<ul style="list-style-type: none"> <li>▪ Health Dept PHN's will encourage use of vaccines through monitoring of individual provider's usage. PHN's will discuss barriers with those providers with low usage and encourage all providers to increase vaccine usage.</li> </ul>

**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	Increase the percentage of notifiable conditions reported to LHJ by providers within the required timeframe (per WAC)	<ul style="list-style-type: none"> <li>▪ Revisit providers two times each year (in 2010 and 2011) and update "Provider Notebook" with new information.</li> </ul>

2	Increase the percentage of notifiable conditions reported to LHJ by the hospital within the required timeframe (per WAC)	<ul style="list-style-type: none"> <li>▪ Maintain routine surveillance of laboratory confirmed cases and hospitalized patients per Theradoc program.</li> <li>▪ Continue to investigate disease clusters identified through ESSENCE syndromic surveillance program.</li> </ul>
2	Maintain currently high levels of investigations initiated within the timeframe specified in the Guidelines.	<ul style="list-style-type: none"> <li>▪ Continue to update investigation protocols and train staff in their use.</li> <li>▪ Maintain PHIMS reporting.</li> </ul>
2	Increase the percentage of completed investigations as indicated on completed fields in the PHIMS reporting system.	<ul style="list-style-type: none"> <li>▪ Initiate staff peer review of PHIMS reporting.</li> </ul>
2	Continue to improve investigation and follow-up of sexually transmitted diseases to ensure adequate treatment. By December 31, 2010, investigate at least 20% of Chlamydia and 60% of Gonorrhea cases including contact follow up.	<ul style="list-style-type: none"> <li>▪ Revise GC task to reflect plan for increased investigations.</li> </ul>
2	Continue investigation and reporting of Hepatitis C cases.	<ul style="list-style-type: none"> <li>▪ Continue current assignment of staff to this task.</li> </ul>

**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.

<b>PM#</b>	<b>Activity</b>	<b>Resources</b>
3	Finalize and implement Community Action Plan (CAP) for nutrition and physical activity with community partners <ul style="list-style-type: none"> <li>▪ CAP includes policy, systems and environmental approaches to improve access to healthy foods and increase safe, active community environments. Sectors include the community-at-large, health care, schools, community institutions, and worksites.</li> </ul>	National Association of Chronic Disease Directors ACHIEVE Grant