

Priority: Basic Needs
Program Offer Type: Existing Operating
Related Programs:

Lead Agency: Health Department
Program Contact: Arlene Warren

Program Characteristics:

Executive Summary

This program limits the spread of up to 100 different communicable diseases (CD) through prompt scientific-based investigation & treatment of reported/suspected cases, including TB, meningitis, whooping cough & food/waterborne illnesses such as national outbreaks of diseases caused by contaminated commercial food products in 2007, e.g. salmonella in pot pies and Veggie Booty snacks. This program is poised to respond instantly anytime day & night, to any CD event or threat of public health importance.

Program Description

This program is staffed to respond 24/7 by highly-trained public health nurses (PHN) & support staff. Staff is culturally & linguistically competent, speaking 11 languages. This program addresses health inequities & operates 4 functions: 1) Comprehensive TB prevention & control activities provided through a clinic, home visits, a homeless shelter clinic & outreach. RN case management is provided for anyone with active TB disease. High risk screening & prevention services are also provided. Most active TB are in foreign born refugees/immigrants. The homeless account for most of the remaining cases & are offered screening using the locally developed & nationally recognized "TB Card" model. 2) Aggressive epidemiologic investigation is provided in response to outbreaks through structured interviews, & education is provided. PHNs work with state, national & international officials when outbreaks affect County residents & will work with the FBI when an intentional cause is suspected. 3) Occupational Health Office – OSHA requirements are met by providing employees vaccinations, antibody testing & education for blood borne pathogens & TB. Post-exposure assessment & immediate response is provided as necessary. Employees are monitored to ensure compliance with OSHA standards. 4) Traveler's Clinic – Persons traveling out of the US receive vaccines for diseases, e.g., malaria & yellow fever. Medications are recommended/offered after careful review of a traveler's itinerary & history.

Program Justification

The program directly addresses the basic needs of the community by preventing/controlling the spread of CD with a timely & thorough investigation of suspected cases, providing education to the client & all potential contacts, distributing medications, providing antibody testing & vaccines, requiring isolation/quarantine as necessary & providing treatment for those who have contracted or been exposed to a CD. Delay in treatment can allow the disease to spread to others. Untreated diseases are more expensive to treat & may become debilitating. This program minimizes public health costs and promotes residents' health.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY06-07)	Current Year Purchased (FY07-08)	Current Year Estimate (FY07-08)	Next Year Offer (FY08-09)
Output	Client visits for all services	18,022	17,000	17,000	17,000
Outcome	Meningococcal disease case contacts receiving recommendation or prescription	100.0%	100.0%	100.0%	100.0%
Quality	CD case investigations started within timeframe set by Oregon and CDC	98.0%	90.0%	98.0%	90.0%
Quality	TB patients completing treatment within 12 mos. as set by Oregon and CDC	95.0%	90.0%	94.0%	90.0%

Performance Measure - Description

1)Output-All home/shelter/clinic client visits. 2)Outcome-Reflects effectiveness of case contact investigation/response in life-threatening disease. 3)Quality-Measures reflect standards and are reported to the state for CD case investigations & TB patients completing treatment within 12 months as set by Oregon & CDC: standard 90%.

Legal/Contractual Obligation

1)OAR 333-018 and 019: Disease Reporting and investigation and Control of Diseases, Oregon Health Services and CLHO. BT/CD & TB Assurances; OAR 437: OR-OSHA: Blood borne Pathogens 1910.1030. 2)CDC: Immunization of Health-Care Workers, Vol. 46/RR-18. 3)CDC: Guidelines for Preventing the Transmission of TB in Health-Care Facilities, Vol. 43/RR-13.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2008	2008	2009	2009
Personnel	\$1,930,534	\$909,738	\$1,757,318	\$1,275,300
Contracts	\$19,693	\$17,149	\$22,590	\$14,177
Materials & Supplies	\$93,930	\$278,885	\$27,062	\$288,618
Internal Services	\$370,512	\$231,491	\$286,323	\$236,232
Subtotal: Direct Exps:	\$2,414,669	\$1,437,263	\$2,093,293	\$1,814,327
Administration	\$64,286	\$0	\$44,502	\$0
Program Support	\$385,670	\$331,365	\$792,632	\$456,067
Subtotal: Other Exps:	\$449,956	\$331,365	\$837,134	\$456,067
Total GF/non-GF:	\$2,864,625	\$1,768,628	\$2,930,427	\$2,270,394
Program Total:	\$4,633,253		\$5,200,821	
Program FTE	18.41	12.94	19.45	13.15
Program Revenues				
Indirect for dep't Admin	\$93,107	\$0	\$105,617	\$0
Fees, Permits & Charges	\$0	\$522,252	\$0	\$72,630
Intergovernmental	\$0	\$899,054	\$0	\$1,741,697
Other / Miscellaneous	\$0	\$15,957	\$0	\$0
Program Revenue for Admin	\$0	\$331,365	\$0	\$456,067
Total Revenue:	\$93,107	\$1,768,628	\$105,617	\$2,270,394

Explanation of Revenues**Significant Program Changes**

Last year this program was:

#40010 Communicable Disease Prevention & Control