

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, 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 cases 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 (FY07-08)	Current Year Purchased (FY08-09)	Current Year Estimate (FY08-09)	Next Year Offer (FY09-10)
Output	Client visits for all services	15,952	17,000	16,429	14,883
Outcome	Meningococcal disease case contacts receiving recommendation or prescription	100.0%	100.0%	100.0%	100.0%
Quality	CD case investigation started within timeframes set by Oregon & CDC: goal 90%	96.6%	90.0%	97.6%	90.0%
Quality	TB patients completing treatment within 12 mos. as set by Oregon & CDC	94.1%	90.0%	93.3%	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	2009	2009	2010	2010
Personnel	\$1,757,318	\$1,275,300	\$2,060,122	\$904,331
Contracts	\$22,590	\$14,177	\$18,969	\$13,429
Materials & Supplies	\$27,062	\$288,618	\$63,203	\$259,632
Internal Services	\$286,323	\$236,232	\$141,764	\$694,160
Subtotal: Direct Exps:	\$2,093,293	\$1,814,327	\$2,284,058	\$1,871,552
Administration	\$44,502	\$0	\$69,828	\$0
Program Support	\$792,632	\$456,067	\$902,413	\$382,885
Subtotal: Other Exps:	\$837,134	\$456,067	\$972,241	\$382,885
Total GF/non-GF:	\$2,930,427	\$2,270,394	\$3,256,299	\$2,254,437
Program Total:	\$5,200,821		\$5,510,736	
Program FTE	19.45	13.15	20.45	9.67
Program Revenues				
Indirect for dep't Admin	\$105,617	\$0	\$113,465	\$0
Fees, Permits & Charges	\$0	\$72,630	\$6,388	\$94,350
Intergovernmental	\$0	\$1,741,697	\$0	\$1,765,194
Other / Miscellaneous	\$0	\$0	\$0	\$12,008
Program Revenue for Admin	\$0	\$456,067	\$0	\$636,013
Total Revenue:	\$105,617	\$2,270,394	\$119,853	\$2,507,565

Explanation of Revenues

Significant Program Changes

Last year this program was: #40010, Communicable Disease Prevention & Control

There are several factors leading to the decrease in client visits:

1. The Traveler's Clinic is experiencing a drop in client visits presumably due to people traveling less due to the economy.
2. The Occupational Health Office will have a decrease in visits due to a change in employee TB skin testing guidelines by the CDC. The CDC no longer recommends TB skin tests for every employee but only for those employees who are in high risk exposure areas, such as the TB Program, HIV Program, and Corrections.
3. Due to the decrease in TB Program staff, the TB clinic will be closed one day a week, resulting in fewer clinic visits.
4. It will be necessary to decrease the number of health education trainings and community outreach due to the proposed decrease in CD/TB Program staff.