

**Program #40010 - Communicable Disease Prevention and Control** 6/30/2016

**Department:** Health Department **Program Contact:** Amy Sullivan  
**Program Offer Type:** Existing Operating Program **Program Offer Stage:** As Adopted  
**Related Programs:** 40014, 40048  
**Program Characteristics:**

**Executive Summary**

Communicable Disease Services (CDS) protect the health of our community by responding to reportable communicable diseases with prompt disease investigation, and by limiting the spread of these diseases by assuring treatment as needed. CDS upholds Oregon state statutes requiring investigation of and response to approximately 6,000 reportable diseases a year, from tuberculosis (TB) and pertussis to E. coli 0157 and suspected Ebola. CDS responds 24/7 to events of public health importance.

**Program Summary**

Communicable Disease Services (CDS) directly provides services that limit the spread of life-threatening infectious diseases using tools that have been the backbone of public health for over 100 years. CDS' vision includes being a trusted community resource that protects the people of Multnomah County from preventable infectious diseases. We conduct investigations that find people who have been exposed to serious diseases, to make sure they can get the information and care they need to stay healthy. To prevent these diseases before they start, we work with communities to provide education and screening. For people who have already have diseases like TB, we assure access to medicine. For healthcare providers, the program assures the availability of appropriate diagnostic testing by providing a link to state and national laboratories that test for rare pathogens. CDS also serves as the frontline of an international system to track communicable disease threats, collecting and analyzing essential information that is shared with our state and the Centers for Disease Control and Prevention.

Culturally diverse staff includes highly-trained public health nurses, epidemiologists, community health specialists, analysts, and administrative staff with knowledge of infectious disease transmission and state reporting rules. CDS works closely with other Health Department programs, including Environmental Health Services and the Health Officer; and provides educational opportunities for tomorrow's public health professionals. The work encompasses support for newly arriving refugees, who are disproportionately affected by communicable diseases that are common in their countries of origin. The expertise in CDS is also essential for supporting the Health Department's Emergency Response Plan and 24/7 response capacity.

Examples of work include: Comprehensive TB prevention and control activities provided through clinic and home visits, nursing case management, and TB screening; epidemiologic investigation and provision of preventive health measures in response to reportable disease exposures and outbreaks; response planning and implementation for emerging infectious diseases like Ebola and MERS; public health disease surveillance and analysis to track the communicable disease threats in our community; and provision of OSHA-mandated blood-borne pathogens training and health screenings for county employees.

**Performance Measures**

Measure Type	Primary Measure	FY15 Actual	FY16 Purchased	FY16 Estimate	FY17 Offer
Output	Number of disease report responses.	5,367	6,800	5,850	5,850
Outcome	Number of meningococcal disease case contacts receiving recommendation or prescription.	100%	100%	100%	100%
Quality	Percent of tuberculosis (TB) patients completing treatment within 12 months.	100%	90%	95%	90%

**Performance Measures Descriptions**

1) Output: All disease reports and suspect case referrals received, processed, and responded to. PYA, CYE, and NYO account for improved HBV lab report definition. 2) Outcome: Reflects effectiveness of case contact investigation in response to life-threatening diseases (1 FY 2015 contact missing discrete/in notes). 3) Quality: Measure reflect standards, and are reported to the state for TB patients completing treatment within 12 months as set by Oregon & CDC (standard 90%).

## Legal / Contractual Obligation

ORS Chapters 433, multiple sections

OAR 333-012-0065: Epidemiology and Accident Investigation and Reporting

OAR 333, Division 17, 18 and 19: Disease Control, Disease Reporting, and Investigation and Control of Diseases. OAR 333-026-0030: Civil Penalties for Violations of OAR Chapter 333, Divisions 18 and 19

OAR 437: OR-OSHA: Bloodborne Pathogens 1910.1030. CDC recs: Immunization of Health-Care Workers, Vol. 46/RR-18; Guidelines for Preventing the Transmission of TB in Health-Care Facilities, Vol. 43/RR-13.

Oregon Local Health Department Program Elements PE 01, PE 03, PE 25, PE 43. Oregon Health Services and CLHO BT/CD & TB Assurances

## Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2016	2016	2017	2017
Personnel	\$2,688,132	\$567,711	\$2,325,094	\$965,643
Contractual Services	\$32,211	\$25,020	\$46,780	\$17,946
Materials & Supplies	\$13,201	\$75,407	\$66,319	\$33,283
Internal Services	\$0	\$538,240	\$519,289	\$118,858
<b>Total GF/non-GF</b>	<b>\$2,733,544</b>	<b>\$1,206,378</b>	<b>\$2,957,482</b>	<b>\$1,135,730</b>
<b>Program Total:</b>	<b>\$3,939,922</b>		<b>\$4,093,212</b>	
<b>Program FTE</b>	23.86	5.64	19.76	8.14

Program Revenues				
Indirect for Dept. Admin	\$62,880	\$0	\$79,804	\$0
Intergovernmental	\$0	\$1,037,487	\$0	\$979,340
Other / Miscellaneous	\$0	\$160,474	\$0	\$150,348
Service Charges	\$0	\$8,417	\$0	\$6,042
<b>Total Revenue</b>	<b>\$62,880</b>	<b>\$1,206,378</b>	<b>\$79,804</b>	<b>\$1,135,730</b>

## Explanation of Revenues

The program offer is funded by federal and state grants, client fees and the general fund. Federal and state grants support best practices (e.g., TB evaluations and LTBI treatment support for newly arriving refugees) and expanded public health surveillance activities (e.g., Metropolitan Area Pertussis Surveillance) that build upon our statutory responsibilities. Internal service reimbursements are for occupational health services provided to county employees and volunteers.

State of Oregon LPHA (Direct State and Federal through State): \$869,340

Refugee Health Promotion (Direct Federal): \$110,000

Medical Fees: \$156,390

## Significant Program Changes

**Last Year this program was:** FY 2016: 40010-16 Communicable Disease Prevention and Control

We have seen increasing numbers of outbreak investigations; on-going challenges with multidrug resistant strains of TB; and emerging disease threats like Ebola, MERS, and Zika virus. These emerging threats can increase the need for active tracking of suspect cases (e.g., Ebola), or the need to inform communities about potential risks. Our changeable environment requires nimble, well-trained staff who can provide consistent leadership in complex investigation and response activities.

In FY 2017, we will reduce our Operations support staff by a 1.0 FTE Health Assistant. This change could leave us with a roughly one month gap in timely phone call response. We will limit this impact as we move on to an Electronic Health Record (July 2016 roll out), which will free-up other operations staff to fill this role.