

Department: Health Department **Program Contact:** Amy Sullivan
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Adopted
Related Programs: 40010A, 40010B
Program Characteristics:

Executive Summary

The Community Immunization Program (CIP) contributes to a safe environment by implementing the federally subsidized Vaccines for Children (VFC) Program, providing over 1,100 immunizations and helping 415 schools and childcare facilities comply with state school immunization rules. Our activities contribute to the community’s ability to protect children from life-threatening, vaccine-preventable diseases and reduce the costs associated with these diseases.

Program Summary

No child should be unvaccinated because a parent is unable to pay for vaccines. Because vaccine-preventable diseases like measles can spread from person-to-person, childhood vaccination is important not only for individual health but for the health of those with whom children live, play, and go to school. CIP ensures that the basic disease prevention needs of children are met through several interrelated program components. We assure a safe vaccine supply and efficient use of vaccine for the county system of Federally Qualified Health Centers by monitoring the cold chain and conducting physical inventories to meet county quality assurance requirements. We assure access to immunizations by providing childhood immunization services at community sites and our clinic. No VFC-eligible child is turned away due to inability to pay. We conduct activities that uphold state mandates related to school immunization laws – including issuing exclusion orders as needed – and assure that all children in certified day care centers, preschools, kindergartens, Head Start Programs and students in private, alternative and public schools are complete or up-to-date on their immunizations.

Increasing activities to uphold state school immunizations law (47% increase in facilities served), combined with decreased Medicaid revenues and minimal state funding increases, have posed a challenge to this program. Specific activities impacted include training facilities on how to report; outreach to new facilities to assure understanding of reporting requirements; facility-level reviews of exclusion reports to assure accurate reporting; a phone hotline to answer parent and facility questions about the school exclusion process; review of individual student letters; timely data entry to meet state reporting deadlines; and provision of off-site vaccine clinics for parents struggling to bring their children up-to-date in the last weeks before the exclusion date.

Performance Measures

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	Number of immunizations directly provided to keep children in school	1,284	1,400	1,150	300
Outcome	Of facilities assisted, those successful in meeting immunization law requirement	100%	100%	100%	100%
Output	Number of schools & other facilities assisted with immunization law requirements	501	390	415	150
Output	Proportion of all vaccine administration data for CDS entered within 14 days of vaccine administration	100%	NA	100%	95%

Performance Measures Descriptions

Output 1: Number of vaccines provided from 1st Fri. in February thru 3rd Fri. in February. (FY2015 decrease due to reduced support for our school immunization law education and enforcement activities). Output 2: Number of certified childcare facilities, kindergartens, and private schools directly assisted from October through March of the previous fiscal year.

Legal / Contractual Obligation

State-Supplied Vaccine Accountability - OAR 333.047

School Immunization - Amended ORS 433.267, 433.273 and 433.284 (operative March 1, 2014); Administrative Rules 333-050-0010 through 333-050-0140; Oregon Revised Statutes 433.235 through 433.284

ALERT Immunization Registry - Administrative Rules 333-049-0010 through 333-049-0130; Oregon Revised Statutes 433.090 through 433.102

Vaccine Education and Prioritization Plan - Oregon Revised Statutes 433.040; Administrative Rules 333-048-0010 through 333-048-0030

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$198,762	\$219,799	\$150,204	\$230,475
Contractual Services	\$6,914	\$15,743	\$4,787	\$15,772
Materials & Supplies	\$15,941	\$34,641	\$7,060	\$28,278
Internal Services	\$40,697	\$85,411	\$94,838	\$37,415
Total GF/non-GF	\$262,314	\$355,594	\$256,888	\$311,940
Program Total:	\$617,908		\$568,828	
Program FTE	2.27	1.63	1.55	2.45

Program Revenues				
Indirect for Dept. Admin	\$22,803	\$0	\$21,247	\$0
Intergovernmental	\$0	\$201,194	\$0	\$200,884
Service Charges	\$0	\$154,400	\$0	\$111,056
Total Revenue	\$22,803	\$355,594	\$21,247	\$311,940

Explanation of Revenues

Immunizations is funded by the Immunization Special Payments grant included in the intergovernmental agreement between Multnomah County as the Local Public Health Authority (LPHA) and the Oregon Health Authority; patient fees; and by county general fund.

Fed/State LPHA Immunization Special Payments: \$200,884

Patient Fees: \$111,056

Significant Program Changes

Last Year this program was: 40014 Immunizations

From 2006-2013, the number of facilities we directly supported for school exclusion increased by 47% while state funding increased 3%; immunizations revenue declined; and county general fund increases did not keep pace with increasing personnel costs. Because of this funding deficit, this offer excludes 1,625 hours of on-call staffing (value, \$48,861) used from October through March each year to support facilities and parents in meeting school exclusion requirements. Potential impacts include decreased customer service for facilities and parents, poor quality of data for understanding vaccine hesitancy and school readiness; and challenged to meet Program Element 43 requirements related to school immunization laws.