

Department: Health Department **Program Contact:** Amy Sullivan
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Proposed
Related Programs: 40010
Program Characteristics:

Executive Summary

The Community Immunization Program (CIP) contributes to a safe environment by supporting providers in their use of federally subsidized Vaccines for Children (VFC) and 317 (adults at high risk) Programs; and assuring that schools and childcare facilities comply with state school immunization rules. CIP also serves as a provider-of-last-resort, directly administering immunizations. CIP activities contribute to the community's ability to protect children and at-risk adults from life-threatening, vaccine-preventable diseases.

Program Summary

As a program within Communicable Disease Services, the vision of CIP is to be a trusted community resource that protects the people of Multnomah County from vaccine-preventable communicable diseases. 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. No VFC-eligible child is turned away due to inability to pay, as any child needing vaccine to stay in school should have timely access to that vaccine. Likewise, adults at high-risk for vaccine preventable diseases like Hepatitis B infection should have access to potentially life-saving vaccines regardless of their ability to pay.

CIP assures the basic disease prevention needs of the community are met through several interrelated program components, including safe vaccine supply and efficient use of vaccine for the county system of Federally Qualified Health Centers; providing immunization services at the Communicable Disease Services clinic and community sites for both children and adults; and conducting activities that uphold State mandates related to school immunization laws, including issuing exclusion orders as needed, assuring that all children and students are complete or up-to-date on their immunizations. To uphold State mandates, CIP works in certified day care centers, preschools, kindergartens, Head Start Programs, and private, alternative, and public schools. Each year, CIP immunizes over 1,000 students and assists over 400 facilities in complying with State mandates.

Increasing complexity of addressing State school immunizations law requirements, combined with decreased Medicaid revenues and flat state funding, are challenging to all aspects of this program. However, CIS is committed to values of innovation, collaboration, diversity, excellence, teamwork, and accountability to find solutions to address these challenges, including expanding community partnerships for delivering services and the use of technology to meet training needs for schools and day cares complying with school exclusion rules.

Performance Measures

Measure Type	Primary Measure	FY16 Actual	FY17 Purchased	FY17 Estimate	FY18 Offer
Output	Number of immunizations directly provided to keep children in school.	1,124	1,000	1,033	1,000
Outcome	Percent of assisted facilities successful in meeting immunization law requirements.	95%	98%	90%	90%
Output	Number of schools & other facilities assisted with immunization law requirements.	443	420	472	420
Output	Percent of all vaccine administration data entered within 14 days of vaccine administration.	100%	95%	100%	95%

Performance Measures Descriptions

Output 1: Vaccines provided from 1st Fri thru 3rd Sat. in Feb. Average ~2 vaccinations/child. Output 2: Certified childcare facilities, kindergartens, and private schools directly assisted from Oct-Mar of the previous FY. Related outcome (percent successful) indicates reports submitted by state deadlines. Next year offers contingent on receiving CDC-funded Public Health Associate (PHA) to assist with reporting process in FY 2018.

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	2017	2017	2018	2018
Personnel	\$186,061	\$231,919	\$209,940	\$241,364
Contractual Services	\$1,485	\$0	\$2,575	\$17,062
Materials & Supplies	\$34,028	\$21,506	\$36,539	\$2,410
Internal Services	\$52,437	\$33,812	\$78,341	\$29,350
Total GF/non-GF	\$274,011	\$287,237	\$327,395	\$290,186
Program Total:	\$561,248		\$617,581	
Program FTE	1.57	2.43	1.81	2.09

Program Revenues				
Indirect for Dept. Admin	\$21,939	\$0	\$22,857	\$0
Intergovernmental	\$0	\$200,492	\$0	\$197,762
Service Charges	\$0	\$86,745	\$0	\$92,424
Total Revenue	\$21,939	\$287,237	\$22,857	\$290,186

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. Federal and state government allows a vaccine administration fee of \$21.96/vaccine for VFC and 317 program vaccines. For over a decade, state and federal immunizations funding has been essentially flat, and immunizations revenue has declined as more people receive vaccines through their medical home or pharmacies. This pattern has left structural deficits in Program funding.

Fed/State LPHA Immunization Special Payments: \$197,762

Patient Fees: \$92,424

Significant Program Changes

Last Year this program was: FY 2017: 40014 Immunizations