

**Lane County - Service Option Sheet - FY 09-10 Proposed Budget**

**Service:** **Communicable Disease Control**  
**Dept:** Health & Human Services  
**Contact and number:** Karen Gillette 682-3950; Betsy Meredith 682-3931

**General Fund Priority:** 15 of 47  
**Dept. Org ID:** 3427200 & 3427250  
**Mandate:** **SHALL** **Leverage:** **Yes**

**Executive Summary**

Limiting a disease outbreak is a core function of Public Health. The Communicable Disease (CD) program includes trained Preparedness staff to assure a capable public health response to public health emergencies. The CD staff is mandated to investigate cases, identify those at risk, implement preventive measures (vaccination, education, isolation) to decrease the spread of diseases reportable by statute. The CD program is the mandated recipient and manager of disease reports from all health care facilities, laboratories, and providers within the county. The program provides screening, examination, and treatment of specific sexually transmitted diseases (STD). HIV prevention includes counseling and testing, referral and needle exchange for populations at increased risk of blood borne pathogens.

**State/Federal Mandate**

ORS 431.416 Local Public Health Authority; ORS 433 Disease and Condition Control; OAR 333-018-0000; 333-019-0000; 333-014-0050; Intergovernmental Agreement with Oregon Department of Human Services for Local Public Health Authority. HB 2185 specifies newly defined public health authority related to emergency public health events. Losing local public health authority places the County at significant risk, if the state charges the County to provide required services.

**Outcome Measures**

- 95% of vaccines appropriately used per state requirements. Vaccines are fragile, expensive resources requiring attentive ongoing care and management.
- 65% of clients served for HIV counseling and testing are high risk. High risk is defined as an individual who uses IV drugs (IDU) and/or is a gay or bisexual man (MSM), and/or has a sexual partner who is HIV positive, an IDU or MSM. Outcome Data for FY07/08: 98.9% vaccine utilization rate; 63.5% HIV high risk testing rate.

**Service Level Descriptions (Read from bottom up. Level 1 = minimum viable service level.)**

	Other Funds	Expense Total	General Fund	FTE
<b>TOTAL DEPT REQUEST</b>	\$679,827	\$1,603,015	\$923,188	11.67
<b>Add Request Total</b>	\$0	\$0	\$0	0.00
<b>Additional Service Level Request 1</b> No additional Adds requested.	\$0	\$0	\$0	0.00
<b>Proposed Budget Total</b>	\$679,827	\$1,603,015	\$923,188	11.67
<b>Added in FY 09-10 Proposed Budget - Add 2</b> 1.0 Community Service Worker 2 to work within the STD requirements for the morbidity reports, provide support to the CD nurses investigating reportable communicable diseases; coordinate the annual immunization review mandated by state law (includes public and private schools and certified day cares.)	\$0	\$69,718	\$69,718	1.00
<b>Added in FY 09-10 Proposed Budget - Add 1</b> One nurse to provide mandated STD screening and other urgently needed STD services, investigation and timely reporting of communicable diseases; portion of Public Health Officer. Increased outbreak capability. Restore off-site/drop-in clinics for flu and school immunizations. Dedicated staff time for 10 delegate immunization agencies which leverage disease prevention efforts. Admin and front reception support, for all communicable disease programs and Preparedness, Vital Records, and Maternal Child Health.	\$15,000	\$192,319	\$177,319	2.11
<b>FY 08-09 Service Level</b> This service currently at threshold level.	\$0	\$0	\$0	0.00
<b>Level 1: THRESHOLD - below this level, service can not be provided</b> Outbreaks of communicable diseases require a robust public health response. Investigation & reporting involve professional labor intensive epidemiology. Prevention includes immunization & treatment of infectious disease under protocol, case, contact & private health care provider education and direction, as well as public communication to assure compliance, reduce risk of spread, and reassure and inform the community.	\$664,827	\$1,340,978	\$676,151	8.56

Ver: 4/28/09ji

**Please explain how the current (Mar 09) service level differs from the prior year. Include funding, FTE, change in leveraging, and impact on services.**

Current service level barely maintains level required to keep the local public health authority. STD appointments are limited to contacts of cases or symptomatic for reportable STDs; 400 clients/year not provided preventive screening; reflects 25% reduction of CD nurse staff; required reporting & investigation of STDs consumes nurse time & diminishes appointment times. Critical adjustments have been made to increase efficiency with available staff. Two immunization delegate sites were eliminated effective July 1, 2008. In addition, all off-site flu clinics were discontinued. Current staff level is sufficient to mount an initial response to public health emergencies, but large or ongoing emergencies will require significant support from other entities. Administrative infrastructure is insufficient, resulting in less ability to capture revenue, less efficiency in data collection, difficulty in supporting the advisory committee.