

2017 Model Practices

Applicant Information

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Model Practice Title

Please provide the name or title of your practice: *

Developing Tools for Infection Control in Group Care Facilities: The DOH-Manatee Outbreak Information Packet

Practice Categories

Model and Promising Practices are stored in an online searchable database. Applications may align with more than one practice category. Please select all the practice areas that apply.: *

- | | | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Access to Care | <input type="checkbox"/> Advocacy and Policy Making | <input type="checkbox"/> Animal Control | <input type="checkbox"/> Coalitions and Partnerships | <input type="checkbox"/> Communications/Public Relations |
| <input type="checkbox"/> Community Involvement | <input type="checkbox"/> Cultural Competence | <input checked="" type="checkbox"/> Emergency Preparedness | <input type="checkbox"/> Environmental Health | <input type="checkbox"/> Food Safety |
| <input type="checkbox"/> Global Climate Change | <input type="checkbox"/> Health Equity | <input type="checkbox"/> HIV/STI | <input type="checkbox"/> Immunization | <input checked="" type="checkbox"/> Infectious Disease |
| <input type="checkbox"/> Informatics | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Injury and Violence Prevention | <input type="checkbox"/> Marketing and Promotion | <input type="checkbox"/> Maternal-Child and Adolescent Health |
| <input type="checkbox"/> Organizational Practices | <input type="checkbox"/> Other Infrastructure and Systems | <input type="checkbox"/> Organizational Practices | <input type="checkbox"/> Primary Care | <input type="checkbox"/> Quality Improvement |
| <input type="checkbox"/> Research and Evaluation | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Vector Control | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Workforce |
| <input type="checkbox"/> Conference Theme: Bridging Clinical Medicine and Population Health | | | | |

Other::

Is this practice evidence based, if so please explain. :

Winnable Battles

To keep pace with emerging public health challenges and to address the leading causes of death and disability, CDC initiated an effort called Winnable Battles to achieve measurable impact quickly. Winnable Battles are public health priorities with large-scale impact on health and known effective strategies to address them. Does this practice address any CDC's seven Winnable Battles? If so, please choose from the following:: *

- | | | | | |
|---|--|--|----------------------------------|--|
| <input type="checkbox"/> Food Safety | <input type="checkbox"/> HIV in the U.S. | <input type="checkbox"/> Nutrition, Physical Activity, and Obesity | <input type="checkbox"/> Tobacco | <input checked="" type="checkbox"/> Healthcare-associated Infections |
| <input type="checkbox"/> Motor Vehicle Injuries | <input type="checkbox"/> Teen Pregnancy | <input type="checkbox"/> None | | |

Overview: Provide a brief summary of the practice in this section (750 Word Maximum)

Your summary must address all the questions below:

- Brief description of LHD- location, demographics of population served in your community
- Describe public health issue
- Goals and objectives of the proposed practice
- How was the practice implemented/activities
- Results/Outcomes (list process milestones and intended/actual outcomes and impacts.
 - Were all of the objectives met?
 - What specific factors led to the success of this practice?
- Public Health impact of practice
- Website for your program, or LHD.

750 Word Maximum

Brief Description of LHD: The Florida Department of Health in Manatee County (DOH-Manatee) is a local branch of the Florida state health department system, and serves approximately 342,000 residents in six municipalities. The municipalities encompassed by Manatee County include Bradenton, Palmetto, the City of Anna Maria, Bradenton Beach, Holmes Beach, and Longboat Key. The largest age segment in Manatee County is 25-64 and the population is somewhat diverse with 87% White, 9% Black, 16% Hispanic, and 4% other. 11% of the population of Manatee County is below the poverty level. There are an estimated 73,326 children aged 0-19 years in Manatee county. Of those, 19,079 are Hispanic and 10,576 are Black, comprising 41% of the age group. Manatee County is situated in central Florida on the gulf coast, extending from the densely populated areas around Port Manatee to rural areas farther inland. Public Health Issue: According to Florida Statutes, "outbreaks of any disease... found in the general community or any defined setting (e.g., hospital, school)" are reportable to the local health department. Communicable disease reporting exists to protect the public's health, and to monitor the extent of disease in the community so that an emergency situation can be identified and addressed. For surveillance to be effective, communicable disease reporting must be timely and consistent. Epidemiology staff at DOH-Manatee have identified a lack of accessible information regarding the importance of outbreak reporting and first steps for infection control in settings such as schools and assisted living facilities (ALFs). Goals and Objectives: The Outbreak Information Packet (OIP) was developed to address the gaps in knowledge and practice related to the reporting of outbreaks by group care facilities in Manatee County. The OIP is meant to inform healthcare professionals in group care facilities of first steps in infection control recommendations as well as to encourage these facilities to report outbreaks by educating staff members on requirements of reporting as mandated by Florida Statutes. The goals and objectives for developing, distributing, and implementing use of the DOH-Manatee Outbreak Information Packet are as follows: Goal 1: Develop a comprehensive guide to the early stages of infection control and outbreak response for use by DOH-Manatee epidemiologists and staff in group care facilities including assisted living facilities, schools, and daycares. Objective 1.1 Identify most common types of communicable disease outbreaks in group care facilities. Objective 2.2 Identify best early practices for infection control of most common types of communicable disease outbreaks in group care facilities. Goal 2: Distribute Outbreak Information Packet to group care facilities in Manatee County. Objective 2.1 Identify all relevant group care facilities in Manatee County. Objective 2.2 Engage group care facilities in order to provide education about how, why, and when to use the OIP. Implementation and Activities: To develop the OIP, epidemiology staff determined the most common types of outbreaks. This resulted in the OIP comprising of three sections: 1) gastrointestinal, 2) influenza-like, and 3) rash-like illnesses. Letters including the importance of outbreak reporting, HIPAA, and the role of DOH-Manatee were added. Each section contains isolation, diagnostics, and cleaning recommendations. When an epidemiologist at DOH-Manatee is notified of a communicable disease outbreak in a group care facility, they can then use the OIP to initially address infection control measures depending on the outbreak. Then, in turn, the group care facility can also utilize the OIP to further implement infection control measures as well as coordinate any necessary specimen collection and data entry that could be helpful to inform the investigation. Results and Outcomes: Since January 2016, the OIP has been utilized during multiple outbreak responses including: a gastrointestinal illness in an ALF; and two influenza-like illnesses (ILIs) in a preschool and elementary school. For the gastrointestinal illness outbreak, epidemiology staff used the OIP for guidance on infection control measures. The ILI outbreaks used two pieces of the OIP, including the Florida Statute about reporting and line lists. During each outbreak scenario the OIP was easily accessible, and able to be quickly utilized to address the outbreak. Public Health Impact: These materials facilitated the reporting process, provided initial infection control measures for use by the facility, and improved the response from DOH-Manatee. Having concise information about measures that can effectively control outbreaks made DOH-Manatee's response faster, more thorough, and more impactful. Website: <http://www.manatee.floridahealth.gov>

Responsiveness and Innovation

A Model Practice must be responsive to a particular local public health problem or concern. An innovative practice must be (1) **new to the field of public health (and not just new to your health department)** OR (2) **a creative use of an existing tool or practice**, including but not limited to use of an Advanced Practice Centers (APC) development tool, The Guide to Community Preventive Services, Healthy People 2020 (HP 2020), Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH). Examples of an inventive use of an existing tool or practice are: tailoring to meet the needs of a specific population, adapting from a different discipline, or improving the content.

- Statement of the problem/public health issue
- What target population is affected by problem (please include relevant demographics)
 - What is the target population size?
 - What percentage did you reach?
- What has been done in the past to address the problem?
- Why is the current/proposed practice better?
- Is current practice innovative? How so/explain?

◦ Is it new to the field of public health

OR

- Is it a creative use of existing tool or practice:

What tool or practice did you use in an original way to create your practice? (e.g., APC development tool, The Guide to Community Preventive Services, HP 2020, MAPP, PACE EH, a tool from NACCHO's Toolbox etc.)

- Is the current practice evidence-based? If yes, provide references (Examples of evidence-based guidelines include the Guide to Community Preventive Services, MMWR Recommendations and Reports, National Guideline Clearinghouses, and the USPSTF

2000 Word Maximum

Please state the Responsiveness and Innovation of your practice (2000 Word Maximum) : *

Statement of the Problem and Public Health Issue: Florida Administrative Code describes the diseases and conditions reportable to the Department of Health by healthcare providers, laboratories, and other community partners. Each disease or condition reported has a unique investigation and response. A variety of diseases and conditions are reported in Manatee County including: enteric infections such as Salmonella and E. Coli, vaccine preventable diseases such as Varicella and Pertussis, and travel-associated diseases including Dengue and Chikungunya. In addition to individual disease reports, outbreaks or clusters of any disease are also reportable to the health department upon their suspicion. Group care facilities in Manatee County are sometimes unaware of their reporting responsibilities, and may be susceptible to infectious disease outbreaks because of their immunocompromised clientele and consolidated living quarters. Additionally, in Manatee County, outbreaks of gastrointestinal, influenza-like, and rash-like illnesses are most commonly reported and are most often identified in long-term care facilities with medical staff who are familiar with the role of the health department and the importance of reporting. Sporadic reports come in from schools and daycares, but with limited experienced medical staff in these facilities there is concern that outbreaks may be under-reported due to lack of understanding of Florida Statutes for reporting communicable disease outbreaks. Target Population Affected by Problem: There are nearly 50 Agency for Health Care Administration (AHCA) registered assisted living facilities and 53 elementary, middle, and high schools in Manatee County. The OIP is also targeted for use in daycares and preschool facilities. There are an estimated 73,326 children aged 0-19 years in Manatee county. Percentage Reached: The OIP continues to be utilized for outbreak investigations in group care facilities in Manatee County. At this time the OIP has been used during multiple outbreak investigations to address first steps in infection control, collect specimens, and other relevant data on the ill in order to control the outbreak. What Has Been Done to Address the Problem: Prior to the OIP, DOH-Manatee epidemiologists would investigate outbreaks in group care facilities on a case-by-case basis. When a facility would call in to DOH-Manatee to report an outbreak the process involved asking leading questions to try to understand as much as possible about the kind of outbreak occurring. This kind of investigation would usually entail quick background research via the websites of the Centers for Disease Control and Prevention or the Florida Department of Health, in addition to consulting numerous print texts to identify control measures based on what kind of outbreak was suspected at the time. Oftentimes these resources are abundant, very specific, and are most helpful when the exact type of illness is known. Why the Current or Proposed Practice is Better: The OIP provides resources to not only DOH-Manatee epidemiologists, but also the group care facilities experiencing outbreaks themselves that are generalizable and adaptable for multiple kinds of outbreaks. When DOH-Manatee receives a call notifying epidemiologists of an outbreak, the responders are able to locate first steps in infection control quickly and therefore address the outbreak sooner than they might otherwise. In addition, the OIP serves as a guide to outbreak investigation for the facility itself that can be used by healthcare professionals to facilitate the process of infection control, specimen collection, and appropriate outbreak response. The OIP also reminds facilities that they are bound by Florida Statute to report outbreaks of any disease, case, and cluster of cases, or exposure to an infectious disease. Finally, the OIP helps build awareness and support with our community partners whom we rely on to report communicable disease outbreaks and maintain the health of the public. Innovation of the Current Practice: Reference guides for communicable diseases are not particularly new, however the concept of adapting a generalizable guide for group care facilities is an innovative use of this existing practice. Not only is the OIP easy to use due to its concise presentation of information, but it addresses the most frequent types of outbreaks that can occur in group care facilities and thus allows for adaptability and sustainable use.

LHD and Community Collaboration

The LHD should have a role in the practice's development and/or implementation. Additionally, the practice should demonstrate broad-based involvement and participation of community partners (e.g., government, local residents, business, healthcare, and academia). If the practice is internal to the LHD, it should demonstrate cooperation and participation within the agency (i.e., other LHD staff) and other outside entities, if relevant. An effective implementation strategy includes outlined, actionable steps that are taken to complete the goals and objectives and put the practice into action within the community.

- Goal(s) and objectives of practice
- What did you do to achieve the goals and objectives?
 - Steps taken to implement the program
- Any criteria for who was selected to receive the practice (if applicable)?
- What was the timeframe for the practice
- Were other stakeholders involved? What was their role in the planning and implementation process?
 - What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s)
- Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Otherwise, provide an estimate of start-up costs/ budget breakdown.

5000 words maximum

Goals and Objectives of this Practice: The success of implementation of the OIP relies on continued community partnerships with DOH-Manatee. The main diseases encompassed within the OIP are informed by the experiences of group care facilities, and their willingness to participate in outbreak investigation and control. The OIP is a resource that serves to assist healthcare professionals in group care facilities in controlling outbreaks as well as connect them to DOH-Manatee for more specialized assistance. Goal 1: Develop a comprehensive guide to the early stages of infection control and outbreak response for use by DOH-Manatee epidemiologists and staff in group care facilities including assisted living facilities, schools, and day cares. Objective 1.1 Identify most common types of communicable disease outbreaks in group care facilities. Objective 2.2 Identify best early practices for infection control of most common types of communicable disease outbreaks in group care facilities. Goal 2: Distribute Outbreak Information Packet to group care facilities in Manatee County. Objective 2.1 Identify all relevant group care facilities in Manatee County. Objective 2.2 Engage group care facilities in order to provide education about how, why, and when to use the OIP. Actions Taken to Achieve these Goals and Objectives: In order to determine what kinds of information would need to be included in the OIP, epidemiology staff from DOH-Manatee consulted with a regional epidemiologist from the statewide Florida Department of Health. Given the information necessary to conduct outbreak investigations, DOH-Manatee epidemiology staff constructed the OIP to include three separate sections for gastrointestinal, influenza-like, and rash-like illnesses. Furthermore, each section includes first steps in infection control guidance for facilities experiencing these kinds of outbreaks, as well as specimen collection information, and line lists tailored differently for specific kinds of outbreaks. Finally, the OIP contains a description of the Florida Statute that mandates outbreak reporting and how each facility can utilize the health department when experiencing an outbreak. The OIP was then (and continues to be) used for outbreak response when outbreaks in group care facilities are reported to the health department. When a facility reports an outbreak to the health department, the OIP is used as a quick reference guide internally when providing infection control recommendations. Additionally, a copy of the OIP is distributed to the facility experiencing the outbreak for further information and the facility is guided through the process of utilizing the line lists to keep track of the spread of the outbreak as well as any specimen collection that is possible depending on the situation. Criteria to Receive this Practice: Any group care facility in Manatee County, Florida is eligible to receive this practice regardless of whether or not they are experiencing an outbreak at the time of distribution. When a school is experiencing a communicable disease outbreak the point of contact for the health department tends to be a school nurse, similarly when ALFs or other group care facilities the point of contact is typically a Director of Nursing for that establishment. Continued distribution also occurs when any kind of group care facility calls the health department to report an outbreak, wherein the OIP can be used for that investigation and further distributed. Timeframe of the Practice: The initial development of the OIP began in October of 2015. Research, outreach, and review with experienced epidemiologists continued until January of 2016. During this time the structure of the OIP was determined and the information concerning outbreak infection control facts was compiled. From January 2016 until May of 2016, DOH-Manatee consulted with a graphic designer to streamline the appearance of the material within the OIP. Once the information had been compiled, the OIP was utilized in outbreak reporting and response for multiple outbreak scenarios from January 2016 on. Stakeholders Involved: Given the nature of outbreak response and reporting, DOH-Manatee frequently worked with community partners, specifically group care facilities, to implement and evaluate this practice. DOH-Manatee utilized connections with Directors of Nursing and school health nurses in these facilities to apply this practice, and to continue to provide resources and support from the local health department. In addition to the key stakeholders from the impacted community itself, DOH-Manatee sought out guidance and information from epidemiologists at the Florida state level to best inform the material within this practice. Through compiling this general information within the OIP, epidemiology staff can further specialize outbreak response after the initial implementation of this practice. Since the OIP can help to identify what kind of outbreak is occurring, through the use of line lists and aided specimen collection, DOH-Manatee can respond to outbreaks more purposefully while utilizing the OIP. This also further influences consistency in outbreak reporting to the state with better accuracy. Start-up Costs and Funding: Design and printing of 100 bound Outbreak Information Packets = \$3,000

Evaluation

Evaluation assesses the value of the practice and the potential worth it has to other LHDs and the populations they serve. It is also an effective means to assess the credibility of the practice. Evaluation helps public health practice maintain standards and improve practice. Two types of evaluation are **process** and **outcome**. Process evaluation assesses the effectiveness of the steps taken to achieve the desired practice outcomes. Outcome evaluation summarizes the results of the practice efforts. Results may be long-term, such as an improvement in health status, or short-term, such as an improvement in knowledge/awareness, a policy change, an increase in numbers reached, etc. Results may be quantitative (empirical data such as percentages or numerical counts) and/or qualitative (e.g., focus group results, in-depth interviews, or anecdotal evidence).

- What did you find out? To what extent were your objectives achieved? Please re-state your objectives.
- Did you evaluate your practice?
 - List any primary data sources, who collected the data, and how (if applicable)
 - List any secondary data sources used (if applicable)
 - List performance measures used. Include process and outcome measures as appropriate.
 - Describe how results were analyzed
 - Were any modifications made to the practice as a result of the data findings?

Please enter the evaluation results of your practice (2000 Words Maximum): *

Extent to which Objectives Were Achieved: Goal 1: Develop a comprehensive guide to the early stages of infection control and outbreak response for use by DOH-Manatee epidemiologists and staff in group care facilities including assisted living facilities, schools, and daycares. Objective 1.1 Identify most common types of communicable disease outbreaks in group care facilities. Objective 2.2 Identify best early practices for infection control of most common types of communicable disease outbreaks in group care facilities. Goal 2: Distribute Outbreak Information Packet to group care facilities in Manatee County. Objective 2.1 Identify all relevant group care facilities in Manatee County. Objective 2.2 Engage group care facilities in order to provide education about how, why, and when to use the OIP. The processes identified in these objectives were informed with assistance from DOH-Manatee's Director of Disease Control and Health Officer as well as State-level Regional Epidemiologists. A DOH-Epidemiology staff member consulted with each of these individuals as to what information would be most helpful while developing the OIP. While preparing the OIP and gathering advice from other epidemiologists, DOH-Manatee chose to focus on the utility of the OIP. The OIP was designed as a quick reference packet that emphasized the importance of brevity and clarity while initially addressing outbreaks. Each outbreak presented a unique scenario with adjustments being made based on the type of illness, and environment in which the outbreak is taking place. This particular factor in outbreak investigation and response informed DOH-Manatee's decision to make the OIP as generalizable as possible in the hopes of being applicable in multiple scenarios. Through an inclusion of the most common types of outbreaks, in addition to letters detailing the importance of communicable disease outbreak reporting DOH-Manatee was able to create a resource for use in many different outbreak situations. Evaluation of the Practice: In order to evaluate this practice, DOH-Manatee has been asking for feedback from the community partners that are utilizing the OIP. Since DOH-Manatee has been implementing the OIP, its effectiveness in outbreak response has been well reported. Facilities that have been able to utilize the OIP have noted they appreciate that the information is condensed in one place, easy to find, and easy to understand. Future evaluation plans include soliciting feedback from facilities who have been in receipt of the OIP to determine ease of use and understanding of the material.

Sustainability

Sustainability is determined by the availability of adequate resources. In addition, the practice should be designed so that the stakeholders are invested in its maintenance and to ensure it is sustained after initial development (*NACCHO acknowledges that fiscal challenges may limit the feasibility of a practice's continuation.*)

- Lessons learned in relation to practice
- Lessons learned in relation to partner collaboration (if applicable)
- Did you do a cost/benefit analysis? If so, describe.
- Is there sufficient stakeholder commitment to sustain the practice?
 - Describe sustainability plans

1500 Words Maximum

Please enter the sustainability of your practice (2000 Words Maximum): *

Lessons Learned: The use of the OIP reaffirmed the importance of adaptability with an emphasis on plain language when responding to outbreaks in the general public outside of a more clinical setting. This specific tool was constructed for use in many different kinds of outbreak situations and as such there was an emphasis placed on its ease of use. Infection control measures can often be perceived as very technical and clinical, with guidance from an editor and graphic designer the OIP was adapted to utilize plain language that is understandable for health professionals with a variety of backgrounds and experience. Stakeholder Commitment: The OIP is available in print form, and continues to be available via the internet on DOH-Manatee's Disease Control Division webpage. Group care facilities in the county have been contacted to participate in a seminar wherein the OIP and other relevant public health topics will be addressed. So far interest has been expressed from Directors of Nursing in long term care facilities to Infection Control Practitioners from local hospitals in Manatee County. This seminar will serve to educate these critical points of contact in the community, and DOH-Manatee will distribute the OIP for future use when these kinds of facilities are experiencing outbreaks.

Additional Information

How did you hear about the Model Practices Program?: *

- | | | | | |
|--|---|--|---|---|
| <input type="checkbox"/> I am a previous Model Practices applicant | <input type="checkbox"/> At a Conference | <input checked="" type="checkbox"/> NACCHO Website | <input type="checkbox"/> Public Health Dispatch | <input checked="" type="checkbox"/> Colleague in my LHD |
| <input type="checkbox"/> Model Practices brochure | <input type="checkbox"/> NACCHO Exhibit Booth | <input type="checkbox"/> NACCHO Connect | <input checked="" type="checkbox"/> Colleague from another public health agency | <input checked="" type="checkbox"/> E-Mail from NACCHO |
| <input type="checkbox"/> NACCHO Exchange | | | | |