



Division for Community Health (Division) Highlights
Board of Health
January 13, 2009

DIRECTOR OF PATIENT SERVICES REPORT: December 2008

Agenda – **Approval of Revised Policy: Patient Fall Assessment and Documentation Policy/Procedure.** Policy revised with recommendations from the Tompkins County Board of Health and Health Department Medical Director Dr. Klepack. Several sections were re-organized and the entire policy was reformatted; a statement was added on educating and assessing patient risk and making referrals as appropriate under the purpose section; neurological and cardiopulmonary assessments were clarified and re-certification documentation information was added. This policy and procedure was written to assure patients are assessed and educated regarding potential risk for falls: to define initial care for patients that experience a fall, to assure appropriate follow-up and referral and to provide documentation requirements.

Administration - The Director of Patient Services (DPS) Sigrid Connors -

- Met with Administrative, Environmental Health and Community Health Services staff to review current rabies post-exposure policies, Cayuga Medical Center case management and billing issues, December 1.
- Attended full-day Field Epidemiological Training: Outbreak Investigation in Cortland provided by NYSDOH state Epidemiology consultant, December 2.
- Reviewed flu vaccination inventory and clinic and appointment schedules to determine next steps in outreach and utilization of remaining stock, December 5 with Community Health Nurse Supervisor (CHNS) Karen Bishop and Health Promotion Program Director Theresa Lyczko.
- Held the quarterly Professional Advisory Committee and Home Health Care Quality Improvement Committee meetings December 10. *A summary of the September quarterly meetings follow the program reports.*
- Revised 2009 Sexually Transmitted Disease service contract with Planned Parenthood of the Southern Finger Lakes (PP) with Karen and Team Leader Carol Mohler, December 17.
- Met with new PP President and CEO Joe Sammons to discuss current contract services with Administrative and Community Health Services staff, December 17.
- Attended Executive Flu Committee to review 2008 flu vaccination services and plan for 2009 services, chaired by Public Health Director, Alice Cole.
- Served as Administrator On-Call for Division services, December 9 – 11 and 19 – 22.
- Reviewed and revised 2009 contracts for contract therapists, Home Health Aide agencies, Tuberculosis Consultant, CMC services and Nutrition Consultants with staff and Public Health Administrator Brenda Grinnell Crosby.

Staffing

- Oriented new contract physical therapist, Nicole Fry, to Division services, December 3 and new Account Clerk Typist in Home Health Care Terri Jordan on December 17.
- Completed annual performance evaluation for one therapy contractor, December 16.

- Interviewed six candidates for the vacant WIC Nutrition Educator position with WIC Program Director Andrea Smith, December 22, 23 and 26. Review of candidates to be completed at the end of the 30-day job posting as of January 5, 2009.
- Provided annual mandatory training for WIC, Community Health Services and Children with Special Care Needs (CSCN) teams and Facilities staff. Training included information on patient confidentiality, HIPAA (Health Insurance Portability Accountability Act), identification and reporting of suspect or actual child abuse and domestic violence, the Tompkins County and TCHD workplace violence prevention plan and policy and the NYS Right to Know Law, December 4, 5, 10 and 16.
- Reviewed Division and CSCN state regulations regarding initial and annual health assessments, immunization and health documentation with Public Health Director Alice Cole and CSCN Director Sylvia Allinger. Internal forms to be merged into one TCHD policy and procedure with updates to all forms.
- Another new Physical Therapy contract is in process. Pending reference checks, expectation is to begin the contractor in January.
- Selected candidate to fill the full-time Community Health Nurse vacancy in Home Health Care, Christina Funk, RN to begin orientation January 12.

Emergency Preparedness – The DPS –

- Attended Part II of the NYS DOH Pandemic Flu Plan teleconference, December 1. Division plans and policies will need review to determine appropriate changes based on state updates.
- Attended the Tompkins County Emergency Management Planning committee, December 9.
- Attended the Central New York Epidemiology Alliance videoconference, December 18.
- Completed draft of Section IV- Tools and Forms for the Tompkins County Special Needs Sheltering Plan, along with final revisions to sections II and III, December 31.

Other Meetings Attended – Health & Human Services Committee, December 3.

Division Statistics & Log of Public Health Telephone Calls – January – November 2008 provisional statistics are attached.

COMMUNITY HEALTH SERVICES

Maternal Child – Update on seven-month old infant with a feeding pump – this infant has been re-hospitalized for surgical intervention. The parent has benefited from nursing visits and phone contact for reinforcement teaching regarding feedings, reassurance and support.

Communicable Disease – See attached statistical reports for October and November 2008.
Pertussis – One new case confirmed on 12/15/2008 in a 17 year old Ithaca High School student. Contacts requiring prophylaxis included parents and one sibling and one close friend. One additional suspect pertussis case with no known links to the case is currently being investigated.

Total confirmed cases in 2008 to date – 19 including 17 from the Dryden school district and 2 from the Ithaca school district.

Hepatitis A – One case of hepatitis A occurred due to travel on a cruise ship to ports in Greece, Turkey, Bulgaria, Ukraine, Israel, and Egypt. Three other family members on the trip were given hepatitis A vaccination as post exposure prophylaxis (PEP) to prevent hepatitis A disease. Hepatitis A vaccine is recommended for PEP in healthy individuals aged 12 months to 40 years of age following new recommendations published in the MMWR of October 19, 2007.

Perinatal Hepatitis B – Community Health Nurse Supervisor Karen Bishop and Team Leader Sue Woodard presented Terri McCheyne, Maternal Child Unit Director, Cayuga Medical Center with a Certificate of Excellence from the New York State Immunization Program in recognition of their efforts to prevent perinatal transmission of the hepatitis B virus.

A recent medical record review at Cayuga Medical Center showed 100% compliance with the public health requirements for testing, reporting and recording of hepatitis B for all pregnant women.

In addition, the Universal Birth Dose policy is working well at the Cayuga Medical Center with a report of 84% of infants receiving the hepatitis B vaccination at birth.

Syphilis Workgroup: The new website, www.tc-std.info is due to launch in January 2009. The website will be a major accomplishment of the syphilis workgroup using the \$15,000 Syphilis Elimination Grant awarded to TCHD from NYSDOH. Outreach materials the group developed are ready to distribute at the same time including: commercially printed flyers for private providers and for the community, coasters with the new logo (to be placed at various meeting places/bars/restaurants), java jackets with the logo (to be placed at various coffee shops), banner ads on FaceBook and local media outlets which will link to the new website, and TCAT bus placards.

HIV – No new positives identified.

Influenza – See attached preliminary statistical report.

Tuberculosis –

Active Cases

#1 - Imported TB disease – Pulmonary. Daily Direct Observe Therapy (DOT) started 11/24/08. Tolerating treatment with only mild side effects. Recent Chest X-Ray shows improvement per the TCHD TB Consultant Dr. Kaplan.

#2 - Confirmed TB disease – Lymph Nodes. Daily DOT started 9/26/08. Tolerating treatment well.

Suspect Cases

No suspect case this period.

Latent TB Infection

33 Referred for treatment

6 Started treatment

8 Completed Treatment during this period.

Current LTBI caseload: 78

HEALTH PROMOTION PROGRAM

Tobacco Control Program – Ted Schiele

- Attended Reality Check youth meeting, December 1. Discussion centered on youth participation in the public comment period at Ithaca Common Council meetings. The youth were planning to comment on proposed regulations for smoking in outdoor public areas at the December 16 meeting of the Community & Organizational Issues Committee. However, the topic was not included on the agenda.
- Registered for online ordering of Nicotine Replacement Therapies (NRT) and drafted registration forms and information for agencies that want to distribute free NRT.
- Participated in TCP conference call regarding point of purchase (POP) advertising at statewide grocery chains, December 8.
- Participated in Regional Steering Committee conference call, November 24
- Participated in Central Region conference call, December 10.

TCHD Support

- Attended Adult Immunization Coalition meeting, December 2. Theresa Lyczko
- Met with DCH staff to discuss, plan outreach for additional flu clinics, December 5. Theresa
- Flu Executive Planning Committee, December 19. Theresa

Web site postings

- Updated flu clinics page, posted WIC calendars, BOH meeting agenda, restaurant inspection highlights for November, revised EH mold page (from NYSDOH fact sheet), new ServSafe course listing.

Community Outreach

- Cancer Resource Center board meeting, December 16. Theresa
- Community Coalition for Healthy Youth (CCHY) board meeting, November 21. Ted
- Tompkins Asthma Action Committee, December 2. Susan Dunlop, Ted
- McGraw House blood pressure screening; 11 people screened, December 4. Dianna Bennett, Susan
- Met with staff from the Cayuga Center for Healthy Living to discuss collaboration on diabetes prevention grant program, December 15. Theresa

Media

- Live radio interview at 6:45 a.m. on WHCU on the importance of getting a flu shot; flu clinics in December and other flu prevention information, December 8. Theresa

Community Health Assessment (CHA)

- Community Coalition for Healthy Youth (CCHY) assessment workgroup meeting, December 2. Workgroup's charge is to review and select data indicators that will best represent Tompkins County, Tompkins County Youth Services and CCHY in 2009 application for federal SAMHSA grant. Ted

- Meeting of CCHY youth focus/ brainstorming group project, December 3. Ted
- HANYS and NYSDOH Collaborative Planning for Community Health Assessment (local health departments) and Community Service Plans (hospitals) conference call, December 2. Theresa. December 10. Ted

Meetings and Trainings

- Annual mandatory training in December. All Health Promotion Program staff.
- Health Planning Council (40th Anniversary) annual meeting, December 8. Susan, Ted, Theresa
- Tobacco Use and Dependence – An Updated Review of Treatments, December 15. 1.0 CEU, Susan
- Healthier Steps: A Clinician-Patient Guide from the American Medical Association. 0.5 CEU

HOME HEALTH CARE

Staffing

- We are pleased to welcome Physical Therapist Nicole Fry. Ms. Fry began her orientation to the Home Health Care (HHC) program the first week in December and will work under contract.
- We also welcome Community Health Nurse (CHN) Christina Funk. Ms. Funk will begin January 12 and will fill the CHN position that has been vacant in HHC for the last six months.

Continuing Education

- Community Health Nurse Supervisor Melissa Gatch has been working with staff from the Department of Social Services, Office for the Aging, Mental Health Association, and Ithaca College Gerontology to organize a community training on the subject of hoarding. This group will host a full day conference on January 15, 2009 at TC3 on *Hoarding: Creating a Tompkins County Solution*. The speaker will be Christina Bratiotis, LCSW from Boston University.

Quality Improvement

- Home Care staff completed five chart reviews and attended one quality improvement meeting during the month of December. Areas identified for clinician improvement included the following:
 - A verbal or written order from the physician to accompany any changes made to medications or the plan of care.
 - Problems identified by clinicians during a patient assessment must be followed up on with either a phone call or a visit and documented accordingly.
 - Supportive evidence for homebound status or HHA needs must be clearly documented.
 - Any findings that fall outside care plan parameters must be called into the physician.

- All systems within the patient profile should be reviewed for accuracy and completion. If a patient is unable to answer anything within the profile, there needs to be documentation as to the reason for it.
- Visits completed in the home should match the physician's orders for visits.
- Documentation should reflect communication between disciplines, the patient or their caregiver and the patient's doctor.
- HHC's most recent release of Home Health Compare (reporting period July 2007 through June 2008) demonstrated client improvement at or above the state and national average in 10 (out of 12) specific quality care indicators. In addition, HHC demonstrated significant improvement in 9 of the quality indicators from the previous release in September 2008.
- 65 OASIS surveys were sent to NYSDOH in November 2008

Miscellaneous

- HHC admitted 49 new patients during November. See attached statistics for discipline specific visit numbers.

WIC
(See attached report)

**SEPTEMBER 9, 2008 QUALITY IMPROVEMENT
SUB-COMMITTEE MEETING REPORT**
(Report for June through August 2008 activities)

The minutes of the June 11, 2007 Quality Improvement (QI) meeting were approved by unanimous voice vote with one edit.

HOME HEALTH CARE REPORT

Chart Reviews - 7 Home Health Care (HHC) charts reviewed between June and August. Team Leader Kim Hamilton noted improvements are needed in the areas of documentation and assessments, no quality of care issue was found.

Other QI Activities – There were 10 adverse event reports for the months of January and February 2008. Five were found to have documentation errors and were corrected. The remaining five were found to have conditions unrelated to quality of care. After discussion the Committee had no recommendations on the reviews and other QI activities.

313 Outcome based Assessment Instrument Surveys (OASIS) transmitted to NYSDOH

Referrals Not Taken Under Care (NTUC) - 88 NTCU cases for June through August, of note, 33 cases were declined due to lack of sufficient physical therapy staff, 7 were declined due to lack of sufficient nursing staff, 8 had no need for skilled services, 10 cases were not 'homebound', 9 discharged directly to skilled nursing facilities and 1 was found to have unsafe home situation. Committee discussed the problems related to lack of physical therapy services due to an unexpected leave. HHC continues to supplement existing staff with Per-Diem CHN's with one vacancy due to retirement in July. Committee had no further recommendations.

Case Review #1: 76 year-old male admitted for physical therapy services due to previous stroke with history of short-term memory loss and multiple co-morbidities. Upon admission client was found to have an undocumented wound to coccyx area. No information provided regarding open wound on referral. Need for this type of information was related back to the referring hospital. After discussion the committee recommended the continued open dialogue with referral sources, patients, families and caregivers and specific questions regarding wounds and areas of skin break.

Case Review #2: 88 year-old male admitted for follow-up s/p hospitalization for substernal chest and leg pain. Upon arrival for routine skilled nursing visit client found lying in bed with c/o of chest pain that began the night before. Client had taken nitroglycerine without relief but had not sought help. Upon assessment and medical consultation, client transferred by ambulance to ED and diagnosed with acute myocardial infarction. After discussion the committee had no recommendations.

Home Health Care - Client Satisfaction Surveys – DPS reported 97 % (31 of 32) reported 'agree' or 'strongly agree' for care received in the 2008 2nd quarter. There were 40 positive comments and 3 suggestions for improvements. Survey represented 20 % response rate with 157 clients admitted in the quarter. 10 surveys received in July had 100 % client satisfaction. The Committee recognized the many positive comments on the surveys.

COMMUNITY HEALTH SERVICES REPORT – Report of June to August 2008 activities. Team Leader Sue Woodard reported for Karen Bishop. Chart reviews focused on nursing compliance with medically ordered visits and documentation of missed visits. She reported charts were in compliance and well documented. She noted staff now complete peer reviews at their monthly team meeting and a new Lead Documentation Profile was developed to help nurses with appropriate documentation in the computer system. And, due to OBGYN Associates decision in June to accept clients with Medicaid Managed Care through Total Care instead of 'straight' Medicaid, MOMS (Medicaid Obstetrical and Maternal Services) nurses continue to assist clients through the application process for both straight MA and Total Care MA. Several meetings held with the office regarding the referral and billing process. Staff is now completing the Total Care eligibility application for all clients indicating Total Care as their managed care choice. Committee recommendations – none.

DIVISION INCIDENT REPORTS – 16 incidents May 29 to September 4, 2008. One incident not included in the June report for March 11 also included. Incidents by program: CHS –3, HHC – 6, WIC – 6 and HPP – 1. Incidents by type:

Client related (7)

- Client reported lost WIC checks.
- Child fell from chair in clinic without apparent injury. Alert added to chart due to learned history of drop seizures.
- Client experienced allergic type reaction after 2nd dose of rabies post-exposure vaccinations. After consultation with state client received subsequent dose in hospital setting. Incident reported to national database.
- Adult client fell to floor during Hoyer transfer by Home Health Aide (HHA). RN assessed client and MD notified, with no apparent injury. HHA demonstrated skill and understanding on retraining.

- Child fell off chair with bump to forehead, ice applied, mother advised to seek medical attention if needed. Upon f/u with mother no apparent problems reported. Signs hung in clinic area reminding caregivers to keep close watch of children.
- Client directed HHA to dial insulin dosage on insulin pen, an action out of the scope of HHA practice. Client then administered additional and higher dose in error. MD notified and insulin /activity modified. HHA agency counseled HHA. RN reassessed client with no further action needed.
- Client lost balance while gait training with therapist. RN made assessment with no apparent injury. MD notified. Supervisor made recommendation to therapist for use of gait belt for assessment purposes with specific diagnoses prone to falling such as Parkinson's.

Environment/Equipment related (7)

- Phone adapter power cord found in eroded condition. Cord replaced.
- Laptop cord missing and replaced.
- Employee noticed county vehicle gas cap missing after parking on City Street. Gas cap replaced.
- Swarm of bees/wasps reported outside EH/Home Care entrance at end of workday. Remaining employees notified to use alternate exit. Facilities notified and situation resolved.
- Employee discovered unauthorized person in building after-hours. Person escorted out and door locked. Reminder sent to all staff reminded them to check office doors are locked when they come in or leave after-hours.
- Employee noticed hubcap partially pulled off on wheel. Vehicle hubcap repaired.
- Employee bumped county vehicle bumper with personal car. No damage assessed on either vehicle.

Staff related (2)

- Employee experienced awkward reaches while working at desk and computer. Ergonomic assessment evaluation pending.
- Employee reported bilateral pain in arms and shoulders while using laptop in office. Ergonomic assessment recommendations for chair, desk location and laptop changes put in place.

Supervisors reviewed incidents at team meetings. Committee determined appropriate action was taken for incidents and had no further recommendations.

COMPLAINT LOG – none!

SEPTEMBER 19, 2008 PROFESSIONAL ADVISORY COMMITTEE MEETING REPORT

David Stoyell presided and the June 11, 2008 minutes were unanimously approved. 9 of 12 committee members were present, a total of 20 were in attendance including staff and guests.

ACTION ITEMS -

- MOTION by James Macmillan to accept the new policy '*Patient Fall Assessment and Documentation Policy & Procedure*', MOTION seconded by Phil Cornell, MOTION passed unanimously with several recommended edits.
- Pauline Cameron made a MOTION to recommend renewed membership for *Pamela Mayberry* on the Professional Advisory and Quality Improvement Committees for a three-year term, MOTION seconded by James Macmillan and approved by a unanimous voice vote.

DPS REPORT – Sigrid Connors updated the Committee on the status of the 55 Brown Road TCHD building project. She gave Kudos' to the Home Care team for their efforts to cover a nursing vacancy during peak vacation time and Kudos' to the Community Health Services team for their coverage of an extended staff leave.

HOME HEALTH CARE REPORT - Supervisor Melissa Gatch reported their continued use of Per-Diem CHN's to cover the nurse vacancy due to a retirement in July. And, due to an unexpected staff leave they were left short-handed for physical therapy service for several weeks resulting in 33 cases not taken under care during that time. One new contract PT was brought in but the therapist was not able to work on a full-time basis. And, the DPS and Home Health Care nursing managers held a productive meeting with the Cayuga Medical Center discharge planning staff to discuss streamlining the referral, hospital coordination and admission processes. There continues to be a shortage of Home Health Aides in the Trumansburg area. The Senior Account Clerk Typist was pleased to report home care revenue was at or above the budgeted amount to date.

COMMUNITY HEALTH SERVICES REPORT – Team Leader Sue Woodard reported for CHNS Karen Bishop. One staff returned from an extended leave so the team is at full staffing. The second communicable disease newsletter was distributed on the topic of Lyme disease. Pertussis outbreak was up to 13 cases with cases primarily located in the Dryden community.

HOME HEALTH CARE QUALITY IMPROVEMENT (QI) REPORT – Team Leader Kim Hamilton's review of 7 charts found no quality care concerns. The Committee discussed the 88 referrals not taken under care due to lack of sufficient physical therapy staff. After discussion the QI Committee had no recommendations other than supporting staff efforts to recruit additional therapy staff. After discussion of the first case review the QI Committee noted the need for comprehensive sharing of information between referring agencies, patient families, caregivers and Home Health Care. A similar need was noted with the second case review. There were no further recommendations.

MATERNAL CHILD QI REPORT – Sue Woodard reported the record review for compliance with medical orders found visits and documentation to be in order. Sue also noted that nurses are completing peer reviews on active and discharged charts at each monthly team meeting. The Committee also discussed changes in client admissions due to whether clients were on 'straight' Medicaid or 'Total Care' Medicaid managed care. The QI Committee had no recommendations. Meeting concluded with organizational updates. Next QI/PAC meeting scheduled for December 10, 2008.

ATTACHMENTS

- Revised Patient Fall Assessment and Documentation Policy & Procedure
- Division of Community Health (DCH) 2008 BOH Statistical Highlights
- DCH 2008 Public Telephone Calls
- November 2008 & Cumulative Communicable Disease Reports
- Preliminary 2008 Influenza Vaccination Report