

Outbreak Investigations Not Initiated Timely Public Health & Wellness



KPI Owner: Director of Clinical Services

Process: Diagnose and Investigate

Baseline, Goal, & Benchmark	Source Summary	Continuous Improvement Summary
Baseline: Cal 2014 avg - 11.83% investigations Goal: No more than 5% investigations not initiated timely. Benchmark: TBD	Data Source: NEDSS Goal Source: Executive Leadership Benchmark Source: TBD	Plan-Do-Check-Act Step 2: Validate problem: baseline, benchmark, & goal Measurement Method: Percentage of communicable disease investigations not initiated in 2 days or less Why Measure: To ensure containment of outbreaks Next Improvement Step: Identify Root Causes

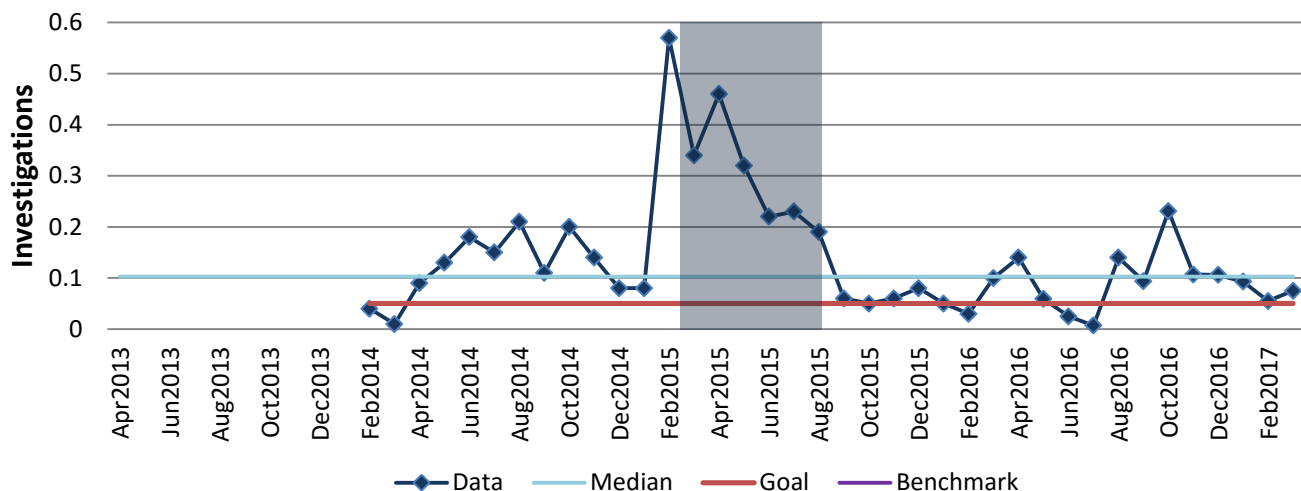
How Are We Doing?

Apr2016-Mar2017 12 Month Goal	Apr2016-Mar2017 12 Month Actual		Mar2017 Goal	Mar2017 Actual	
5%	9%	🚦	5%	8%	🚦
Investigations	Investigations		Investigations	Investigations	

Outbreak Investigations Not Initiated Timely



Good



Data Note: Shaded area indicates data that was incorrectly reported in prior months. Beginning in March 2016, we began tracking the number of business days between receipt of report and the beginning of investigations. This was due to large batches of reports being submitted to us by providers at the end of the week for reportable diseases that do not require more immediate attention.

Increase in investigations started after 2 days is attributable to change in process & the metric is under evaluation:

- Moved from passive phone investigations to comprehensive/active surveillance.
- Beginning in August 2016, epidemiologists and epidemiology nurses visit JCPS schools to investigate outbreaks
- LMPHW now has access to KHIE (Kentucky Health Information Exchange) which means we are now reviewing all lab reports from hospitals to ensure we are not missing any cases that may have gone unreported. It results in a significant increase in workload for the staff. LMPHW is collaborating with the state to improve the process.