

Klamath County Public Health

Modernization Work Plan Outline

Goal 1 Protect communities from acute and communicable disease through prevention initiatives that address health inequities.

Goal 2 Strengthen and expand communicable disease and environmental health emergency preparedness, and the public health system and communities' ability to respond.

Goal 3 Protect Communities from environmental health threats from climate change through public health interventions that support equitable climate adaptation.

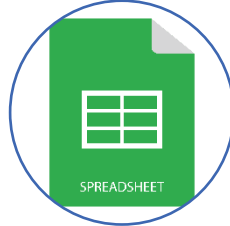
Goal 4 Plan for full implementation of public health modernization and submission of local modernization plans by 2025.

Public health system goals for this PE 51 funding cycle



Does LPHA anticipate participating in regional PE51-02 collaboration?

No



Performance management system your LPHA uses to monitor achievement of your goals, strategies, activities and deliverables

Excel performance management templates.
Research is underway for other systems.






Local or regional all-hazards preparedness plan with community partners

Plan complete; minimal implementation with community partners.

Description of all-hazards preparedness plan progress for biennium

Utilizing the strengthened response infrastructure with community partners that has been developed throughout the COVID-19 pandemic, Klamath County Public Health will make updates to and increase implementation of the all-hazards preparedness plan.

By June of 2023, KCPH will host a series of electronic meetings with community partners to review and edit the all-hazards preparedness plan with community partners who have been engaged in emergency responses within Klamath County including those involved in the COVID-19 pandemic response and 2021 wildfire events. Collaboration will include planning for and hosting a minimum of one all-hazards exercise in collaboration with Klamath County Emergency Management before June 30, 2024.

 <p>Local or regional climate adaptation plan</p> <p>Not yet started</p>	 <p>Has your LPHA completed a local or regional health equity assessment in the last 5 years?</p> <p>Yes</p>	 <p>Has your LPHA completed and/or implemented a local or regional health equity action plan?</p> <p>Completed; minimal implementation.</p>
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Description of local/regional climate adaptation plan progress for biennium

By December 31, 2021 KCPH will complete our 2021 Community Health Assessment which is the first to include climate concerns. This will lay the foundation for Climate Adaptation priorities to be included in the 2022 Community Health Improvement Plan. Through the 22-23 biennium additional work with community partners will be done with the goal of having a completed climate adaptation plan implemented in the 24-25 biennium.

Description of local/regional health equity action plan progress for biennium

With Modernization funds, KCPH will hire an Equity Coordinator who will work across all divisions of public health to ensure equity remains a priority focus of all program development and delivery. In addition, the Equity Coordinator will work with community partners to broaden the previous assessment and update the action plan. By June 2022 KCPH will develop specific goal to increase implementation of the equity action plan in a minimum of three priority areas.

Leadership and Organization Competencies

	LPHA will participate in public health modernization learning collaboratives.
Requirements	LPHA will demonstrate workforce or leadership initiatives necessary for local and/or regional public health infrastructure.
	Provide staff training, including climate equity and environmental justice.
	Demonstrate work toward local modernization plans, which may include development of business models for public health infrastructure or alignment of priorities across strategic plans, CHIPs, and other local plans.
Strategies	Collect, analyze and report data for data-driven decision-making.
	Identify opportunities for cross-sector health in all policies that address priority environmental health risks, in particular those identified in climate adaptation and/or community health improvement plans.

Description of progress that will happen in this biennium

Klamath County Public Health will develop a multidisciplinary modernization team of public health staff to increase internal infrastructure. Under this model, a subject matter expert for each foundational capability will be assigned to a work group charged with specific modernization priorities. This model will allow robust development and implementation of priority areas across all public health programs. The multidisciplinary team will be able to achieve meaningful progress in multiple areas simultaneously further strengthening our ability to fully implement public health modernization by 2025.

By June 30, 2022 KCPH will have a minimum of 2 staff that have taken trainings on climate equity and environmental justice. Starting July 1, 2023, a minimum of 1 staff per year will be offered a training focused on climate equity and environmental justice.

By June 30, 2022 KCPH will work with the region 7 epidemiologist to implement a monthly data analysis of communicable disease in Klamath County. This analysis will be used to identify priorities for interventions through data driven decision-making. By June 30, 2023 a minimum of two (2) additional routine analysis and reports will be implemented, one of which will aid data-driven decision-making in climate adaptation plans.

Assessment and Epidemiology

Requirement

LPHA will demonstrate strategies for public health data collection, analysis, reporting and dissemination that are necessary for 2021-23 goals and deliverables. This includes strategies to collect and report data that reveals health inequities in the distribution of disease, disease risks and social conditions that influence health.

Track cases of acute and communicable diseases to ensure individuals and their partners receive treatment to curb the spread of disease

Make communicable disease data easily accessible to health care providers and community members

Strategies

Assess environmental health risks using available public health data and/or integrate into community health assessments

Identify priority populations most at risk of climate threats

Description of progress that will happen in this biennium

Using modernization funding, KCPH will retain use of a shared epidemiologist employed by Crook County to support Region 7 LPHAs. This access to dedicated assessment and epidemiology was first made possible through COVID-19 response funding.

By June 30, 2022 KCPH will work with the region 7 epidemiologist to implement a monthly data analysis of communicable disease in Klamath County. This analysis will be used to identify priorities for interventions through data driven decision-making. By June 30, 2023 a minimum of two (2) additional routine analysis and reports will be implemented, one of which will aid data-driven decision-making in climate adaptation plans. These reports will be made available to local providers and community members on the Klamath County Public Health website and through our Klamath County Public Health alert network email system.

Health Equity and Cultural Responsiveness

Requirement

LPHA will develop, update and/or continue to implement local or regional health equity plan.

Complete an assessment of the LPHA's capacity to apply a health equity lens to programs and services and to provide culturally responsive programs and services within the last five years. Participation in a health equity assessment within the past five years fulfills this requirement. (Required if not already completed)

Strategies

Complete and implement an action plan that addresses key findings from health equity assessment. (Required if not already completed)

Develop an ongoing process of continuous learning, training and structured dialogue for all staff.

Description of progress that will happen in this biennium

With Modernization funds, KCPH will hire an Equity Coordinator who will work across all divisions of public health to ensure equity remains a priority focus of all program development and delivery.

In addition, the Equity Coordinator will work with community partners to broaden the previous equity assessment and update the equity action plan by June 30, 2022. By June 30, 2022 KCPH will develop specific goals to increase implementation of the equity action plan in a minimum of three priority areas. By June 30, 2023 KCPH will demonstrate implementation of the three priority areas, and identify three additional priority areas.

Community Partnership Development

LPHA will demonstrate strategies for sustaining or expanding partnerships with community organizations to ensure connections with BIPOC communities or other groups experiencing health inequities.

LPHA will demonstrate co-creation of culturally and linguistically responsive public health interventions with community partners.

Requirements

LPHA will demonstrate involvement of community-based organizations in public health emergency planning or other priorities identified communities.

LPHA will demonstrate sustained partnerships for infection prevention and control in congregate settings which may include LTCFs, prisons, shelters or child care facilities.

Community partnerships

Sustain and expand partnerships with community agencies to reach, communicate with and empower marginalized populations.

Collaborate with community partners to develop and prioritize local and regional climate and health interventions.

Ensure meaningful participation of communities experiencing environmental health threats and inequities in development of programs and policies.

Strategies

Health care and other sector partnerships

Expand work with key partners such as childcare providers, schools, jails and long-term care facilities on prevention and control of communicable diseases, including COVID-19.

Lead local disease prevention and control initiatives, such as policy development, antibiotic resistance education, sexually transmitted disease prevention messaging, infection control protocols, hand hygiene and field investigations of outbreaks and epidemics and statewide and local health policies.

Advise health care practitioners about evidence-based practices for communicable disease diagnosis, control and prevention.

Description of progress that will happen in this biennium

The Health Equity Coordinator which KCPH will hire using modernization funding will build upon the foundational partnerships established by Klamath County Regional Health Equity Coalition prior to funding changes which saw the coalition unable to continue. Strengthening these partnerships and expanding engagement of marginalized populations will allow KCPH to achieve meaningful participation from communities experiencing health inequities.

The KCPH Public Information Officer will work closely with the Health Equity coordinator to facilitate and promote accessible communications to further bolster collaborative efforts. Together, they will ensure the development and implementation of culturally and linguistically responsive public health interventions. Incorporating lessons learned from the COVID-19 pandemic response, the 22/23 priority areas for engagement of marginalized populations will be increased access of emergency communications and co-creation of a climate adaptation plan.

The communicable disease team established under the multidisciplinary modernization model will continue and expand partnerships for infection prevention and control in congregate settings. Partnerships have been strengthened tremendously through the COVID-19 pandemic response, which provides a new and unique opportunity to continue these partnerships into the future. By the end of the calendar year 2023, these partnerships will include infection control trainings offered twice yearly at a minimum to the local jail and long-term care facilities to assist in infection control awareness and outbreak prevention to combat knowledge loss through high turnover rates.

In this biennium KCPH will also expand efforts to increase access to clinical care through the completion of the access to care community assessment. This will include the reestablishment educational public health sessions in coordination with community corrections orientation for the justice-involved population by the summer of 2022.

Communications

LPHA will demonstrate the ability to provide routine public health education through a variety of communication platforms, with consideration of linguistic and culturally responsive and functional needs of the community.

Requirements

LPHA will demonstrate the ability to provide timely and accurate risk communication for areas of public health significance.

Implement culturally responsive communications systems

Ensure communications with the general public and/or at-risk populations about communicable disease risks, including outbreak investigations

Strategies

Facilitate communications among priority populations and decision-makers, elevating community priorities and health equity considerations in long-term planning and policymaking

Develop and integrate climate change and health information into existing public health communications

Description of progress that will happen in this biennium

KCPH will continue to work towards 100% implementation of culturally responsive communications. Priority areas for this biennium will include ensuring all communications exist in both English and Spanish through multiple communication platforms and are made available simultaneously.

Communication with the community and stakeholders about the 2021 Community Health Assessment and 2022 Community Health Improvement Plan will provide an opportunity for expanded engagement of priority populations and decision-makers for long-term planning and policymaking. With climate concerns newly incorporated into these priorities an opportunity exists to integrate climate and health information into existing public health communications.

Additionally, recently established monthly communications which are disseminated through the Klamath County Public Health email network will expand communications with the general public about a variety of public health topics including communicable disease risks.

KCPH Modernization Team

Jennifer Little, Director (leadership / workforce development / partnerships / policy)

Jessica Dale, Assistant Director (leadership / workforce development / partnerships)

Valeree Lane, Public Information Officer (communications / partnerships)

Health Equity Coordinator (equity / partnerships)

Kellie Hansen (eventually new nurse), RN (CD/ partnerships)

Katherine Duarte, Program Coordinator (clinical access / partnerships / policy)

Miranda Hill, Program coordinator (preparedness / partnerships / policy)

PHEP Program Coordinator (preparedness / partnerships / policy)

Jeremiah Bloink, EHS (EH / policy)

James Carey, Program Specialist (EH / Policy)

Sarah Kalivoda, Epi (Epi and Assessment)

Project specific teams:

	Jessica		Jennifer
	Kellie (new RN eventually)		Val
Communicable Disease Team	Val	Environmental Health Team	Jeremiah
	Jeremiah		Jim (AQ)
	Health Equity Coordinator		Health Equity Coordinator
	Sarah		Sarah
	Jennifer		Jessica
Access to Clinical Preventable Services Team	Val	Public Health Emergency Preparedness Team	Val
	Katherine (MCH &RH)		Miranda
	Health Equity Coordinator		Health Equity & PHEP Coordinators

Specific Deliverables I hope to achieve in this biennium. (Val, Sarah, and Health equity coordinator to participate in all):

Communicable Disease Team (Kellie / new nurse lead):

1. LTCF infection control / outbreak prevention trainings
2. Jail infection control / outbreak prevention trainings

Access to clinical preventive services (Katherine lead):

1. Referral coordination and connection to services (Katherine lead)
 - a. WIC priorities – Immunizations, RH health, Dental care
 - b. Clinical priorities – PCP referrals, immunizations, early prenatal care, reduce access barriers, coordination for transition from pediatric to adult care

EH (Jeremiah lead):

1. Assist with infection control trainings
2. Development of climate adaptation plan
 - a. Clean air spaces
 - b. MOU for burning coordination
 - c. Water quality concerns (domestic wells)
3. All EH communications / forms in English & Spanish

PHEP (PHEP Coordinator lead):

1. All hazards plan updates
 - a. Engagement of priority populations
2. All hazards exercise
3. Emergency communications plan

Communications

1. Monthly PH updates

Health Equity

1. Health equity assessment and implementation plan

EPI

1. Monthly epi reports