

LOCAL DISEASE INVESTIGATION

NORTON COUNTY HEALTH DEPARTMENT (KANSAS)

FTES: 8 / POPULATION SERVED: 6,000

PLAN

Identify an opportunity and
Plan for Improvement

1. Getting Started

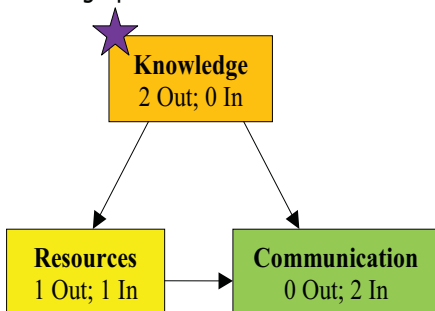
Based on the beta site self assessment, performing disease investigation (measure 2.1.2) was selected due to staff's inability to perform this independently. Options considered but not selected were customer satisfaction related to the Family Planning or the immunization program.

2. Assemble the Team

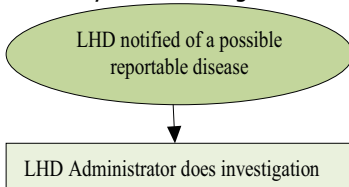
The team comprised all the nurses that could be asked during time of an outbreak or staff absence to do an investigation. The office manager was also included given her key role as the "gatekeeper."

3. Examine the Current Approach

The problem that "staff don't know how to perform a disease investigation" was investigated, and the root cause was determined to be knowledge, or rather the lack of, by using the Interrelationship Diagram.



The process for reportable disease investigation at the time was basically the following:



This process didn't allow staff an opportunity to learn, nor did it address surge issues or unavailability of the administrator. Additionally, staff weren't informed about diseases that are present in the jurisdiction on a routine basis.

The final aim statement was to "Increase nursing staff knowledge and understanding of performing disease investigation of Kansas reportable disease(s) from 71% to 100% by November 30th, 2010."

4. Identify Potential Solutions

The team identified the following interventions to achieve the aim statement:

- create a flow chart general enough for all reportable diseases yet flexible enough to meet the specific disease(s) being investigated
- provide training on the internal process, including rationale for disease surveillance, available investigation resources, and where authority lies.
- perform a reportable disease investigation under the guidance of the LHD administrator.

5. Develop an Improvement Theory

If staff have training on "how to", then they will demonstrate increased knowledge in performing disease surveillance.

DO

Test the Theory for Improvement

6. Test the Theory

A pre-test was developed by the LHD administrator and given to the nurses. The average pre-test knowledge score was 71%. The training included a power point presentation provided by the Kansas Department of Health and Environment, with county-specific information inserted.

A flow chart created by the health department administrator with step-by-step decision points and resources available 24/7 was presented. The flow chart was challenged with tabletop scenarios. A couple of decision errors were corrected and one verbiage change was made for clarity. Without further discussion the post-test was administered.

CHECK

Use Data to Study Results
of the Test

7. Check the Results

The post-test group score was 100% for knowledge, thus achieving the aim statement.

ACT

Standardize the Improvement and
Establish Future Plans

8. Standardize the Improvement or Develop New Theory

The flow chart was adopted as a resource for investigations. However, field testing was determined to be the best way to test for success. Staff will be assigned to perform future disease investigations only using the flow chart, and the flow chart will be revised as needed following each investigation.

9. Establish Future Plans

Bi-monthly staff meetings will include time for reviewing disease investigation cases. New employees who may be called upon to assist in a disease investigation will be trained using the same method and materials.