## Modernizing Public Health: Stories from the Field

**Central Oregon Public Health Partnership** 



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## Regional staff helps tackle infections at long-term care facilities

As the recently opened Juniper Springs Senior Living in Redmond continues to welcome new residents, wellness director Lisa Fortin takes comfort in knowing she has a team of people behind her, ready to respond to that often can wreak have on long-term care facilities like hers

infectious diseases that often can wreak havoc on long-term care facilities like hers.

Because of a \$500,000 grant to the Central Oregon Public Health Partnership of Jefferson, Crook and Deschutes counties, that team comprises not only a well-trained Juniper Springs staff, but also two new public health professionals: an infection prevention nurse and a communicable disease epidemiologist who cover the entire three-county region.

The grant is part of the Oregon Legislature's 2017 investment in the statewide Public Health Modernization initiative, which directed \$3.9 million toward regional collaborations like the Central Oregon Public Health Partnership for regional communicable disease control

interventions. The Central Oregon Public Health Partnership is using its grant to form a Central Oregon Outbreak Prevention, Surveillance and Response Team, and for interventions among older adults in institutional settings and young children in child care centers with high immunization exemption rates.

Coming together for the modernization partnership came naturally for the three counties, which already share resources on several programs, such as WIC, maternal and child health, environmental health services, communications, and HIV and sexually transmitted infections, says Muriel Delavergne-Brown, Crook County



Lisa Fortin, wellness director at Juniper Springs Senior Living

Health and Human Services director. But the modernization initiative formalized their collaboration around infectious disease control, and let them create staff positions that blur the lines between counties in responding to outbreaks and communicable disease threats.

"Now that we've been so successful with having this tri-county model in relation to communicable disease response, it would be really challenging to go backward," she says. "This has made a huge difference for all three counties around communicable disease response. To me, it's critical that this kind of program continues."

Michael Baker, Ph.D., Jefferson County Public Health Department administrator, says that although the Central Oregon Public Health Partnership is relatively new, he's still "surprised at how tight the group already is and how well we're working together."

"It's been a great partnership. The benefits have really shown and the value has really shown. We understand that, yes, we're three counties, but we are one Central Oregon region." The three counties began work on the partnership in early 2018 following discussions about where to focus their efforts in controlling communicable diseases, says Heather Kaisner, MS, a member of the partnership's community advisory team.

"We really looked at the data and looked at what is our need in this area, and it was kind of that threefold of prevention, surveillance and response," says Kaisner, Public Health Advancement and Protections Section manager at Deschutes County Public Health.

Data showed that long-term care facilities needed to be at the top of the priority list, after they were found to have experienced the majority (58.2 percent) of the 91 total outbreaks in Central Oregon—causing 1,300 illness cases and 48 hospitalizations—since 2012.

"We have an older population here in Central Oregon and within long-term care facilities, that's who's seen the majority of flu outbreaks and norovirus outbreaks that have, really, a detrimental effect on these residents," Kaisner explained.

Fortin can attest to that. As the person in charge of ensuring the health and wellness of residents of Juniper Springs' assisted living and memory care units, she knows how hard infections like influenza and norovirus can hit vulnerable older adults.

"We have a very fragile population," Fortin says. "A lot of them have multiple disease states that could impact their getting something as common as the cold, and if that turns into something else."

And if flu, norovirus or other infectious diseases loom in the surrounding community, or if an outbreak occurs at her facility, Fortin can call upon the Central Oregon Public Health Partnership's new regional responders: Jennifer Faith, Ph.D., and Kari Coe, R.N.

Faith, the partnership's regional communicable disease epidemiologist, mines daily and weekly communicable disease surveillance reports, as well as real-time data on health hazards reported to emergency departments through the Oregon ESSENCE database. She looks for disease trends that can help health departments, providers, long-term care partners, and the media and public anticipate and prepare for emerging community health risks.

"A lot of the reporting of data we're doing is now with a regional view," says Faith, who previously served as Deschutes County's epidemiologist. She points to a weekly flu data report she publishes that once only covered Deschutes, but which the modernization grant has since expanded to include all three partnership counties and "has been really helpful for providers and for the media because they work regionally."

"The thing I'm able to do now that I wasn't able to do before is I can really focus specifically on communicable diseases, so I have more capacity and more time to be looking at the data more frequently, and paying daily attention to what's going on in the region," she says.

That regional view is something Baker appreciates. He recalls Faith introducing herself at a recent Oregon Public Health Association meeting "as the epidemiologist for Deschutes, Crook and Jefferson counties," which he thought was "just phenomenal because we don't really have,

on staff, an epidemiologist that can give us that real-time data instead of the end-of-the-year report that we typically see."

Coe's work as regional infection prevention nurse for the partnership began in early 2018 when she visited at all 32 long-term care facilities in the tri-county area to introduce herself and offer her services, including trainings for nurses, education for residents and walk-throughs to see if best practices were followed. The staff trainings can cover anything from general "infection prevention 101" topics to specific issues such as bloodborne pathogens and seasonal viruses like influenza—even proper handling of linens and foods.

"With my background in infection prevention and bringing that to each of these facilities, it really runs the gamut," says Coe, who previously led the infection prevention program for St. Charles Health System. "We talk a lot about multi-drug-resistant organism isolation, a lot of it around preventing transmission from resident to resident to themselves, with hand hygiene, of course, being key. Some of the facilities have specifically said, 'Could you please come and tour and give us ideas on where we can improve?"

Fortin has hosted such a tour with Coe at Juniper Springs, and says the information and support she provides is invaluable.

"She graciously came out and did a day-long seminar on infection prevention and gave us all sorts of resource books, like this one here," Fortin says, holding up a three-ring binder packed with information on common infections at long-term care facilities, and steps for containing and preventing them. "If we have an outbreak of the flu or something like that, we can give them a call and they'll actually send a team out here and help us to contain it, help us to prevent the spread of it and manage it. I want them to come back at least every couple months to give us an update on where we're at with infection prevention and disease spread."

Delavergne-Brown believes such direct outreach with long-term care facilities is changing how the counties of the Central Oregon Public Health Partnership manage infectious diseases—by keeping them from happening in the first place. "This opportunity has given us the ability to do more prevention in the community and really reach out to those partners," she says. "It's just kind of raising the level for everyone in relationship to understanding about communicable diseases, preventing outbreaks and, you know, who you can call for help."

She adds that the partnership also ensures each county has its "own voice" while conducting work as part of the tri-county partnership for "improving health and making sure people don't get sick in this region."