



**DELAWARE COUNTY HEALTH DEPARTMENT**

# BOH Strategic Plan Update

September 12, 2024

# BOH Draft Implementation Action Plan

## Priority A: Enhance Communication



Board of Health, Delaware County Health Department  
Draft Implementation Action Plan



Priority A: ENHANCE COMMUNICATION					
No	Strategies	Implementation Steps	Timing <sup>1</sup>	Person Responsible <sup>2</sup>	Comments
A-1	DCHD operates with an established communication plan.	<ol style="list-style-type: none"> <li>1. Review draft communications plan.</li> <li>2. Revise communications plan, with first release in 2024.</li> <li>3. Educate staff members and partners who communicate with DCHD on the plan.</li> <li>4. Set an updated schedule, a minimum of every 2 years.</li> </ol>	1	Director, Communications Specialist	Plan for the first update to the communications plan to include step to enhance accessibility for all DCHD communications, including website and published documents.
A-2	BOH members act as DCHD Ambassadors.	<ol style="list-style-type: none"> <li>1. Establish clear goals and expectations for Board members as Ambassadors</li> <li>2. Align Ambassador roles for Board members based on interests and/or physical proximity</li> <li>3. Develop reporting procedures for Board members to share concerns or success stories</li> </ol>	2	Director	Work with Board members to make assignments.
A-3	DCHD monitors and continuously improves upon community awareness and customer satisfaction with DCHD.	<ol style="list-style-type: none"> <li>1. Identify and test polling tool</li> <li>2. Define topics and polling schedule</li> <li>3. Conduct periodic polls</li> <li>4. Assess data and determine the impact of Health Department messaging on community awareness (i.e., has awareness increased, remained steady, or decreased?)</li> <li>5. Transparency to public stakeholders, effective communication vs. just communicating specific/measurable/achievable/relevant/time-bound (SMART). Consistent in messaging.</li> </ol>	2	Director, Population Health Administrator, Communications Specialist, Epidemiologist	Report to board analytics; tie into COI and <del>AchieveIT</del> .
A-4	DCHD operates with clear roles and procedures for grants,	<ol style="list-style-type: none"> <li>1. Develop SOPs and policies</li> <li>2. Disseminate and train staff</li> </ol>		CFO	

# BOH Draft Implementation Action Plan

## Priority B: Greater Use of Data

Priority B: GREATER USE OF DATA					
No.	Strategies	Implementation Steps	Timing	Person Responsible	Comments
B-1	Complete the Community Health Assessment Report.	<ol style="list-style-type: none"> <li>Analyze assessment and determine greatest needs based on the results.</li> <li>Present assessment results and recommendations to the Board for Action.</li> <li>Strengthen trust and relationships with local partners including providers.</li> </ol>	1	Director	Ongoing data analysis by Epidemiology, which complements/adds to the CHA.
B-2	Empower BOH with public health data informing Board's decision-making.	<ol style="list-style-type: none"> <li>Identify data reports BOH would like to review/receive.</li> <li>Create program reporting process (2 reports minimum).</li> <li>Discuss data reports with BOH in executive sessions and/or public meetings.</li> </ol>	1	Director, Epidemiology	
B-3	Create routine data reports (i.e., inspections analytics, defined audiences, etc.).	<ol style="list-style-type: none"> <li>Review data reports with staff and Board members.</li> <li>Establish baseline data for programs/divisions and identify trends and changes quarterly, including financial reporting.</li> <li>Identify/address key areas of performance and monitor solutions/enhancements over time.</li> </ol>	2	Director	Work with DCHD Epi division and future data modernization and Performance Management Specialists
B-4	Evaluate and implement data modernization projects that enhance DCHD operations.	<ol style="list-style-type: none"> <li>Evaluate intake systems for client demographics and services</li> <li>Enhance epi surveillance data connections (especially for CHIP)</li> <li>Inventory, assess gaps, and make recommendations regarding existing data collection and mgt systems (EMR, CDP, Qualtrics, public health financial management systems).</li> <li>CHA Survey, Research, Community Improvement Plan.</li> <li>Accurately gauge the needs of communities.</li> <li>Centralized application for resident to receive health updates/information, increased community outreach, continuous updates on a dashboard.</li> </ol>	3	Administrator of Operations, Data Modernization Specialist	

<sup>3</sup>Urgency 1: Important to accomplish without delay and/or easy to accomplish.

Urgency 2: Second tier of importance to accomplish and/or may involve some degree of complexity or an investment of resources to complete

# BOH Draft Implementation Action Plan

## Priority C: 21<sup>st</sup> Century Public Health Model



Board of Health, Delaware County Health Department  
 Draft Implementation Action Plan

Priority C: 21 <sup>st</sup> CENTURY PUBLIC HEALTH MODEL					
No.	Strategies	Implementation Steps	Timing <sup>3</sup>	Person Responsible <sup>4</sup>	Comments
C-1	Prepare DCHD for accreditation with appropriate pillar plans.	<ol style="list-style-type: none"> <li>1. Develop a Public Health Emergency Response Plan building upon current MCM/DES plans.</li> <li>2. Release and update Communication Plan.</li> <li>3. Continue to update &amp; enhance the Community Health Assessment.</li> <li>4. Continue to implement the Community Health Improvement Plan.</li> <li>5. Implement BOH strategic plan.</li> </ol>	1	Director, Deputy Director, Administrators, Epidemiology, Communications Specialist	Continue to work with County emergency response partners and identify peer examples and best practices.
C-2	Integrate department plans (CHIP, BOH strategic plan, Program Plan) to lay groundwork for accreditation.	<ol style="list-style-type: none"> <li>1. Drive measurable outcomes for AchieveIT performance management</li> <li>2. Begin utilizing AchieveIT for routine reporting to BOH, elected officials, and stakeholders</li> </ol>		Deputy Directors, Administrators	
C-3	Support employee recruitment and retention by prioritizing workforce development.	<ol style="list-style-type: none"> <li>1. Complete regular check-ins with staff in addition to formal evaluations.</li> <li>2. Determine strengths and opportunities for staff.</li> <li>3. Develop learning opportunities to bolster strengths</li> <li>4. Assign stretch assignments, where possible</li> <li>5. Develop/offer training to encourage skill refinement, staff development and growth.</li> <li>6. Conduct a core competencies assessment.</li> <li>7. Build a workforce training plan.</li> </ol>	2	Division Administrators	1-5 reflect current activities until we are able to formalize WFD activities in 6 & 7
C-4	Create a culture of continuous quality improvement (CQI).	<ol style="list-style-type: none"> <li>1. Develop a practice of identifying more effective ways of service delivery and operations (including using AchieveIT).</li> <li>2. Reward the adoption of efficiencies and innovation.</li> </ol>	2	Division Administrators	Work with staff to determine procedures to evaluate work and processes.

# BOH Draft Implementation Action Plan

## Priority D: Community Health Improvement Plan

Board of Health, Delaware County Health Department  
Draft Implementation Action Plan



Priority D: COMMUNITY HEALTH IMPROVEMENT PLAN					
No.	Strategies	Implementation Steps	Timing	Person Responsible	Comments
D-1	Leverage Community Health Assessment information into the future.	<ol style="list-style-type: none"> <li>1. Collect data to assess key elements of community health</li> <li>2. Prepare reports and evaluations to track community health over time</li> <li>3. Use data reports and findings to guide and direct grant requests, partnership development, etc.</li> </ol>	2	Epidemiology	
D-2	BOH Strategic Plan is linked with CHIP and Program Plan.	<ol style="list-style-type: none"> <li>1. Work with Administrators to assess current work plans and priorities</li> <li>2. Incorporate priorities into existing and proposed work plans</li> <li>3. Establish measurable milestones and reporting intervals</li> </ol>	1	Division Administrators	Coordinate with strategy B-2.
D-3	Engage community partners in CHIP initiatives.	<ol style="list-style-type: none"> <li>1. Develop a list of current partners</li> <li>2. Meet with partners to determine mutual goals and outcomes</li> <li>3. Environmental inspections, vaccines, community outreach, clinics, data collection/analysis, building relationships/trust; provide education to resident, business owners, and community partners.</li> <li>4. Working on the CHA priorities; inviting people to the table; EOC/EHR platform; working on mobile unit</li> <li>5. Implement initiatives to address goals</li> </ol>	3	Division Administrators	
		<ol style="list-style-type: none"> <li>1. Use data to determine current and future needs</li> <li>2. Engage community leaders and partners to establish goals</li> <li>3. Assess potential funding sources</li> <li>4. Improve health/safety of community; building on strengthening above; eliminate silos within DCHD; using Wellness Line data to improve work</li> </ol>	1	CHIP co-chairs	



**DELAWARE COUNTY HEALTH DEPARTMENT**

# BOH Achievelt Demo

September 12, 2024

# AchieveIt: 2024 DCHD Program Plan

my.achieveit.com/#!/plan/b0e0b88d-6545-46d5-0553-08dc327f23a2/tree

Granicus - MediaMa... Epi Data Request Fo... Health Department... PADOH LHD XM Qualtrics Delco Sharepoint DCHD Intranet Shar... Viva Yammer EHB HRSA EHB PA Find Help for Subst... All Bookm

DCHD Dashboards Plans Reports Admin

2024 DCHD Program Plan

Tree List Timeline Metric

**Item Library**

- Drag a level below into a card in the tree to create a new plan item.
- DIVISION
- PROGRAM
- OBJECTIVE
- MEASURE
- SUB-MEASURE

**Parking Lot**

Keep items in the Parking Lot until you know where they should go in your plan.

Click the + icon above to create new plan items.

**PLAN** On Track  
2024 DCHD Program Plan

- 53 261 7 4 48 2 55

**DIVISION** On Track  
1 ADMINISTRATIVE & SUPPORT SERVICES

- 26 34 3 7 1 38

**PROGRAM** On Track  
1.1 Administration and Program Direction

- 5 14 1 11

**OBJECTIVE** On Track  
1.1.1 Assure that all programs required by Act 315 and Act 12 are staffed and operational.

- 1 1

**OBJECTIVE** On Track  
1.1.2 A complete set of internal policies and

**DIVISION** Not Started  
2 PERSONAL HEALTH

- 22 109 3 1 14

**PROGRAM** On Track  
2.1 Reportable Communicable Diseases and Conditions

- 1 11

**PROGRAM** On Track  
2.2 HIV Prevention

- 11 1

**PROGRAM** Not Started  
2.3 Sexually Transmitted Diseases

**DIVISION** On Track  
3 ENVIRONMENTAL HEALTH SERVICES

- 1 63 19

**PROGRAM** On Track  
3.1 Retail Food Safety Program

- 9 3

**PROGRAM** On Track  
3.2 Public Bathing Place Program

- 4 2

**PROGRAM** On Track  
3.3 On-lot Septic Permit Program

**DIVISION** Not Started  
4 POPULATION HEALTH

- 2 28 1 4 8 1 3

**PROGRAM** On Track  
4.1 Disease Prevention and Health Promotion & Health Education

- 5 5

**OBJECTIVE** On Track  
4.1.1 Advance prevention and early intervention in controlling and managing chronic illness,

- 1 2

**MEASURE** Achieved  
4.1.1.1 Develop at least one program; Promote Whole

**DIVISION** On Track  
5 EPIDEMIOLOGY

- 24 13

**PROGRAM** On Track  
5.1 Overall Epidemiology

- 20 13

**PROGRAM** On Track  
5.2 Participation in Child and Fetal Death Review boards

**PROGRAM** On Track  
5.3 Data visualization and geospatial analysis dashboards

# AchieveIt: 2024 DCHD Program Plan

The screenshot displays a dashboard for the 'Participation in Child and Fetal Death Review boards' metric. The main visual is a semi-circular gauge with a green arc indicating the current value of 4.5, which exceeds the target of 4. The gauge is labeled '4.5' in large green text, with 'Last updated on 09/06/2024' and 'Move from baseline of 0 to target of 4' below it. The dashboard includes a top navigation bar with 'On Track' indicators and a 'Plan is Active' status. A right-hand sidebar provides 'Metric Details' and 'Details and Dependencies'. The 'Metric Details' section includes: 'How this metric's success is being tracked: Go from a baseline of 0 to a target of 4' and 'How this metric's value is being calculated: Manually, entered directly on this item'. The 'Details and Dependencies' section includes: 'Level: Program', 'Description: Provide epidemiological assistance to external organizations on risk factors associated with infant, child, and fetal deaths', and 'Dependent On Item: None'. At the bottom, a 'Timeline' section shows a progress bar with buttons for 'Update Progress' and 'Request Update'.

On Track

Participation in Child and Fetal Death Review boards

Plan is Active

Metric Details

How this metric's success is being tracked  
Go from a baseline of 0 to a target of 4

How this metric's value is being calculated  
Manually, entered directly on this item

Details and Dependencies

Level  
Program

Description  
Provide epidemiological assistance to external organizations on risk factors associated with infant, child, and fetal deaths

Dependent On Item  
None

Timeline ↓


Update Progress Request Update

2.4 Tuberculosis 3.4 well water Program 4.1.1.2 Develop at least one program: Promote Maternal 5.4 Data visualization and managemet



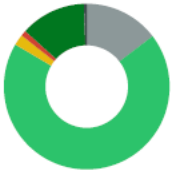
# AchieveIt: 2024 DCHD Program Plan

DCHD DCHD Program Plan Overview




This dashboard gives DCHD an overview of progress on the 2024 Program Plan across the department.

### 2024 DCHD Program Plan - Statuses



● Not Started	55 (15%)
● On Track	259 (69%)
● Off Track	8 (2%)
● At Risk	4 (1%)
● Achieved	48 (13%)
● Canceled	2 (1%)

### 2024 DCHD Program Plan - Updates



● Up-to-Date	219 (62%)
● Late	37 (10%)
● Pending	99 (28%)

### Status Definitions

IN PROGRESS STATUS

**Not Started:** Work has not yet begun for this item

**On Track:** Performance measure is at or exceeding the set target for the previous period

**Off Track:** We are just a bit below our target but are not too far off from meeting our goal

**At Risk:** Within the previous period, we are severely under our goal and need significant increases in performance

FINAL STATUS

**Achieved:** Plan Item is complete to specifications

**Not Achieved:** Plan Item did not meet specifications

**Canceled:** Plan Item is not currently pursued by this organization

### Division Specific Dashboards

[Administrative & Support Services](#)  
[Personal Health](#)  
[Environmental Health](#)  
[Population Health](#)  
[Epidemiology](#)

### Achievements

Level	Name	Status	Metric Description	Current Value	Last Updated	Assigned To	Last Comment
Measure	Weekly division reports are submitted to the Director and Deputy Director. The weekly report is used to update and inform DCHD divisions, the community, County Council and Board of Health.	Achieved	Move from baseline of 0 to target of 48	100 <div style="width: 100%; height: 10px; background-color: green; display: inline-block;"></div>	06/25/2024	Lora Werner	Weekly epi reports are submitted to DCHD Deputy who shares edited version with all DCHD staffs.
Objective	Optimize DCHD organizational structure and leadership roles to meet evolving needs of the organization.	Achieved	Stay between baseline of 0% and target of 100%	100%	07/01/2024	Chris Walmsley	The DCHD pursued a realignment with the County Personnel board in March of 2024

### Off Track & At Risk

Level	Name	Status	Current Value	Last Updated	Assigned To	Last Comment
Division	Delaware County Health Department exercises good stewardship of funds.	Off Track	75% <div style="width: 75%; height: 10px; background-color: #ffc107; display: inline-block;"></div>	09/03/2024	Chris Walmsley	The Admin Fiscal team has been working with the County Treasurer's office to ensure that payments are received and deposited into the DCHD revenue account. There are a number of payments that the DCHD continues to track.
Measure	100% of staff participate in annual performance reviews.	Off Track	50% <div style="width: 50%; height: 10px; background-color: #ffc107; display: inline-block;"></div>	08/31/2024	Pam Pitts	Leadership to provide completed evaluations to DCHD HR.
Objective	Staff participate in professional development opportunities on a regular basis.	Off Track	0% <div style="width: 0%; height: 10px; background-color: #ffc107; display: inline-block;"></div>	07/10/2024	Lora Werner	Need to collect data from each division on professional development status.

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# AchieveIt: 2024 DCHD Program Plan

DCHD
DCHD Program Plan Overview

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Administrative & Support Services - Statuses

Administrative & Support Services - List View




- Not Started 28 (39%)
- On Track 32 (45%)
- Off Track 3 (4%)
- Achieved 7 (10%)
- Canceled 1 (1%)

Level	Name	Status	Metric Description	Current Value	Assigned To	Last Comment	Last Updated	
Program	Administration and Program Direction	Not Started						
Objective	Assure that all programs required by Act 315 and Act 12 are staffed and operational.	On Track			Lora Werner	Global operations; no metric assigned.	06/24/2024	
Measure	Weekly division reports are submitted to the Director and Deputy Director. The weekly report is used to update and inform DCHD divisions, the community, County Council and Board of Health.	Achieved	Move from baseline of 0 to target of 48	100 <div style="width: 100%; height: 10px; background-color: green; display: inline-block;"></div>	Lora Werner	Weekly epi reports are submitted to DCHD Deputy who shares edited version with all DCHD staffs.	06/25/2024	
Measure	The organization stabilizes staffing levels. DCHD will decrease the turnover rate from the previous year.	On Track	Stay below target of 64%	15% <div style="width: 15%; height: 10px; background-color: green; display: inline-block;"></div>	Pam Pitts		09/06/2024	
Objective	A complete set of internal policies and procedures as per the requirements of the Public Health Accreditation Board is established.	On Track			Tina Burling		09/03/2024	
Measure	Policy Review Committee meets at least monthly to initiate, review and revise policies, procedures, protocols, and guidance documents.	On Track	Move from baseline of 0 to target of 12	9 <div style="width: 75%; height: 10px; background-color: green; display: inline-block;"></div>	Tina Burling		09/09/2024	

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Personal Health - Statuses

Personal Health - List View



- Not Started 22 (16%)
- On Track 109 (80%)
- Off Track 3 (2%)
- Achieved 2 (1%)

Level	Name	Status	Metric Description	Current Value	Assigned To	Last Comment	Last Updated	
Program	Reportable Communicable Diseases and Conditions	On Track						07/08/2024
Objective	Improved Case Detection and Reporting: Prevent and control communicable diseases and other public health threats through early detection of communicable diseases and other public health threats, and rapid initiation of response activities.	On Track	Stay above baseline of 95%	90% <div style="width: 90%; height: 10px; background-color: green; display: inline-block;"></div>	Carol Voncolln	Continue to improve early detection of communicable disease and public health treats by monitoring NEDSS and case investigations.	07/08/2024	
Measure	Achieve a 100% of timely (based on disease specific guidelines) case investigations.	On Track	Move from baseline of 95% to target of 100%	100% <div style="width: 100%; height: 10px; background-color: green; display: inline-block;"></div>	Carol Voncolln	Continue timely case investigation.	07/08/2024	
Objective	Effective Contact Tracing: Minimize transmission by promptly identifying and tracing contacts of confirmed cases.	On Track			Carol Voncolln	Timely Initiation of contact tracing for confirmed cases of communicable diseases to minimize or prevent transmission.	07/08/2024	
Measure	Trace and follow up with at least 90% of contacts within 48 hours of case identification.	On Track	Move from baseline of 80% to target of 90%	80% <div style="width: 80%; height: 10px; background-color: green; display: inline-block;"></div>	Carol Voncolln	Staff will compile a contact tracing list for follow up during the investigation process.	07/08/2024	


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# AchieveIt: 2024 DCHD Program Plan

**DCHD** DCHD Program Plan Overview

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### Epidemiology - Statuses



● On Track 24 (65%)  
● Achieved 13 (35%)

### Epidemiology - List View

Level	Name	Status	Metric Description	Current Value	Assigned To	Last Comment	Last Updated
Program	Overall Epidemiology	On Track				Epi team meets on a weekly basis to discuss progress on goals and noteworthy disease trends.	09/09/2024
Objective	Identify and monitor public health problems (e.g., communicable and chronic diseases, sorted by high frequency of mortality, morbidity, risk) pertinent to Delaware County population	On Track	Stay between baseline of 0 and target of 40	25	Victor Rullan	Weekly reports are being provided to DCHD leadership and staff, including emerging trends in communicable or reportable diseases as well as chronic diseases.	09/09/2024
Measure	Design and implementation of a continuous quality improvement plan (CQI), which will include trainings using information and data on lessons learned, case studies, and debriefing sessions.	On Track			Victor Rullan	Implemented method to identify cases of pregnant people without STI case management services.	08/31/2024
Measure	Training will include improving the collection of information and data from case investigations' interviews by adding supplemental questions needed to accurately identify the potential causes of infectious diseases and plan	On Track			Victor Rullan		09/09/2024

2024-09-09 - 03:01:26PM EDT 4 of 4



**DELAWARE COUNTY HEALTH DEPARTMENT**

# BOH Epi Update

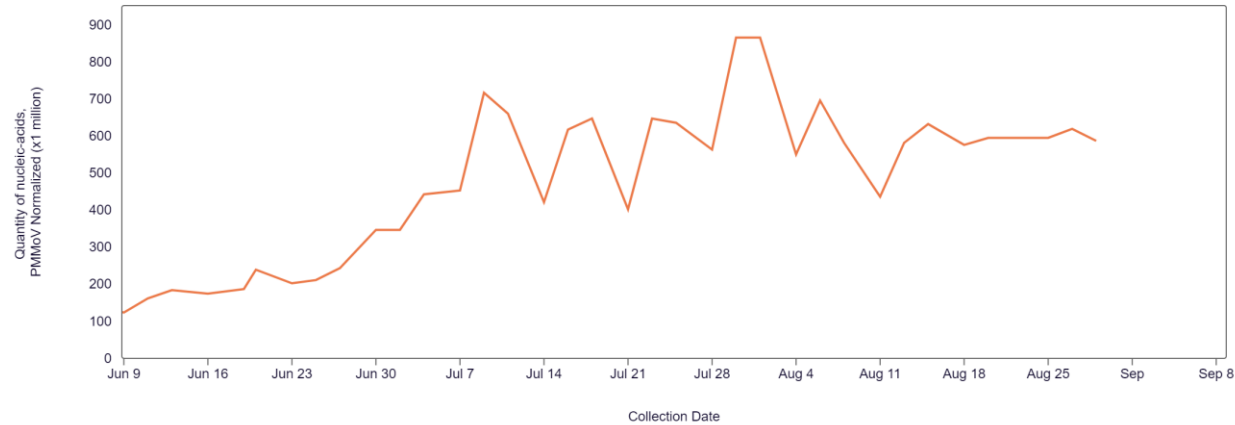
September 12, 2024

# Recent Weeks

- **COVID-19** significantly increasing 0-4 years of age, and increasing in 5-11, 25-65+ years of age (Aug 26-30, 2024)
  - High SARS-Cov-2 (COVID-19) Wastewater detection 05/28/2024 - 08/28/2024 (92 days)
- Delco statistically significantly higher in **aseptic meningitis** and **candida auris** (fungus) cases over the last 4 weeks compared to similar 4-week periods over the last 10 years. *Report excludes Hep B chronic, hep C chronic, Lyme, COVID-19, influenza A, influenza B, influenza unspecified, and RSV*
- Last week, PADOH released 17th statewide **childhood lead surveillance annual report**, covering data for children tested in PA including Delco during the calendar year 2022
- **Eastern equine encephalitis (EEE)** transmitted to humans through the bite of an infected mosquito, 30% of people with eastern equine encephalitis die
  - Luzerne County, PA (2023), None PA (2024), 1 case New Jersey (2024)
- **West Nile Virus** Neuroinvasive human cases (as of August 27<sup>th</sup>, 2024)
  - 195 US cases from 33 reporting states; Delaware, Montgomery, Philadelphia Counties less than 5
- **Mpox** (travel related only)
- **Listeriosis** (Boar's Head EST. 12612 or P-12612) - 57 people have been hospitalized and 9 deaths in 18 states; 2 cases in PA, none in Delco

# Delaware County Wastewater Monitoring

## SARS-CoV-2, Chester, PA



- Sample collected
- Chester, PA (DELCORA Western Regional Treatment Plant)

## Norovirus, Chester, PA



- Sample collected
- Chester, PA (DELCORA Western Regional Treatment Plant)

# Recent Weeks and Year to Date

2024	Week 28	Week 29	Week 30	Week 31	Week 32	Week 33	YTD 2023	YTD 2024	DIFF LAST YEAR
TB	0	0	0	1	0	1	7	12	+5
CHLAMYDIA	59	58	53	51	61	49	2076	1917	-159
SYPHILIS CONG	0	0	0	0	0	0	1	1	0
SYPHILIS EARLY LAT	2	1	0	0	0	0	59	35	-24
SYPHILIS LATE/UNK	1	1	0	0	0	0	44	39	-5
SYPHILIS PRIMARY	1	0	0	0	0	0	18	10	-8
SYPHILIS SECONDARY	1	2	0	1	0	0	24	26	+2
GONORRHEA	22	21	30	20	22	26	680	703	+23
MEASLES	0	0	0	0	0	0	0	0	0
Pertussis	8	6	4	8	8	2	1	148	+147
HEP B CHRONIC	2	4	5	4	5	6	202	164	-38
HEP A	0	0	1	0	0	0	8	4	-4
HEP B ACUTE	0	0	0	0	0	0	1	0	-1
FLU A	4	3	1	7	3	5	557	2,849	+2,292
FLU B	0	0	0	0	0	0	257	1,285	+1,028

MMWR Year	MMWR Week	MMWR Week Start Date	MMWR Week End Date
2024	26	6/23/2024	6/29/2024
2024	27	6/30/2024	7/6/2024
2024	28	7/7/2024	7/13/2024
2024	29	7/14/2024	7/20/2024
2024	30	7/21/2024	7/27/2024
2024	31	7/28/2024	8/3/2024
2024	32	8/4/2024	8/10/2024
2024	33	8/11/2024	8/17/2024
2024	34	8/18/2024	8/24/2024
2024	35	8/25/2024	8/31/2024
2024	36	9/1/2024	9/7/2024
2024	37	9/8/2024	9/14/2024
2024	38	9/15/2024	9/21/2024
2024	39	9/22/2024	9/28/2024
2024	40	9/29/2024	10/5/2024
2024	41	10/6/2024	10/12/2024
2024	42	10/13/2024	10/19/2024

**RED** = Increased this year compared to last year same week, **GREEN** = decreased



# What about Pertussis (whooping cough)?

- Pertussis is primarily a toxin-mediated disease
- The bacteria attach to the cilia of the respiratory epithelial cells, produce toxins that paralyze the cilia, and cause inflammation of the respiratory tract, which interferes with the clearing of pulmonary secretions

CDC <https://www.cdc.gov/vaccines/pubs/pinkbook/pert.html#:~:text=of%20host%20defenses-,Pathogenesis,the%20clearing%20of%20pulmonary%20secretions.>

## **New directive from PA DOH (2024 – PAHAN – 767-09-04-ADV)**

- **If there is a high index of suspicion for pertussis and/or if patients have certain high risk conditions or occupations, providers should start antibiotics prior to receiving test results and patients should be told to remain home until completing five days of antibiotics or testing negative for pertussis**

CDC <https://www.pa.gov/content/dam/copapwp-pagov/en/health/documents/topics/documents/2024%20HAN/2024-767-9-4-ADV-Pertussis.pdf>



# What about Pertussis (whooping cough)?

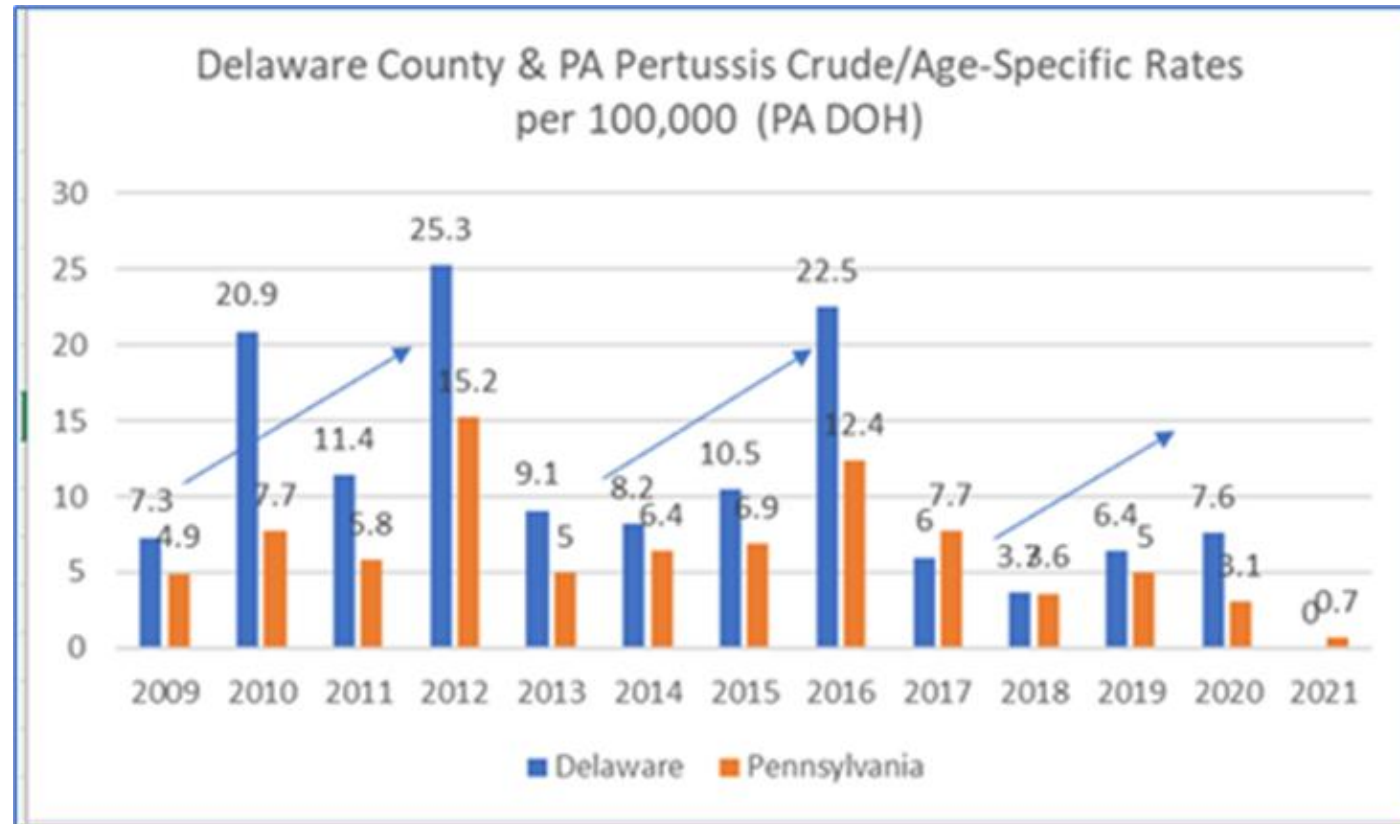
- Nationwide number of pertussis cases were lower than usual over the past few years, during and following the COVID-19 pandemic.
- Levels are beginning to [return to pre-pandemic patterns](#) where more than 10,000 cases are typically reported each year.
- Mitigation measures used during the pandemic (e.g., masking, remote learning) may explain lowered transmission of pertussis during the pandemic.
- Preliminary data show that more than **four times as many cases** have been reported nationally as of week 33, reported on August 17, 2024, compared to the same week in 2023.
- The number of reported cases this year is higher than what was seen at the same time in 2019, prior to the pandemic.

Source: CDC <https://www.cdc.gov/pertussis/php/surveillance/index.html>

# What about Pertussis (whooping cough)?

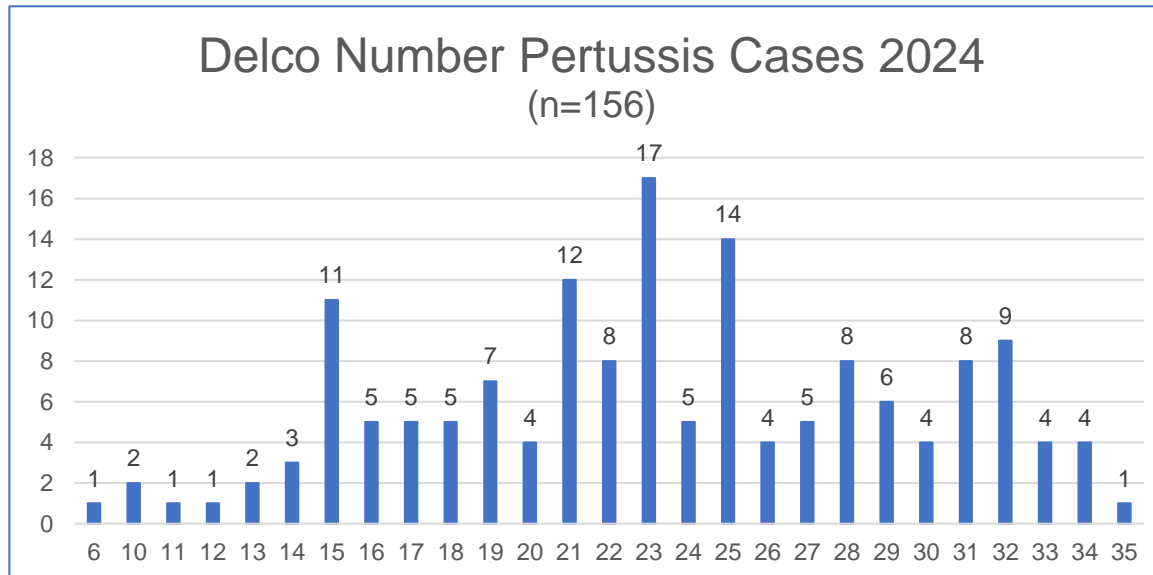
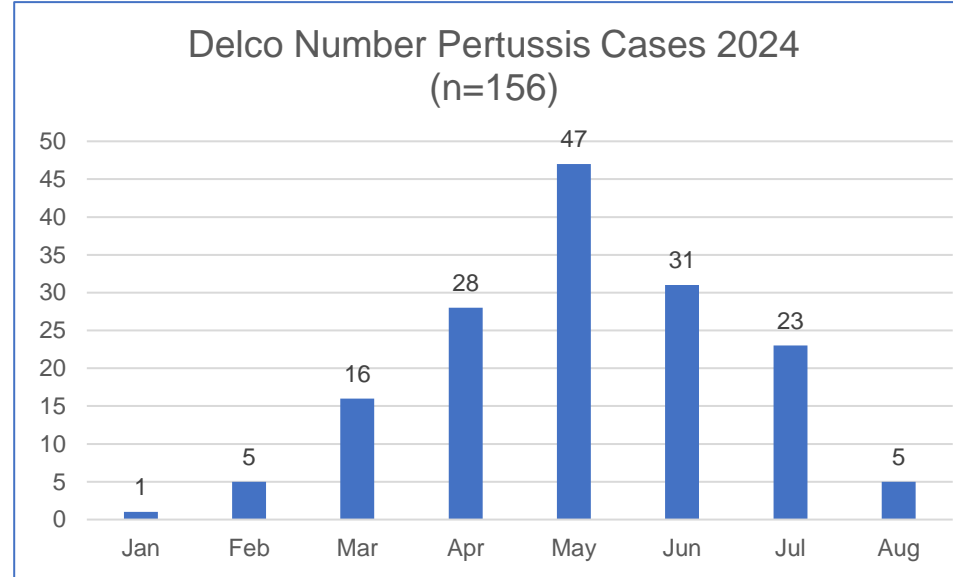
## Historical Pertussis Data – Delaware County, PA

- Consistent with statewide trends, Delaware County crude rates of pertussis have shown a cyclical increasing pattern from 2009 to 2020 (all races, ages)
- With the exception of 2017, Delaware County pertussis rates have been higher than Pennsylvania

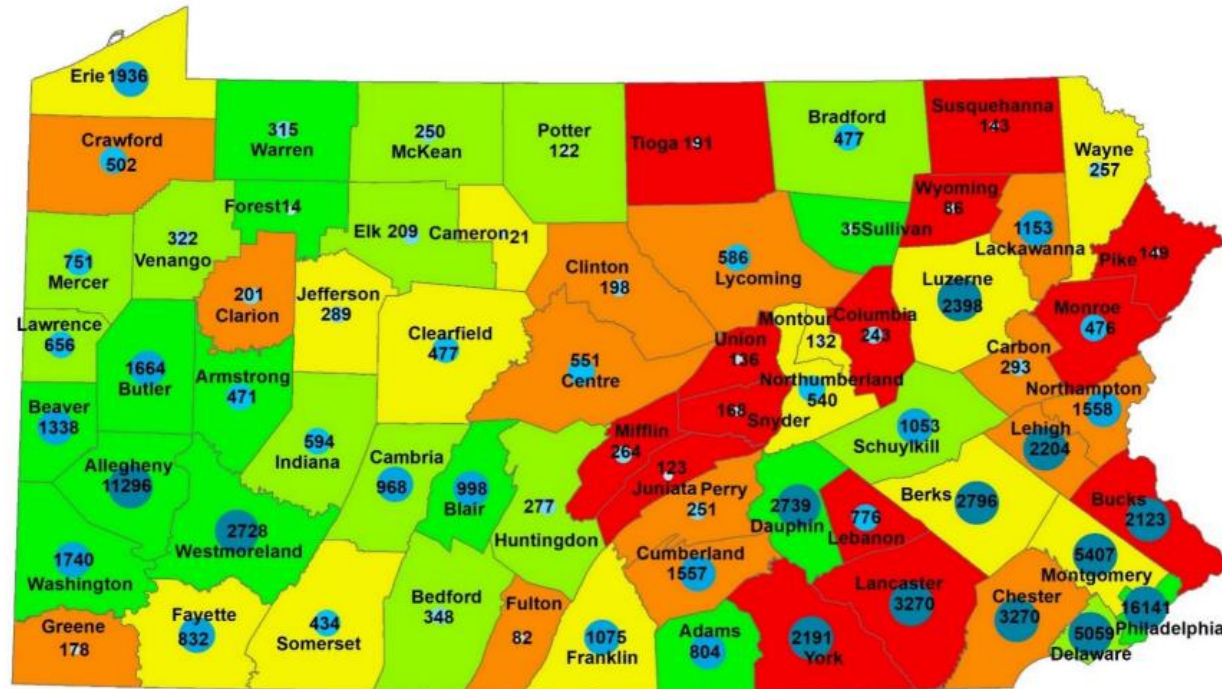


# What about Pertussis (whooping cough)?

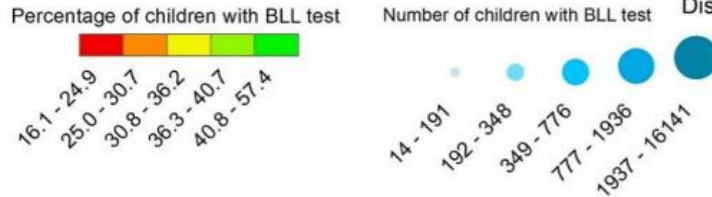
## Delco Cases by Month and Week (January- August 2024)



# Number and Percentage\* of Children Aged 0–23 Months Tested for Blood Lead Level by County, 2022

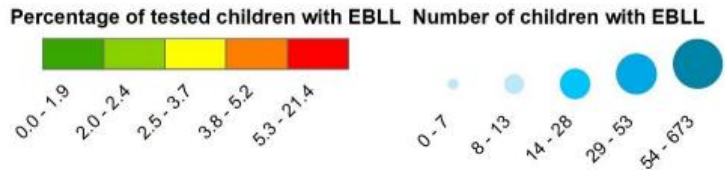
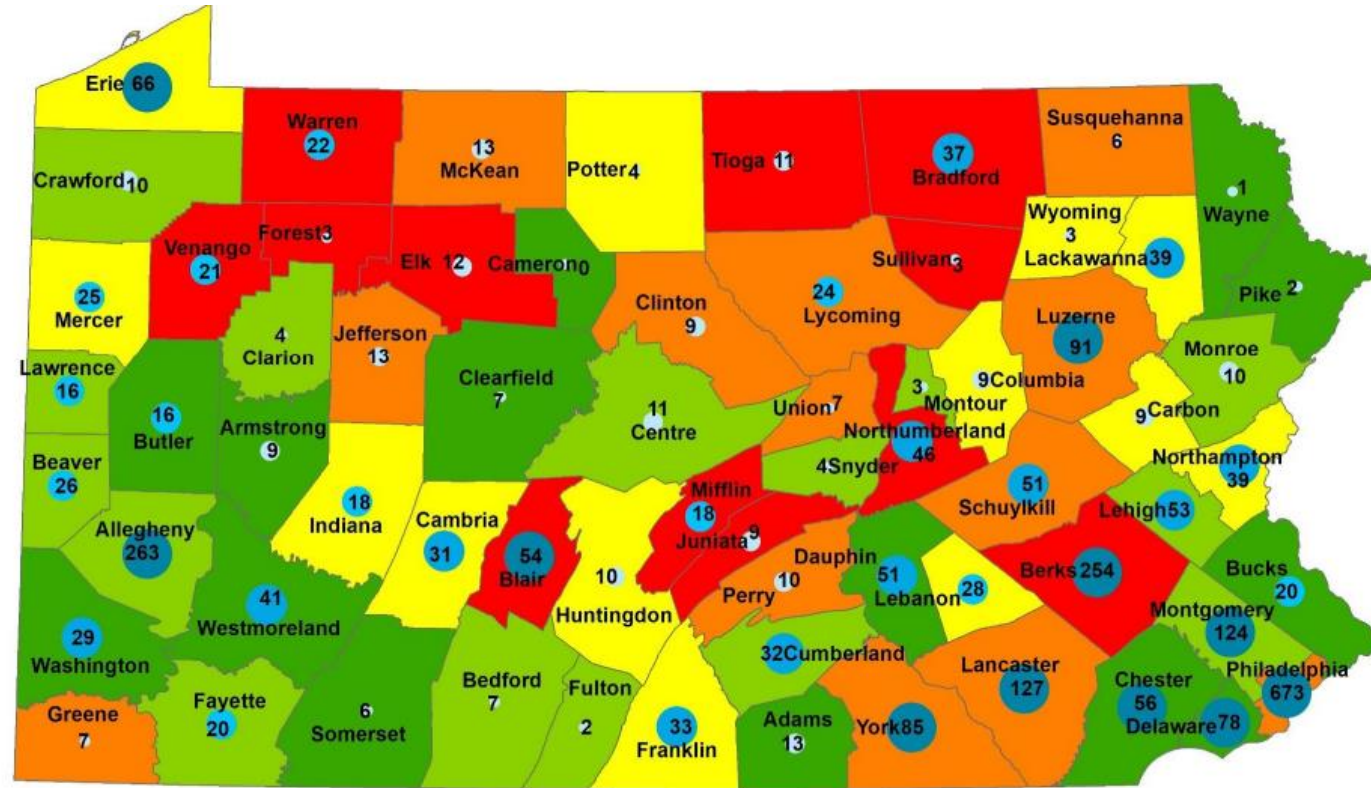


Data Sources: Pennsylvania's Electronic Reportable Disease Surveillance System and U.S. Census Bureau



\*Percentage was calculated by dividing the number of children aged 0–23 months tested in each county by the 2019 intercensal estimate of the number of children aged 0–23 months residing in the county.

# Number and Percentage\* of Children Aged 0–23 Months with Confirmed Elevated Blood Lead Level by County, 2022



Data Sources: Pennsylvania's Electronic Reportable Disease Surveillance System and U.S. Census Bureau

\*Percentage was calculated by dividing the number of children aged 0–23 months with EBL by the total number of children aged 0–23 months tested for blood lead level in 2022.





**DELAWARE COUNTY HEALTH DEPARTMENT**

# BOH Environmental Health Update

2024 Overview and Highlights

September 12, 2024



## New in '24

- Liquid Waste Hauler Program
- Continuous Quality Improvement

# Liquid Waste Hauler Program (LWH)

## License

- Early Communication to Haulers
- Training to admin staff and EH Team

## Inspection

- Smooth Transition
- Easy Process
- Positive Feedback





July 1<sup>st</sup>, 2024  
Baldwin Towers Lot

# Staff Development

## DIVISION ORG PLANNING

Meeting each January to schedule staff meetings, work sessions

*Foster team culture*

## TRAINING

Staff development (ex. CFM)  
Standardization

*Empower staff*

## WORK SESSIONS

Goal 2x/year

*Empower staff*

## TEAM BUILDING

Goal 2x/year

*Foster morale  
Enhance trust*

## MISSION VISION VALUE

Incorporating into the assessments of our program and workforce

*Enhance trust within division and community*

# SOP Development



## PROGRAM ASSESSMENT

Work with data analyst  
Accumulate more data from IMS;  
services requested, services  
provided, outcomes, is the data  
aligned with department goals



## INSPECTION REPORT AUDIT

Are we meeting goals in  
Communication, training (staff),  
education(public)



## PROCESS EVALUATION

Updating existing protocols and  
process; Call processing, payment  
processing, complaint process,  
new program assessment (LWH)



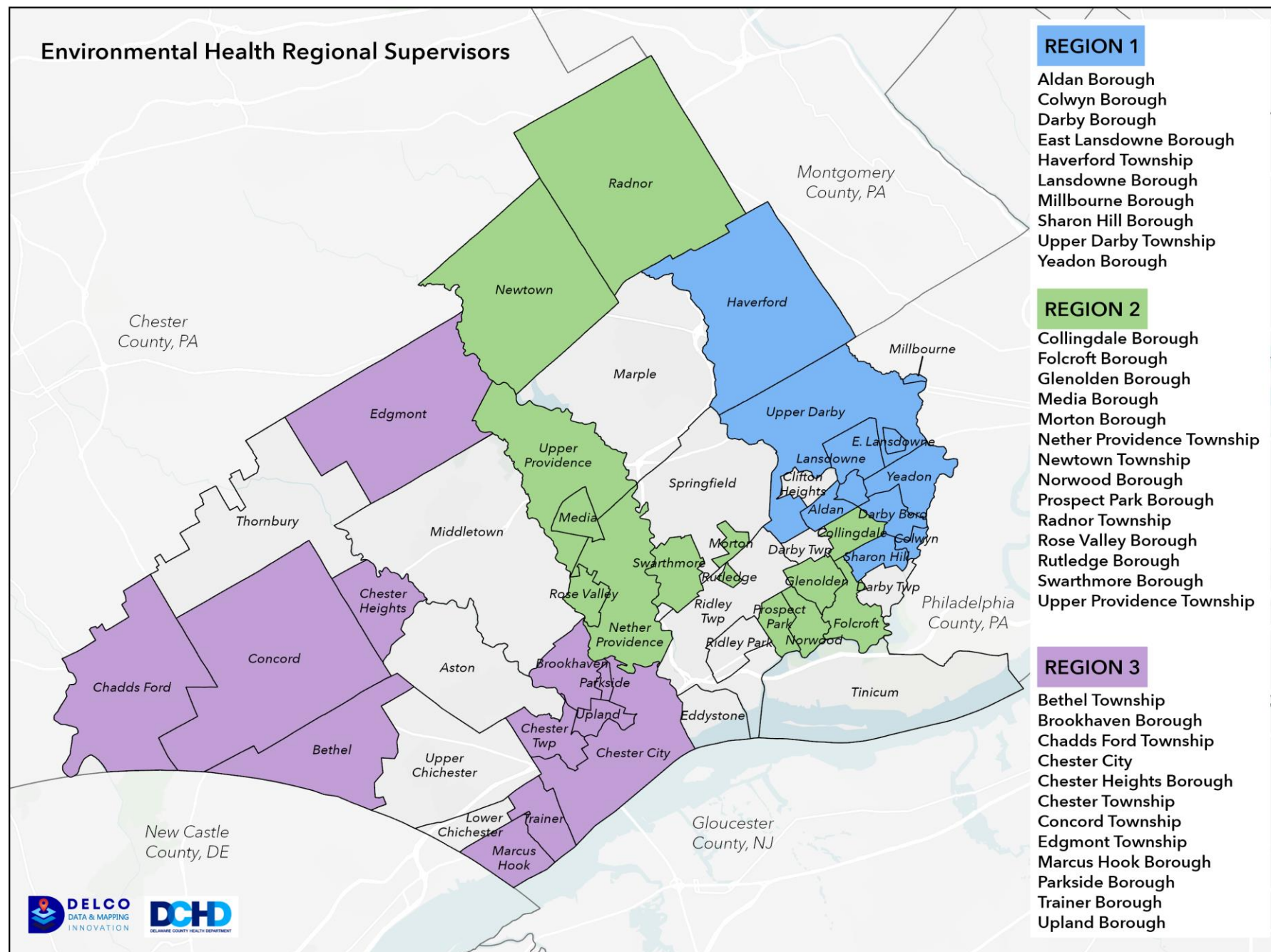
## INSPECTION AUDIT

Work flow, staffing, performance,  
training needs, workforce  
development, standardization



# Regions

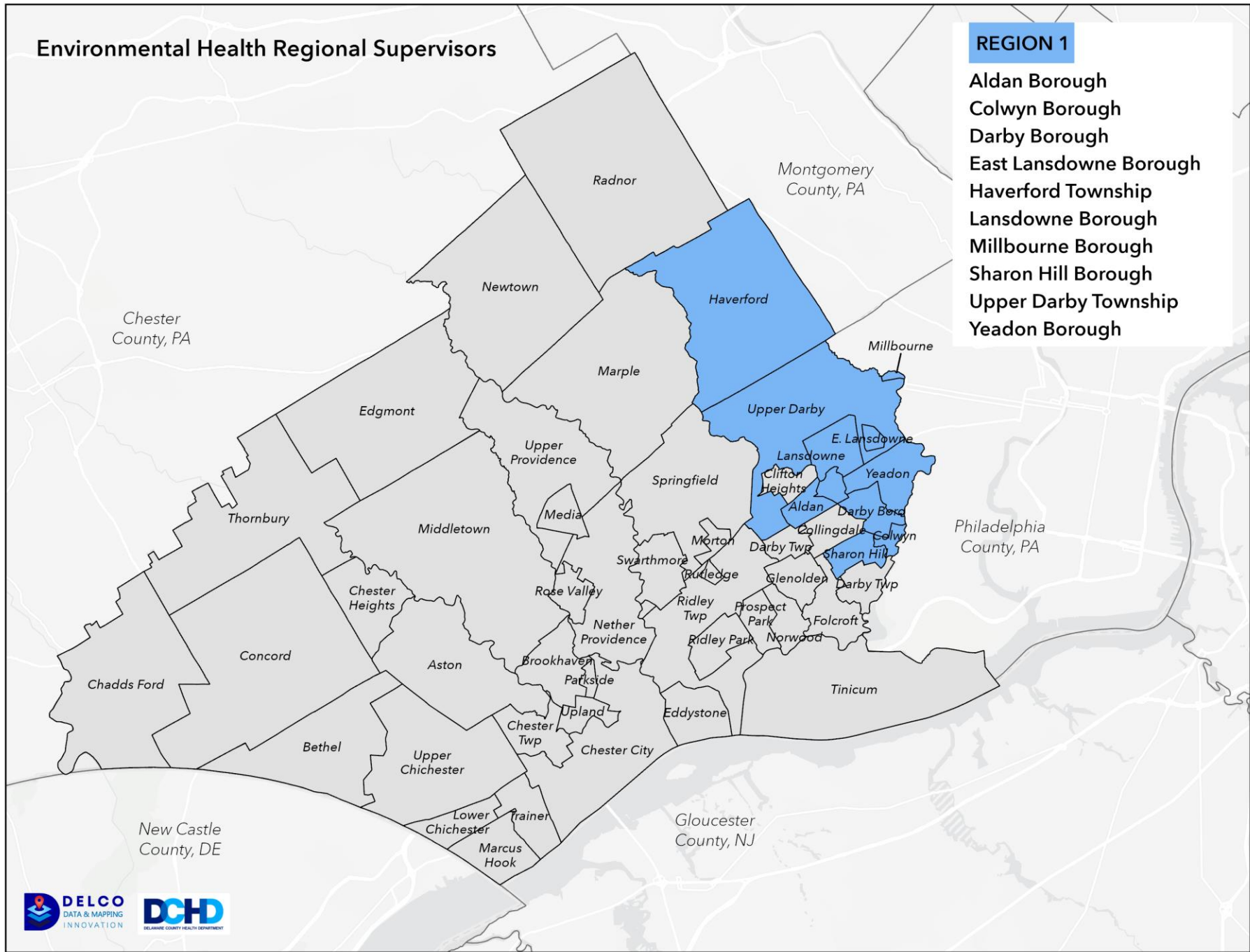
Service area and highlights



# Region 1

## Environmental Health Regional Supervisors

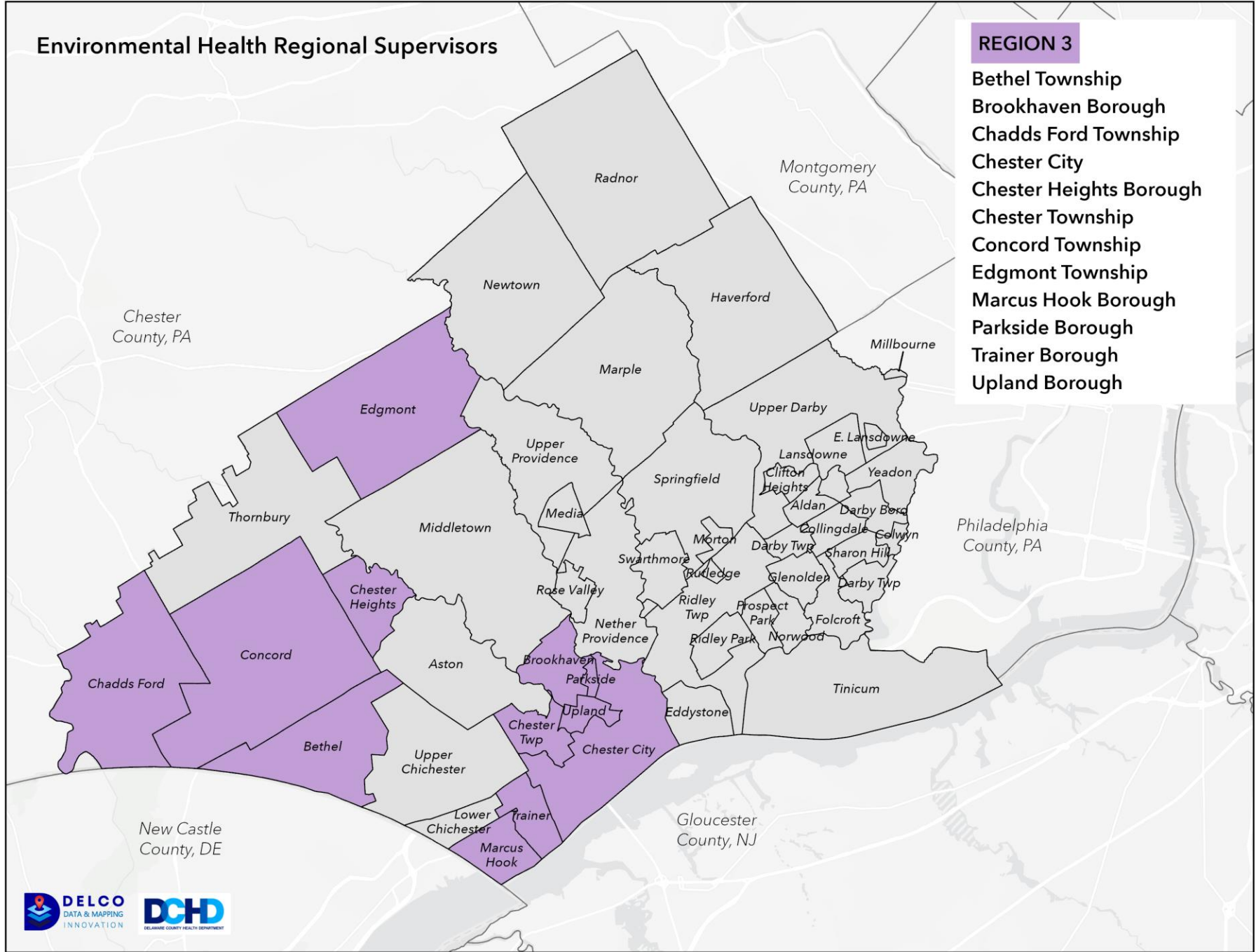
- REGION 1**
- Aldan Borough
  - Colwyn Borough
  - Darby Borough
  - East Lansdowne Borough
  - Haverford Township
  - Lansdowne Borough
  - Millbourne Borough
  - Sharon Hill Borough
  - Upper Darby Township
  - Yeadon Borough



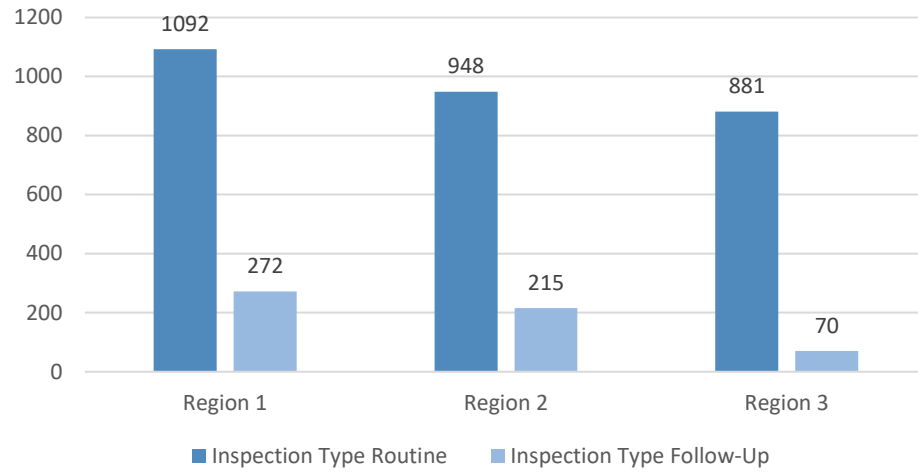




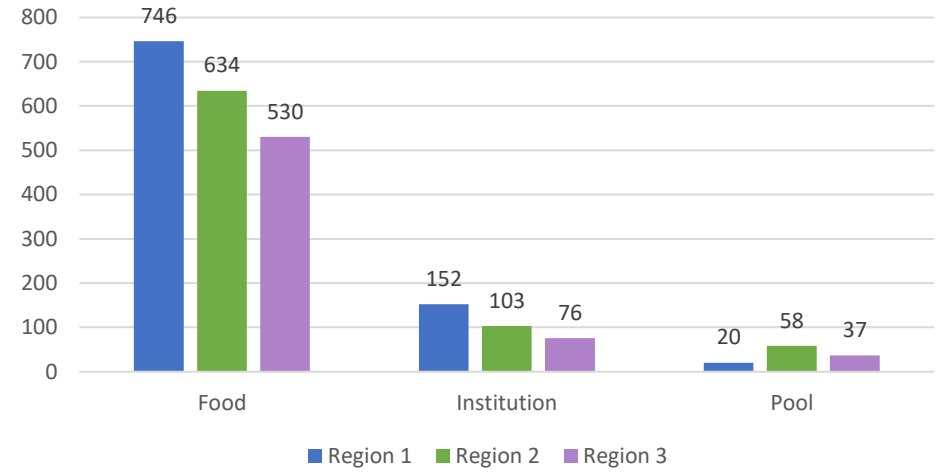
# Region 3



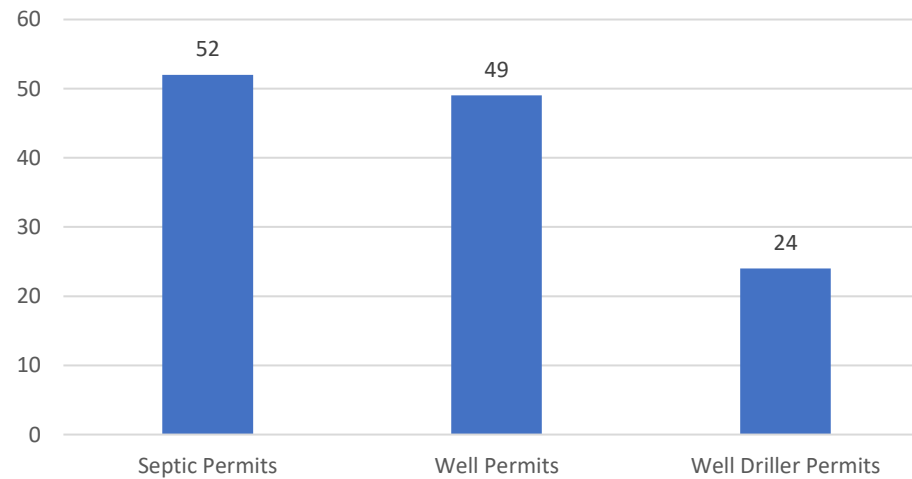
### Number of Inspections



### Number of Facilities



### Septic/Well Permits





## Region 1

- 746 Food, 152 Institutions, 20 Pools
- 1092 Routine Inspections, 272 Follow-Up Inspections
- Top 3 Violations
  - Insects, Rodents, Animals not Present
  - Date Labeling
  - Time/Temperature Control for Safety, Hot/Cold Holding

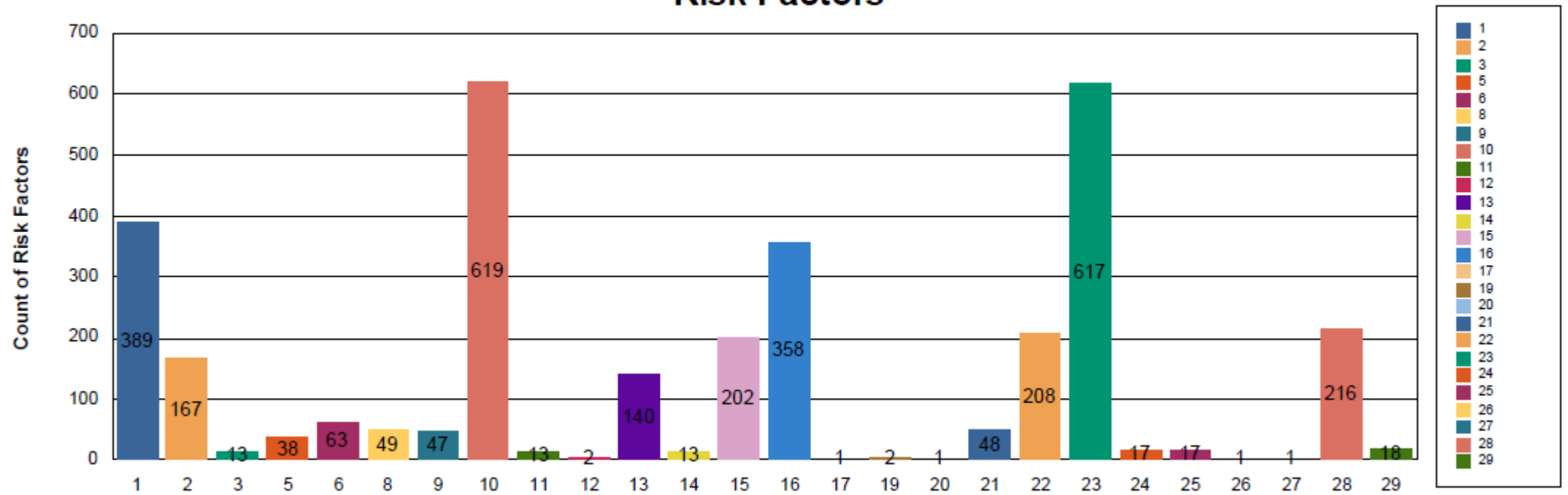
## Region 2

- 634 Food, 103 Institutions, 58 Pools
- 948 Routine Inspections, 215 Follow-Up Inspections
- Top 3 Violations
  - Food Storage Containers not Labeled
  - Date Labeling
  - Food Separated and Protected

## Region 3

- 530 Food, 76 Institutions, 37 Pools
- 881 Routine Inspections, 70 Follow-Up Inspections
- Top 3 Violations
  - Date Labeling
  - Food Storage Containers not Labeled
  - Sanitizer Test Kits

## Risk Factors



Thank you



Contributors:  
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