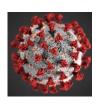
Strategic Plan Updates: 2011-2021 Closeout and 2023 Progress Report

Presented by Siri Kushner, Assistant Community Health Director Kitsap Public Health Board March 7, 2023





2011-2021 Strategic Plan Closeout

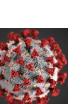


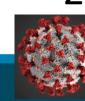
- KPHD's most recent 10-year strategic plan was created and approved by the Board in 2011
- In 2016, that plan was updated, and board approved
- Activities delayed by COVID:

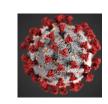


- No bandwidth to carry out many of the elements of the plan
- Unfinished systems to assess progress
- No time to develop a new strategic plan









Amended 2011-2021 STRATEGIC PLAN

Approved by Kitsap Public Health Board on January 5, 2016

Initiativ	ve 1	We will decrease communicable diseases and their impacts in our community.						
Goals:		 Enhance tracking and analysis to decrease significant communicable disease threats. 						
		Assess and increase immunization rates.						

Initiative 2	We will decrease chronic diseases and their impacts in our community.							
	Enhance partnerships to prevent chronic disease.							
Goals:	 Strengthen systems to increase chronic disease data gathering, sharing and evaluation. 							
	Promote access and linkage to preventative care across all ages.							

Initiative 3	We will protect the public from contaminated water, food, land, and air, and insanitary environments.						
Goals:	 Prevent and reduce the public's exposure to unhealthy and unsafe environments. 						
Godis.	Develop and implement key policy and enforcement interventions.						

Initiative 4	We will promote healthy child development and health equity by ensuring all children have healthy starts.						
Goals:	o Increase evidence-based prenatal and early childhood interventions. o Build capacity to assess poor birth outcomes.						
	Increase access and linkage to pre-conceptual, inter-conceptual and prenatal care.						

Initiative 5	We will strengthen our ability to provide the Foundational Public Health Services.							
	 Strengthen our capacity to do assessment, surveillance, and epidemiologic work. 							
	 Strengthen our capacity for public health emergency preparedness and response. 							
Goals:	 Strengthen our capacity for internal and external public health communication. 							
Goals:	 Enhance our ability to develop and implement strategic Public Health policies. 							
	 Increase capacity to implement effective business practices and ensure agency sustainability and accountability. 							
	 Ensure capability to provide Foundational Public Health Programs. 							

Initiative 6	We will support statewide and regional efforts to address the Triple Aim of health system reform.
Goals:	 Support regional efforts to establish a collective impact process to improve population health across the region.
Goals:	 Participate as a public health stakeholder to accomplish performance-based projects that improve population health.

We do Strategic Planning to...

- Set a proactive (not reactive) path to guide organizational decision making for the future
- High-level strategic direction (green) provides purpose for planning

Strategic Plan Major Components





Assessment of our progress in 2021 and 2022

- Subject matter experts at KPHD conducted a two-part assessment
 - Part 1: rating on a scale of 0 to 3 for each goal within each initiative
 - 0 = not started
 - 1 = planning
 - 2 = implementing
 - 3 = completed
 - Blank = not applicable

2021 Annual status assessment of progress by Strategic Initiative.						
Initiative:	1	2	3	4	5	6
Average status:	0.0	0.9	1.6	8.0	1.3	3.0

2022 Annual status assessment of progress by Strategic Initiative.						
Initiative:	1	2	3	4	5	6
Average status:	1.2	2.0	1.8	1.6	1.9	3.0

Part 2: narrative examples of progress

Assessment of our progress – examples for 2022

Initiative 1

Decrease communicable diseases and their impacts in our community.

Dedicated and embedded
Communicable Disease Epidemiologist

Initiative 2

Decrease chronic diseases and their impacts in our community.

Sustained partnerships in Healthy
Eating/Active Living (HEAL) coalition,
Kitsap Moves, new Injury Prevention
program

Initiative 3

Protect the public from contaminated water, food, land, air and insanitary environments.

Ongoing implementation of policy and enforcement interventions - vapor product ordinance, school safety inspections, drinking water ordinance

Initiative 4

Promote healthy child development and health equity by ensuring all children have healthy starts.

Ongoing implementation of Nurse Family Partnership (NFP), expansion to serve 12 additional families/year

Initiative 5

Strengthen our ability to provide the Foundational Public Health Services.

Strengthened capacity for assessment, emergency preparedness, communications and performance and quality; invested Foundational Public Health Services funds across KPHD

Initiative 6

Support statewide and regional efforts to address the Triple Aim of health system reform.

Participation in regional Olympic Community of Health Action Groups and funded for "Connect to Vax" project ... moving ahead to 2023

New Strategic Plan Process

2023 Strategic Planning Timeline

Stakeholder/Community Input

CHNA/CHA community leader interviews Oct-Nov KPHB and employee surveys Nov KPHD employees + VillageReach

Strategy Review/Development

early January– February
meet Jan x 1 long, and Feb x2 (1 long)
Strategic Planning Workgroup

Action Plans

March – April **KPHD employees + VillageReach**

Activity/ Strategy input

March
Community
leaders
interviewed
+ KPHD
employees

Board Approval

Dissemination

Monitor

June- December KPHD employees + VillageReach

October

November

December

January

February

March

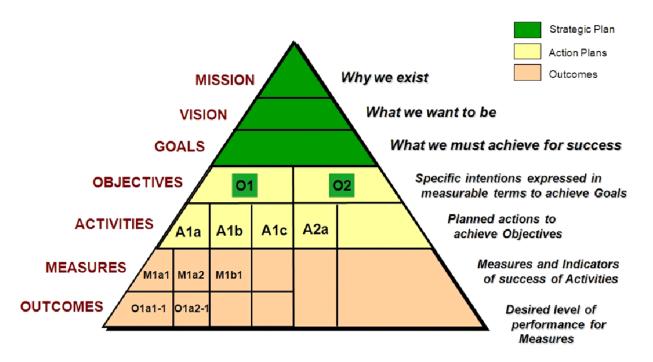
April

May

June

What's in a Strategic Plan?

Strategic Plan Major Components



Two major components of a strategic plan:

- Strategy Discernment: Provides strategic direction. Without this, planning lacks a clear purpose. (Green)
- 2. <u>2-3 year Action Plan for each Initiative:</u>
 Outlines the plan to bring the strategic direction into being. Without this, it remains a vision. (Yellow and Orange).

KPHD will have program-level annual work plans with activities aligned to the 2-3 year Action Plans and the 7-year Strategic Plan

Questions or comments - <u>Siri.kushner@kitsappublichealth.org</u>

2022: Responding to Mpox

Yolanda Fong, Gabrielle Hadly, Tad Sooter & Elizabeth Davis

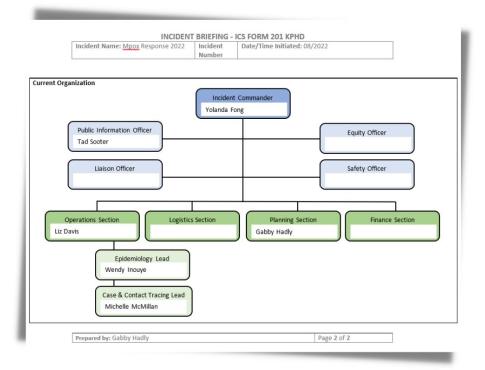




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- 3. PHEPR overview + KPHD emergency response overview
- 4. Communications & outreach overview
- 5. Medical countermeasures & case and contact investigations summary
- 6. Time for questions

Acknowledgments & org chart



With special thanks to:

- George Fine
- Kaela Moontree
- Siri Kushner
- Jessica Guidry
- KPHD staff

What is Mpox?

KNOW ABOUT MONKEYPOX

What is monkeypox?

Monkeypox is a disease caused by a virus. Monkeypox is being reported this year in many countries that do not normally have monkeypox cases, including the United States. People who get monkeypox typically recover in 2-4 weeks, but monkeypox can cause severe illness.

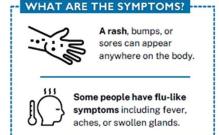
HOW DOES IT SPREAD?



Monkeypox most often spreads through skin-to-skin contact, including during sex.

Monkeypox can also spread through:

- Respiratory droplets or saliva during faceto-face contact, such as kissing.
- Contact with items such as clothing or bedding used by someone with monkeypox.

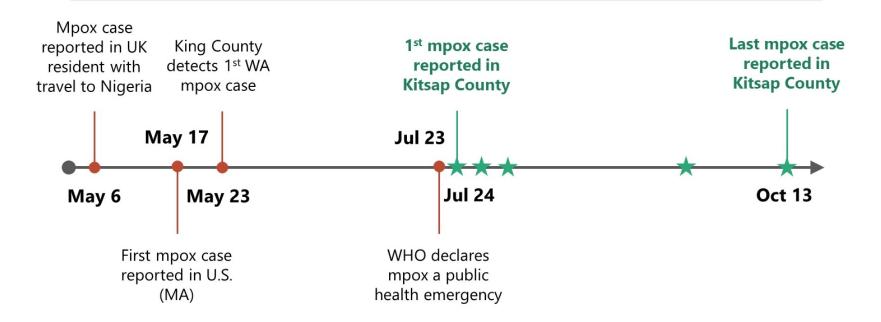


Symptoms begin 5-21 days after exposure.

- A virus in the Orthopox family
- Signs and symptoms
 historically have a
 characteristic rash preceded
 by prodrome
- Cases associated with this outbreak had atypical features. Rash still characteristic, but often onset in genital and perianal region (prodrome mild or not occurring)

Excerpted from CDC Clinician Outreach and Communication Activity (COCA) call 5/25/2022

2022 Mpox epidemic in brief



Emergency Preparedness & Response

- Overview of the Public Health Emergency Preparedness and Response Program (PHEPR)
- Introduction to how KPHD responds to emergencies
- Overview of PHEPR's role in this response
- Review of lessons learned



What does Public Health Emergency Preparedness & Response do?

Goal: Protect and promote the health of all persons in Kitsap County during emergencies by ensuring KPHD has the plans, procedures, trainings, and relationships needed to rapidly respond to and recover from health threats and emergencies.

Before:

- Ensure KPHD staff are prepared emergencies
- Ensure the agency can carry out effective responses to public health emergencies

During:

- Help to organize and carry out responses
 - Provide trainings
 - Document response work
 - Notify partners
 - Utilize relationships

After:

- Reflect on responses find out what went well and what can be improved
- Update plans and processes
- Conduct trainings and exercises to practice changes

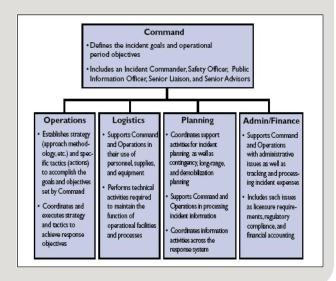
How does KPHD respond to emergencies?

Incident Command System

Provides guidance on how to organize assets and respond to incidents

Incident Command System

All responses are organized into five functional areas



The 4 Levels of Response



Response Level Identification Tool

	LEVEL 1	LEVEL 1 LEVEL 2		LEVEL 4	
	OFF-NORMAL	LOW	MEDIUM	HIGH	
Level of public interest	Little to no interest - regular PIO can handle	Moderate - may be managed without ICS PIO	Likely High - ICS PIO activation needed	Potential to cause widespread alarm - call center needed	
Staffing utilized	Involves one division	Involves up to two cross- cutting programs	Involves four non-cross- cutting programs from various divisions	All divisions have roles	
Personnel duties	Normal	Somewhat different	Very different	Completely different	
Proposed ICS structure	IC	IC, PSC, OSC, maybe PIO	IC, PSC, OSC, PIO	IC, PSC, OSC, PIO, LSC, FC	
Needed ICS forms	None	IAP, SITREP	IAP, SITREP	IAP, SITREP	
Who to notify	ELT, PIO	ELT, PIO, DOH, NWHRN, LHJ, Tribes, HC, EMS, DEM, PHB, Navy	ELT, PIO, DOH, NWHRN, PHB, LHJ, Tribes, HC, EMS/DEM, Navy	ELT, PIO, DOH, NWHRN, PHB, LHJ, Tribes, HC, EMS/DEM, UC, Navy	
Demobilization	None	AAR, Team debrief	AAR, Team debrief	AAR, Team debrief	



Communications

- How communications started and progressed
- Lessons learned



Be First:

Crises are time-sensitive. Communicating information quickly is crucial. For members of the public, the first source of information often becomes the preferred source.



Be Right:

Accuracy establishes credibility. Information can include what is known, what is not known, and what is being done to fill in the gaps.



Be Credible:

Honesty and truthfulness should not be compromised during crises.



Express Empathy:

Crises create harm, and the suffering should be acknowledged in words. Addressing what people are feeling, and the challenges they face, builds trust and rapport.



Promote Action:

Giving people meaningful things to do calms anxiety, helps restore order, and promotes some sense of control.³



Show Respect:

Respectful communication is particularly important when people feel vulnerable. Respectful communication promotes cooperation and rapport.

Risk comms principles

Based on the CDC's Crisis & Emergency Risk Communication system. emergency.cdc.gov/cerc

Engage Community • Empower Decision-Making • Evaluate

Preparation

- Draft and test messages
- Develop partnerships
- Create plans
- Determine approval process

Initial

- Express empathy
- Explain risks
- Promote action
- Describe response efforts

Maintenance

- Explain ongoing risks
- Segment audiences
- Provide background information
- Address rumors

Resolution

- Motivate vigilance
- Discuss lessons learned
- Revise plan

Risk comms principles

Based on the CDC's Crisis & Emergency Risk Communication system.

emergency.cdc.gov/cerc

When to message



Being proactive



MONKEYPOX (MPV)

Para información en español, llame 360-728-2218, visita este sitio o este sitio

Sign up to receive monkeypox updates from Kitsap Public Health District by email or text.

Monkeypox is a disease caused by a virus. Health officials are tracking a global outbreak of Monkeypox is a disease caused by a virus, mealin ormulate are tracking a ground out-monkeypox in 2022. Monkeypox has been identified in many countries that do not normally report monkeypox, including the United States.

Kitsap Public Health is offering monkeypox vaccination every Wednesday and Thursday in Bremerton. See our <u>vaccine clinic calendar</u> for details or to book an appointment. For more information, call 360–728-2007 or email immunizations@kitsapoublichealth.org.

Kitsap Public Health ofrece vacunación contra la viruela del mono todos los miércoles y Kitsap Public Health ofrece vacunación contra la viruela del mono todos los miercoles y jueves en Bremerton. Consulte el <u>calendaro de nuestra clínica de vacunas</u> para obtener más información, llame al 360-728-2218 o para reservar una cita. Para obtener más información, llame al 360-728-2218 o

- Sign up to receive monkeypox updates by email or text Read our current monkeypox vaccination

- Accurately communicate risk
- Provide simple prevention steps
- Explain what KPHD is doing
- Set expectations for ongoing communication

OC information for healthcare professionals

First case!



PUBLIC HEALTH NEWS

First case of monkeypox reported in Kitsap County

KITSAP COUNTY, WA — Local health officials are responding to a probable case of monkeypox in a Kitsap County resident. It is the first case of monkeypox reported in the county.

The resident, an adult male, tested positive this week for Orthopoxvirus — the group of viruses that causes monkeypox. The CDC will conduct follow-up testing to confirm the case. Health officials are working to identify and notify anyone who might have been in close contact with the infected person.

More than 100 cases of monkeypox have been identified in Washington since May, with the majority of cases reported in King County. The United States is experiencing a monkeypox outbreak this year.

Monkeypox most often spreads through close, physical contact with an infected person who has symptoms. Symptoms include a rash with fluid-filled bumps or sores, which can appear anywhere on the body. Most people who have monkeypox recover in two to four weeks. Monkeypox can cause severe illness, especially in people who are immunocompromised. See the Q&A below or visit the state Department of Health website for more information.

"The first case of monkeypox in Kitsap is cause for awareness but not alarm," Kitsap Public Health District Health Officer Dr. Gib Morrow said. "We are asking residents to be aware of how monkeypox spreads and contact a healthcare provider if they experience symptoms."

Kitsap Public Health District has also asked local healthcare providers to seek testing for individuals who have symptoms of monkeypox and report possible cases to public health. Updates on monkeypox In Kitsap County will be posted to the Kitsap Public Health District website.

Vaccination limited to close contacts

Vaccination for monkeypox is not available to the general public or local healthcare providers at this



First probable monkeypox case reported in Kitsap County







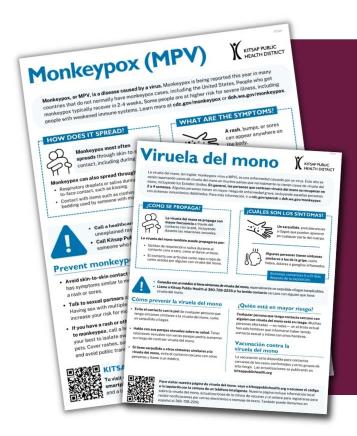




- Discuss in advance how we will communicate a case
- Clearly communicate risk
- Provide simple prevention steps
- Be prepared for inquiries

ranpox, cowpox and monkeypox — early this week. The Centers pozvirus — the genus of virus for Disease Control and Prevention will conduct follow-up testing to confirm the case as monkeypox. Health officials are currently identifying and notifying anyone who might have had contact with the infected resident, according to the press

Maintenance



- Reporting additional cases/updates
- Supporting our outreach and response efforts (vaccination, community engagement)
- Tailoring messages to specific audiences
- Producing and distribute educational materials
- Monitoring feedback, responding to inquiries
- Addressing misinformation/stigma



Outreach



• Identifying target audiences

• Developing messages/strategies

• Lessons learned

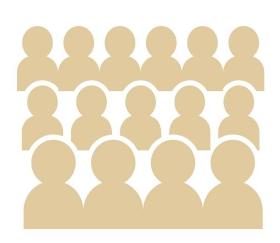
Questions



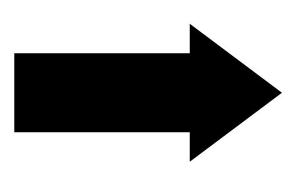
Identifying audiences

Review data & science

- Consult KPHD experts and partners
- Listen to community feedback



General population



Higher risk and/or barriers to accessing information



How do we reach our audience?

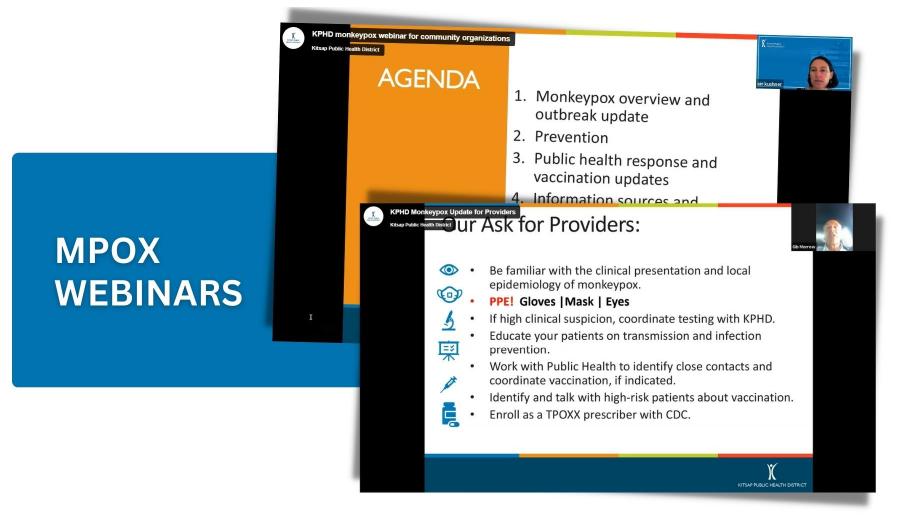
Populations most impacted by mpox outbreak

- Gay, bisexual, and other men who have sex with men
- People with multiple/anonymous sexual partners

Agencies who serve those populations

- KPHD HIV program
- Kitsap Pride and other LGBTQ+ organizations & social networks
- Healthcare and service providers







How do we communicate risk without increasing stigma?

Goal: Prevent discrimination. Ensure effective public health response.

Challenges:

- Communities most affected by mpox outbreak already experience stigma.
- Risk factors associated with mpox are stigmatized.
- "Monkeypox" name is problematic.

- No perfect solution.
- Communicate risk accurately: Anyone can get mpox; some behaviors increase risk.
- Focus on behaviors rather than identity.
- Tailor messages to audience.
 - General info for general audience.
 - Specific prevention guidance and discreet materials for at-risk populations.

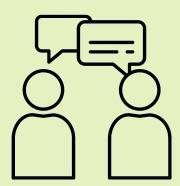
Case and contact investigations

- What we did
- Lessons learned



What we did

- Trained investigators
 - Mpox overview
 - Sensitive investigations trainings



- Prepared investigation and case / contact materials
- Conducted investigations and follow up
 - Isolation guidance, address questions / concerns
 - Close contact information

Medical Countermeasures

- Overview of Medical Countermeasures
- Challenges and strategies
- Summing it up

What are medical countermeasures?

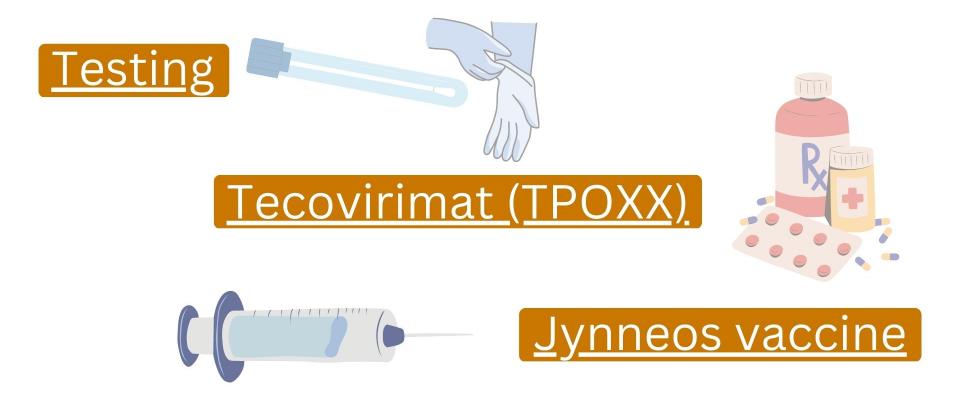
Medical countermeasures (MCMs) are medicines and medical supplies that can be used to diagnose, prevent, or treat diseases related to chemical, biological, radiological, or nuclear threats.



MCMs can include:

- Biologic products vaccines, blood products, and antibodies
- Drugs antimicrobial or antiviral drugs
- Devices diagnostic tests to identify threat agents and personal protective equipment (PPE)

Medical countermeasures for Mpox





Goal: Ensure access to timely, accurate Mpox testing in Kitsap County

Challenges:

- Varied clinical presentation made knowing when to test difficult
- Confusion over when to connect with Public Health
- Reports of being turned away when seeking testing

- Support providers with info via:
 - Advisories
 - Webinar/Q&A
 - On-call support
- Follow-up on testing issues as they occur
- Made local issues known to state

Treatment: Tecovirimat (TPOXX)

Goal: Identify and establish a pathway to Mpox treatment in Kitsap

Challenges:

- Antiviral available under an investigational new drug (IND) protocol
- Initial requirements of IND protocol were barriers for providers
- Medication only available through the Strategic National Stockpile

- Worked with VM and SeaKing to understand IND protocol
- Received stock to transfer to prescribing provider if/when needed
- Engaged local VMFH to create pathway to treat

Prevention: Jynneos vaccine

Goal: Mitigate mpox transmission through timely vaccination of close contacts and those at high risk of exposure.

Challenges:

- Extremely limited supply available only through Strategic National Stockpile
- Complex, stigmatizing and frequently changing eligibility criteria
- Prioritizing Post Exposure Prophylaxis (PEP) while allowing for Pre-Exposure Prophylaxis (PrEP) administration
- 2 dose series, 28 days apart
 - How do we ensure completion of series

- Served as a hub for DOH
- Adopted intradermal administration strategy when it was approved
- Release doses as first doses vs. second dose hold-back
- PrEP administration
 - Kept PEP doses set aside
 - Clinics at KPHD
 - Transferred doses to partners working with high risk populations
 - Used DOH eligibility criteria
 - Eligibility determined with attestation

Medical countermeasures in action

We used a flexible and collaborative approach to connect cases to resources.

Case study:

- The immunization team receives a call on a Friday afternoon from a parent concerned that their adult child has mpox.
- The caller describes their adult child as having a painful rash that has not been responding to topical treatment and is getting worse.
- They have taken the adult child to urgent care for mpox testing and were turned away. The adult child does not have a primary care provider, is uninsured.

Kitsap Mpox response



Total Mpox cases: 5

TPOXX prescribed: 0

Partner/provider webinars: 2

Close contacts identified: 18

Close contacts vaccinated: 11

KPHD Jynneos clinics: 5

Jynneos doses administered: 243



Key partners: VMFH, Northwest Washington Family Medicine Residency, PCHS, Planned Parenthood, and the UW Madison Clinic



Questions?