



# KING COUNTY AUDITOR'S OFFICE

December 28, 2018

## Follow-up on the Communicable Disease and Epidemiology Audit

TO:

Metropolitan  
King County  
Councilmembers




FROM:

Kymber Waltmunson,  
County Auditor

**Public Health – Seattle & King County has completed most audit recommendations, improving their preparation for large scale disease response efforts.** Public Health – Seattle & King County (DPH) has diligently responded to the audit recommendations, ensuring that departmental funding meets workload priorities and making improvements to a variety of processes related to disease response. These include increased access to information relating to previous outbreaks, changes to onboarding processes, and identification of key volunteers to reach out to for disease events. As a result, DPH is more informed about the effect of previous events and is better prepared to access additional staff or volunteers during unanticipated disease events, helping it to ensure the health and safety of King County residents in the event of an outbreak.

**While communicable disease funding challenges are less severe than at the time of the audit, DPH has not formalized a plan for future unanticipated costs.** New Foundational Public Health Services funding increases overall communicable disease response capacity, but the Prevention Division (Prevention) could still incur significant unanticipated costs if there is a large scale disease outbreak. By planning for these costs, DPH and Prevention can reduce the risk that disease responses will have negative financial and programmatic consequences for both the department and the division.

Of the thirteen recommendations scheduled for the 2016 audit's follow-up:

	11 DONE		2 PROGRESS		0 OPEN
<b>Fully implemented</b>		<b>Partially implemented</b>		<b>Remain unresolved</b>	
Auditor will no longer monitor.		Auditor will continue to monitor.		Auditor will continue to monitor.	



**King County**

Please see below for details on the implementation status of these recommendations.

## Recommendation 1

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should conduct, document, and implement a workload priorities review for the Communicable Disease and Epidemiology program.**

STATUS UPDATE: The Prevention Division (Prevention) has conducted a review of workload priorities through recent strategic planning efforts and by soliciting input from section managers and staff. In its Line of Business & Strategic Plan, Prevention identified long term key priority areas, identifying specific disease prevention and response work that needs to be sustained. This includes maintaining the capacity to respond to certain disease and infection types and continuation of several Prevention programs.

Prevention has also identified notifiable conditions (including campylobacter, cryptosporidium, and giardia) that should be given lower priority considering limited resources. To preserve investigative capacity for the highest priority work, Prevention decided to discontinue time-intensive individual case investigation work in these areas. A review of the impact of current efforts in controlling disease spread found that the investigative work conducted through mailed questionnaires had low response rates and incomplete and delayed data. Given these limitations, the division has decided to regularly review electronic surveillance reports for evidence of these outbreaks instead. The Communicable Disease and Epidemiology Program (CD-Epi) has identified several other work process changes that may reduce workload without an increase in disease transmission risk.

By establishing clear workload priorities for CD-Epi, Prevention has improved staff's ability to manage tasks during periods of high disease response needs. This helps ensure that disease response work is focused on the most urgent community needs.

## Recommendation 2

DONE 

**The Department of Public Health – Seattle & King County should document an assessment of resource distribution to ensure that communicable disease control funding reflects department strategic priorities.**

STATUS UPDATE: The Department of Public Health (DPH) held a series of meetings to set strategic priorities for the 2019-2020 budget session and realigned revenues to key communicable disease services. Washington state designates a limited set of core public health services as Foundational Public Health Services (FPHS), and provides funds to local governments for these purposes. DPH successfully lobbied for an increase in FPHS funding for King County, with much of this increase being committed to communicable disease work. This includes an expansion of CD-Epi programs that will fill identified service gaps for healthcare acquired infection prevention and response, hepatitis B and C control, and multiple other services.

By assessing its needs and assigning funds accordingly, DPH has taken steps to ensure that its spending reflects its priorities and supports community health.

## Recommendation 3

PROGRESS



**The Prevention Division of the Department of Public Health – Seattle & King County should work with the Department of Public Health to document a plan for future unanticipated costs incurred by communicable disease response.**

STATUS UPDATE: New FPHS revenue has allowed Prevention to increase overall communicable disease capacity, with employees reporting that this will allow them to more easily respond to outbreaks without incurring additional costs. Although increased funding for temporary staff was considered for 2019-2020, this was not included in the final proposed budget. Staff report that DPH would like to build a surge contingency reserve fund, but that this would not happen until the Public Health Fund stabilizes. While increases in general capacity will help to address future communicable disease events, high unanticipated costs are still possible during large scale disease outbreaks.

To complete this recommendation Prevention and DPH may develop a plan for future unanticipated costs that includes designated funding for this purpose. FPHS funding increases were approved for installments in 2017 and 2018, but it is unclear whether additional funding will be approved for future years. If increased staff capacity is connected to a long-term funding source, and current funds prove adequate for future large scale disease events, this recommendation may also be closed. By planning for unanticipated costs, DPH and Prevention can reduce the risk that disease responses will have negative financial and programmatic consequences for both the department and the division.

## Recommendation 4

DONE



**The Prevention Division of the Department of Public Health – Seattle & King County should collect and analyze data about how staff members use their work hours and use the results to inform staffing decisions.**

STATUS UPDATE: After consulting with an organizational development consultant, CD-Epi conducted a time study to better understand staff work. As part of this study, the nine members of the investigative team tracked the time they spent on a list of tasks. Based on this effort, CD-Epi leadership determined that investigative staff spend the vast majority of its time on position-appropriate tasks. Leadership noted that the majority of administrative time investigative staff spent was necessary, such as attending staff meetings, and that relatively little time was spent on tasks that could be delegated to administrative specialists.

By consciously assessing how staff spends its time, CD-Epi gained a better understanding of when potential changes to staffing structure or workload priorities may be needed.

## Recommendation 5

DONE



**The Prevention Division of the Department of Public Health – Seattle & King County should set overtime usage expectations and document the steps it takes to communicate those expectations with staff.**

**STATUS UPDATE:** CD-Epi leadership updated the program's overtime policy to ensure it fit program needs, and articulated specific examples of when overtime use is appropriate and how staff should request it in a "frequently asked questions" document. CD-Epi communicated policy updates to these documents through an all staff meeting, where it answered questions and clarified expectations. It also emailed policy changes to group supervisors. The leadership team noted an increase in reported overtime, and plans to revisit the policy at an all staff meeting annually.

By clearly setting overtime usage expectations, Prevention is helping ensure that overtime is effectively used as a strategy to manage periods of high workload.

## Recommendation 6

DONE



**The Prevention Division of the Department of Public Health – Seattle & King County management should revisit existing overtime authorization processes to ensure that policies meet business needs and are clear, communicated, and enforced.**

**STATUS UPDATE:** At the time of the original audit, department leadership reached out to staff to ensure that all overtime use was being reported, gathered information on previously unreported overtime, and made sure that employees were retroactively compensated for any of that time. CD-Epi has taken additional steps to ensure that overtime policies are clear and meet business needs by updating the program's overtime policy and distributing a "frequently asked questions" document that describes examples of how to report overtime in specific scenarios. Prevention noted that CD-Epi supervisors now enforce overtime policies more thoroughly by monitoring staff use of overtime and staff emails that are sent after the scheduled work hours. They then make sure that timesheets reflect overtime.

By revisiting, communicating, and enforcing overtime policies and processes, Prevention reduced legal risks to the county and is helping ensure King County accurately compensates employees for hours worked.

## Recommendation 7

DONE



**The Prevention Division of the Department of Public Health – Seattle & King County should ensure that systems are in place to retain and use future cost and staff time data associated with disease events.**

**STATUS UPDATE:** CD-Epi has established identifiers to track response time and costs associated with specific outbreaks, and has used this information to assess the cost of several outbreaks. Prevention has also created templates for tracking the costs of unpaid resources (such as volunteers) and resources paid for by other work groups involved in outbreak responses in order to capture the full cost of responses.

Prevention staff reported finding it easier to gather cost estimates on disease responses as a result of these efforts. With these systems in place Prevention can better understand the impact of large-scale disease events on its staff and budget in the future.

## Recommendation 8

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should analyze staff capacity throughout the program, and develop and document a plan to efficiently use existing staff and temporary administrative staffing options to manage periods of high workload.**

STATUS UPDATE: Prevention has established new systems to increase staff capacity during outbreaks by drawing assistance both from within and outside the division. Prevention identified staff within DPH who could be reassigned to special duties during a large scale disease event, and also established a system to more easily allow administrative specialists to work as disease investigators.

By improving its ability to flexibly reassign staff to the roles needed in a disease outbreak Prevention was able to allow three administrative specialists to work as investigators for disease events between January 2017 and May 25, 2018, when extra investigatory capacity was needed. This allows the division to more efficiently use existing staff and respond quickly to emerging concerns.

## Recommendation 9

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should work with the Preparedness Section to establish a specialized disease response group with a more efficient way to request volunteers.**

STATUS UPDATE: Prevention worked with the Preparedness Division (Preparedness) to identify key Public Health Reserve Corps members who have successfully worked on disease outbreaks in the past. These volunteers can assist on future outbreaks with less preliminary training. These volunteers are identified in a roster that can be referenced in case of a surge event. Preparedness has also worked with Prevention to pre-identify the steps for identifying surge staff and volunteers during a disease event, allowing it to access these staff more quickly. Prevention and Preparedness staff continue to meet and review these processes to continually improve upon them.

By using a specialized response group and improving processes for mobilization, Prevention is helping ensure that temporary group members are able to contribute to disease responses quickly and effectively.

## Recommendation 10

PROGRESS 

**The Human Resources section of the Department of Public Health – Seattle & King County should document and communicate its criteria for meeting its requirements for justifying short-term temporary position requests.**

STATUS UPDATE: DPH human resources provided guidance on how to request expedited short-term temporary (STT) or term-limited temporary (TLT) in cases of an urgent outbreak. This

guidance describes the high-level process for position approval and several examples of justified uses of this expedited process. CD-Epi staff noted that its most recent request for a temporary position went smoothly, although expedited STT and TLT hiring hasn't been extensively needed since the time of the audit. This recommendation will be considered complete when Prevention staff report that expedited STT and TLT hiring processes in future disease events are clear and allow Prevention to access needed staff fast enough for an effective disease response.

### Recommendation 11

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should assess and document the cost and benefit of a training-specific position.**

STATUS UPDATE: Prevention conducted a cost-benefit analysis for a training-specific position in the fall of 2017. It calculated the costs for several different position options, including for a full- or part-time position, and subjectively assessed the benefits of these respective options. The Communicable Disease/Immunization leadership team and Prevention leadership team considered these options and concluded that the cost of the position would outweigh the benefits. Prevention staff noted that new centralized onboarding processes (described in recommendation 12) address many of the concerns with onboarding that this position would have helped with.

By assessing the costs and benefits of a training-specific position, Prevention can be more confident that its current processes are efficient and meeting its need to effectively onboard employees.

### Recommendation 12

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should complete and use a consolidated onboarding document for new employees.**

STATUS UPDATE: Prevention has developed an onboarding manual to help supervisors prepare for the arrival of new staff. This manual articulates administrative and educational tasks for the hiring supervisor and the employee, articulating when these should occur, and leaving space for designated staff or contacts for each task. The manual also includes links to administrative and public health resources to be provided to the new employee on their first day. Prevention staff report that the new manual has made onboarding new employees easier and clearer.

By developing and using this document, Prevention has sped up onboarding processes and helped new employees respond to disease outbreaks more quickly during critical response times.

### Recommendation 13

DONE 

**The Prevention Division of the Department of Public Health – Seattle & King County should work with King County Information Technology to document and implement a process for expediting technology setup and network access for temporary employees and volunteers.**

**STATUS UPDATE:** In September 2017, in collaboration with King County Information Technology (KCIT), Prevention developed a new process to expedite technology setup for disease outbreak surge staff. It made changes to communication and KCIT processes, and articulated contacts to reach out to if issues were not addressed. These changes were meant to ensure that KCIT prioritizes surge-related technology setup requests during a disease outbreak. When a surge response occurred in July 2018, however, surge staff still experienced system access delays which required additional communication with KCIT to resolve. After this event Prevention worked with KCIT to address ongoing issues and update KCIT expedited request contacts. Prevention reports that the revised approach was successful for the most recent surge event when it needed expedited technology setup.

By standardizing this process, and updating it when necessary, Prevention and KCIT has helped surge staff and volunteers start disease response work more quickly during critical response times.

Kayvon Zadeh, Senior Management Auditor, conducted this review. Please contact Kayvon at 206-477-5180 if you have any questions about the issues discussed in this letter.

cc: Dow Constantine, King County Executive  
Case Sixkiller, Chief Operating Officer, King County Executive Office  
Caroline Whalen, County Administrative Officer, Department of Executive Services  
Rachel Smith, Chief of Staff, King County Executive Office  
Dwight Dively, Director, Office of Performance, Strategy & Budget  
Patty Hayes, Director, Public Health – Seattle & King County  
Dennis Worsham, Director, Prevention Division, Public Health – Seattle & King County  
Tesia Forbes, Finance and Policy Administrator, Prevention Division, Public Health – Seattle & King County  
Meagan Kay, Regional Health Administrator, Communicable Disease, Epidemiology & Immunization Section, Public Health – Seattle & King County  
Tina Abbott, Human Resource Senior Manager, Human Resources, Public Health – Seattle & King County  
Melani Pedroza, Clerk of the Council, Metropolitan King County Council  
Lakeidra Williams, Administrator 1, King County Executive Office