

COUNTY OF SAN MATEO Inter-Departmental Correspondence

Health System

DATE: September 4, 2009

BOARD MEETING DATE: September 29, 2009

SPECIAL NOTICE/HEARING: None VOTE REQUIRED: Majority

TO: Honorable Board of Supervisors

FROM: Jean S. Fraser, Chief, Health System

Brian J. Zamora, Director, Community Health Division

SUBJECT: Acceptance of Award from the California Department of Public

Health Tuberculosis Control Branch for the San Mateo County

Tuberculosis Prevention and Control Program

RECOMMENDATION:

Adopt a Resolution authorizing the President of the Board to accept an award from the California Department of Public Health, Tuberculosis Control Branch for tuberculosis prevention and control activities for the term of July 1, 2009 through June 30, 2010, in the amount of up to \$320,718 including an allotment of up to \$26,500 for food, shelter, incentives and enablers expenditures.

BACKGROUND:

In 2008, the local Tuberculosis (TB) rate in San Mateo County was 8.7 per 100,000, which is higher than the California rate of 7.0 per 100,000, and greater than the national rate of 4.2 per 100,000 (Data for 2008 are provisional, based on the US Census population estimates). Other Bay Area counties also have rates higher than the state and national rates. This is primarily attributable to high immigration rates from TB-endemic countries and large immigrant communities within the County. The high TB rates are also attributable to increased transmission among homeless populations, increased transmission in congregate settings such as prisons and jails, and a general reduction in the national public health infrastructure supporting TB control activities.

San Mateo County's TB program staff provide control measures including case management, contact investigation, and directly-observed therapy. The Program is exploring various strategies to handle the increased number of TB cases and contacts, including diverting staff from other communicable disease programs.

DISCUSSION:

The California Department of Public Health (CDPH) provides funding for TB control activities including the investigation of potential cases and administration of the directly-observed therapy program. One of the major concerns with TB cases is the rise in multi-drug resistant strains of the disease. This occurs when treatment is started but is not completed. If patients are noncompliant with their treatment, staff will work with the patients to directly observe their medication usage. If this fails, the Health Officer has the authority to detain patients in facilities to ensure treatment compliance and to protect the health of the community.

Many patients diagnosed with TB may also have challenges, such as stable housing or appropriate nutrition, which can interfere with treatment. The State recognizes these obstacles and provides funding for such needs. Funds may be used to enhance adherence to treatment protocols, prevent homelessness, and allow the use of less restrictive alternatives that decrease or prevent the need for detention. Examples of incentives include vouchers for transportation, food and rent assistance.

The TB Program operates in compliance with both the requirements of the CDPH Policies and Procedures Manual as well as conditions stipulated by the State TB Control Branch.

The Acceptance of Award notice is late because it was not received from the State until August. The work required by the terms of the Agreement has been undertaken by the Health System on written assurance and direction of CDPH.

The Acceptance of Award and Resolution have been reviewed and approved by County Counsel.

Approval of this Agreement contributes to the Shared Vision 2025 outcome of a Healthy Community by providing funds to identify patients with TB and appropriately treat them to prevent spread of the disease. It is anticipated that 575 TB investigations will be conducted to ensure that secondary cases are identified and treatment is provided.

Performance Measure:

Measure	FY 2008-09 Actual	FY 2009-10 Projected
Number of TB investigations conducted to	651*	575
ensure that secondary cases are identified.		

^{*}Projection is within the normal range. The variance of the actual is due to an unanticipated outbreak investigation.

FISCAL IMPACT:

The term of the Award is July 1, 2009 through June 30, 2010. The total amount is \$320,718: \$294,218 for the Base Award and \$26,500 for food and shelter incentives. The revenue and expenditures associated with this Award are included in the Community Health tentatively Adopted FY 2009-10 Budget. There are no required matching funds included in this award, resulting in no Net County Cost.