

**JEFFERSON COUNTY PUBLIC HEALTH –PERFORMANCE MEASURES 2015 REPORT
COMMUNITY HEALTH - TARGETED CLINICAL HEALTH SERVICES PROGRAM**

PROGRAMS: Family Planning, School Based Health Clinics, Breast and Cervical Health, and Foot Care

MISSION: To provide targeted health services, health screenings, and prevention services to specific populations with limited access in order to improve the health of the community. Mission Statement for Family Planning Program: To provide accessible, high quality confidential reproductive health services in a safe, respectful environment.

Goals	Objective	Performance Indicator	2010 Actual	2011 Actual	2012 Actual	2013 Actual	2014 Actual	2015 Planned	2015 Actual
Goal 1: Assure low-cost Family Planning Services are provided and accessible for all women	Track Family Planning usage pattern	Number of annual unduplicated clients served in Family Planning	1,253	1,170	1,027	1,125	917	1,112	903
		Number of annual Family Planning clients age 30-39	227	206	188	201	156	182	146
		Number of annual Family Planning Clients age 18-29	644	574	540	492	410	525	415
Goal 2: Maintain low teen pregnancy rate in Jefferson County	Provide access to Emergency Contraception 5 days/ week with an appointment scheduled within a week	Annual number of clients under 19 served in Family Planning (from Ahlers report)	447	419	373	424	356	468	382
Goal 3: Improve access to health care for high school students in Jefferson County	Serve 40% of enrolled students at Port Townsend and Chimacum High Schools through the School Based Clinics	Number of annual unduplicated clients served in the Chimacum and Port Townsend School Based Health Clinics	296	313	297	287	287	300	283
Goal 5: Support seniors' independence by maintaining walking mobility	Maintain community Foot Care program	Number of annual foot care clients in community centers and home visits	2786	2,635	2,312	1,946	1979	2000	1760

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Study/Analysis 2015 Results:

JCPH staff launched an Electronic Medical Records (EMR) system in January 2013 to remain compliant with the Affordable Care Act (ACA). Throughout 2015 the EMR improved efficiency and increased reimbursement levels as staff continued to become more proficient, as well as the EMR vendor continuing to make improvements on their system. Electronic patient portal was installed the end of 2014 and an impressive number of our clients are actively connected to the portal. With the required change from ICD 9 to ICD 10 on October 1st, 2015, we anticipated delays in billing reimbursement, with providers and billers learning a new “language”; however, this transition went smoothly, thanks to the thorough preparation and planning by our ICD 10 transition team.

Overall number of unduplicated clients receiving Family Planning services in 2015 is similar to 2014, with increase in numbers of clients under the age of 40 years. Changes with recommended female exam schedules, such as frequency of required Pap smears, continue to affect our total number of visits when compared to previous years; in addition, our increased use of Long-Acting Reversible Contraception (LARCs) methods has further decreased number of clinic visits for our clients. In 2014 we noted a lower total number of unduplicated clients aged 30-39. The Family Planning team held a focus group with clients in this age group to gather information on barriers to care and identify strategies for better serving this population. Since the focus group discussion, we have developed a plan to improve outreach to this population; in 2016 JCPH will be evaluating the feasibility of extending clinic hours into the evening one day per week at our main clinic per recommendations from this focus group.

Family planning services continued in Quilcene twice a month, with a medical provider providing services once a month. Outreach continues to south county residents for Family Planning services.

JCPH continues our partnership with Jefferson Healthcare in operating two school clinics: Port Townsend High School and Chimacum High School. These clinics serve enrolled students seeking Mental Health, Family Planning, and Primary Health Care services. The number of unduplicated students using School-Based Health Centers in 2015 is similar to the past 3 years.

State and federal funding for the Breast and Cervical Health Program (BCHP) has been reduced in 2015 and 2016. Most women who qualified for this program in the past now qualify for free or reduced cost health insurance through the Affordable Care Act.

Foot Care Program: Jefferson County has an aging population; the median age of Jefferson County is 55.1 years, with the median age of WA State 37.8 years. The JCPH Foot Care Program enables our older population to maintain independence and mobility by providing foot maintenance at community centers and in private homes. Although still a critical need, the Foot Care Program has seen a decrease in clients.

March 8, 2016