

LABORATORY SYSTEM IMPROVEMENT PROGRAM



South Dakota Assessment Report

April 29, 2010

TABLE OF CONTENTS

A.	Summary	1
B.	Introduction	1
C.	L-SIP Objectives.....	2
D.	L-SIP Assessment Process	2
E.	Results.....	3
	• Essential Service 1.....	3
	• Essential Service 2.....	5
	• Essential Service 3.....	6
	• Essential Service 4.....	7
	• Essential Service 5.....	9
	• Essential Service 6.....	10
	• Essential Service 7.....	12
	• Essential Service 8.....	12
	• Essential Service 9.....	14
	• Essential Service 10.....	15
F.	Performance Summary Grid	17
G.	Recommendations	18
H.	Next Steps	19
	Appendix A. 10 Essential Public Health Services and Core Functions and Capabilities of State Public Health Laboratories	20
	Appendix B. List of Participants	21
	Appendix C. Meeting Evaluation.....	23

LABORATORY SYSTEM IMPROVEMENT PROGRAM

SOUTH DAKOTA ASSESSMENT REPORT

A. SUMMARY

This report details the finding of the South Dakota Public Health Laboratory System assessment. The intent of the assessment was to determine the strengths and weaknesses of the Public Health Laboratory System in South Dakota and identify opportunities for improvements.

The assessment was based on a tool developed by the Association of Public Health Laboratories and based on the Ten Essential Public Health Services and the Core Functions and Capabilities of State Public Health Laboratories. The evaluation of South Dakota's performance measured against a standard describing optimal performances was completed by participants representing the spectrum of system constituents.

Analysis of input from the evaluation forms completed by participants at the close of the assessment shows there is a true commitment to pursuing next steps to address the improvements identified by the assessment participants.

B. INTRODUCTION

This report details the finding of the South Dakota assessment of April 29, 2010. The intent of the assessment was to determine strengths and weaknesses of the South Dakota Public Health Laboratory System and identify opportunities for improvements.

The South Dakota Public Health Laboratory System includes all of the organizations and partners that contribute to the state's ability to meet laboratory needs for assuring the health and well-being of South Dakota residents. While other entities like local health services, clinical, environmental, agricultural, and forensic laboratories and laboratory users also comprise the broader system, the South Dakota Department of Health (DOH) Public Health Laboratory is considered a leader of the system. Thus, it was appropriate for the DOH Public Health Laboratory to convene the assessment meeting.

In 2002, the Centers for Disease Control and Prevention (CDC) established the National Public Health Performance Standards Program (NPHPSP) to identify and measure components of the public health system. Based on the Ten Essential Public Health Services, the NPHPSP is intended to determine how well public health systems measure against the gold standards and is used to identify areas of improvement. The Association of Public Health Laboratories and the CDC Division of Laboratory Systems developed the Laboratory System Improvement Program (L-SIP) with the intent of engaging and leveraging state public health laboratory system partnerships to build a stronger foundation for public health, promoting continuous quality improvement and strengthening the science basis of public health practice improvements. L-SIP developed an assessment tool for state public health laboratories to use in determining the state public health laboratory system's capability and capacity to provide adequate and appropriate

laboratory activities and identify areas for improvement. The 10 Essential Public Health Services and Core Functions and Capabilities of State Public Health Laboratories are cited in Appendix A.

The L-SIP process is intended to assess the entire system as opposed to focusing solely on the DOH State Public Health Laboratory. A state public health laboratory system includes all public, private and voluntary entities that define the system including a broad range of testing sites, user of laboratory data/results, academic institutions and other roles. Assessment of the system assures the contributions and needs of each component are acknowledge, appreciated, and included.

Finally, the standards used in the assessment are set at gold standard level, rather than minimal levels. This enables baseline and target setting and also provokes discussion on methods to reach the target.

C. L-SIP ASSESSMENT OBJECTIVES

- Improve communications and collaboration amongst Public Health Laboratory System partners;
- Inform participants about the South Dakota Public Health Laboratory System and build an appreciation of the inter-dependence of system partners;
- Identify system strengths and opportunities for improvement; and
- Articulate the resources needed for optimal system functionality.

D. L-SIP ASSESSMENT PROCESS

The L-SIP assessment tool uses the same format as the NPHPSP tools used for assessing state and local public health systems. More than 20 states have completed this assessment with several others in process. Because South Dakota only has one local public health department, some assessment components were not completely applicable.

Each of the Ten Essential Health Service functions as a chapter. Each essential service is divided into one to three indicators which represent major system components, activities or practices. Associated with each indicator is a model standard that describes optimal performance. Each model standard is followed by one or more key ideas which comprise the standard and serve as a discussion point for assessing how close the system is to the model standard. The tool was provided to each participant prior to the assessment date so participants could become familiar with the process and issues to be assessed. Essential Service #7 and the three essential services each subgroup would address in their breakout sessions were tabbed.

After an initial orientation to the process and the tool, facilitators led participants through discussions to complete the assessment tool. Assessment participants were asked to discuss key ideas related to each indicator and share information about performance. Upon conclusion of the discussion, participants were asked to measure the system's current status against the

model standard. A colored card system was used for voting on where the system measured in comparison to the gold standard:

- White cards indicated no activity;
- Red cards indicated minimal activity;
- Yellow cards indicated moderate activity;
- Blue cards indicated significant activity; and
- Green cards indicated optimal activity.

Following initial voting, persons with disparate votes were asked to share their reason for their opinion. After hearing the differing viewpoints and comments, participants were asked to vote again. A consensus score for each key idea was established for the group. Theme takers recorded the scores.

Essential Service 7 was assessed in a plenary session while the remaining essential services were assessed by one of the three sub-groups, each with a facilitator and two theme takers. A list of participants is included Appendix B.

E. RESULTS

Essential Service 1:
Monitor health status to identify community health problems
(Overall score: 78/100)

Key Idea 1.1.1. The SPH Laboratory System identified sentinel health events and trends.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- Communication on H1N1 was timely
- Need to improve communication with physicians

Key Idea 1.1.2. The SPH Laboratory System participates in national surveillance systems for state and national linkage.

→ Rated at significant activity

Notes and Parking Lot Issues:

- South Dakota is weak in some environmental health areas (i.e., lead)
- Not many waterborne disease outbreaks
- Federal partners can be helpful but not always timely

Key Idea 1.1.3. SPH Laboratory System partners collaborate to strengthen surveillance systems.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Disease Prevention Program has implemented a new disease reporting system and is on the forefront of technology
- Resources quite good in private laboratories
- State provides proper notification of water issues but hard to get public to read notices regarding water problems
- Some problems with smaller municipalities not following guidelines
- Knowledge gap between people collecting samples and laboratory staff

Key Idea 1.2.1. The SPH Laboratory System has a comprehensive system to gather data, organisms, and samples to support evaluating community environmental health.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Consider putting water test results on State Public Health Laboratory website
- Website needs more information (i.e., meat inspections, water reports)
- Need more publicity on what is on website and how to access
- Public awareness and understanding

Key Idea 1.2.2. The SPH Laboratory System identifies and detects infectious diseases and contributes to a statewide surveillance system.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- None

Key Idea 1.2.3. The SPH Laboratory System provides information to support monitoring congenital, inherited, and metabolic diseases of public health significance.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- None

Key Idea 1.2.4. The SPH Laboratory System generates reliable information about chronic diseases of public health significance.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- Chronic disease surveillance done but not through the laboratory system
- Information is available but people don't take advantage of it
- Need more work on a systematic approach
- A lot of work is ongoing but much still needs to be done

Key Idea 1.2.5. The SPH Laboratory System has a secure, accountable, and integrated information management system for data storage, analysis, retrieval, reporting, and exchange.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- Information is often available but hard for some to retrieve
- Not all partners capable of retrieving data

Essential Services #1 Possible Next Steps	Rating	Lead
1. Increase accessibility to information	High	Kevin DeWald
2. Need more robust system of integration between the public and private systems	High	Kevin DeWald

Essential Service #2:
Diagnose and investigate health problems and health hazards in the community
 (Overall score 78/100)

Key Idea 2.1.1. SPH Laboratory System assures provision of services at the highest level of quality to assist in the diagnosis and investigation of all health problems and hazards of public health significance.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- State of the art testing available in many areas from pesticide to water
- Adequate staffing
- Cross training
- Funding
- Are more samples needed for certain tests to be proficient?

Key Idea 2.2.1. SPH Laboratory System members are actively involved in networks that collaborate in the epidemiological investigation of a response to natural and man-made disasters.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Some agencies may need training and equipment, especially radios
- Department of Environment and Natural Resources (DENR) has list of people to call but not everyone knows where to get it
- Communication is not getting to all of the people
- Bioterrorism worries – are we really ready?

Key Idea 2.3.1. The SPH Laboratory System has the necessary capacity, authority, and other preparations in place to assure a rapid response to public health emergencies.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Several options discussed are not realistic
- Can't have a lot of people on standby just for surge events
- Can't maintain routine testing in an emergency

Essential Services #2 Possible Next Steps	Rating	Lead
1. Improve communication and coordination on what actions must happen in case surge capacity is needed including more education on knowing who to call and drills to make sure it all works.	High	Danielle Dracy

**Essential Service #3:
Inform, educate, and empower people about health issues
(Overall score 29.3/100)**

Key Idea 3.1.1. The SPH Laboratory System has an identified system of outreach and communication to inform about relevant health issues associated with laboratory services.

→ Rated at moderate activity

Notes and Parking Lot Issues:

- Sentinel laboratories have received digital radios to communicate in a disaster
- Information is shared with professional societies
- Good member activity but not necessarily good system activity
- Good distribution of public health laboratory information to community organizations for H1N1, West Nile, Mumps, Pertussis, and Shigella
- State Public Health Laboratory educates providers about specimen collections

Key Idea 3.2.1. The SPH Laboratory System creates and delivers targeted laboratory information to appropriate health partners.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Press releases exist and are timely
- Good communication between State Public Health Laboratory and local laboratories
- State Public Health Laboratory is the leader within the system so a consistent message is delivered to the public by all members

Key Idea 3.2.2. The State Public Health Laboratory System creates and delivers targeted laboratory information to appropriate non-health partners and the public.

→ Rated at moderate activity

Notes and Parking Lot Issues:

- Good job providing information to public regarding need for vaccines for H1N1 and measles
- Good news releases in an event or crises
- Hand washing, bird testing, and rabies testing campaigns were effective

Key Idea 3.3.1. Education and relationship building opportunities are employed to empower community partners.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- State Public Health Laboratory makes presentations at hospital meetings and provides tours of the mobile lab which are open to the public but more would be helpful
- More communication with schools so each knows how they make decisions

Essential Services #3 Possible Next Steps	Rating	Lead
1. Education and relationship building should be part of the plan; once plan is in place, other things will follow.	Medium	Brent Lee

Essential Service #4:
Mobilize community partnerships to identify and solve health problems
 (Overall score 30.3/100)

Key Idea 4.1.1. Partners in the State Public Health Laboratory System develop and maintain positive relationships with each other and with other key constituencies.

→ Rated at minimal activity with significant support for moderate activity

Notes and Parking Lot Issues:

- Good job done with existing partners with the State Public Health Laboratory but not enough expanding of partnerships beyond the existing ones
- Don't see ourselves as a system, rather as individuals working for individual laboratories
- Need to work on expanding partnerships
- Define what a State Public Health Laboratory is
- Need to do more marketing
- System needs to always be aware of confidentiality issues

Key Idea 4.2.1. The State Public Health Laboratory System communication plan is fully integrated with partners' and collaborators' communication plans.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- Joint communication between the state laboratory and sentinel laboratories with regard to H1N1
- No formal communication plan in place although a lot of communication goes on
- Laboratory services would grow with marketing
- Individual partners and public are happy to communicate, just need leadership

Key Idea 4.2.2. The State Public Health Laboratory System communicates effectively in a regular, timely, and accurate way to support collaboration.

→ Rated at moderate activity

Notes and Parking Lot Issues:

- Evaluation is a missing component of communication
- No newsletter
- Good communication within the system
- Sometimes communication breaks down within departments, facilities etc.
- Tools in place but many people don't know about them (i.e., Health Alert Network (HAN), Laboratory listserv)

Key Idea 4.3.1. The State Public Health Laboratory System works together to share existing resources and/or to identify new resources (e.g., funding, personnel, tools) to assist in identifying and solving health issues.

→ Rated at significant activity

Notes and Parking Lot Issues:

- State Public Health Laboratory brought new testing procedures online and shared that knowledge with other laboratories
- Sharing of equipment/instrumentation and testing materials among laboratories
- Sharing of courier system with hospitals, clinics, and the public health laboratory
- Sharing of bioterrorism grant funds has made purchase of equipment for other laboratories possible
- Additional testing is dependent on funding and available personnel
- Does the Public Health Laboratory System need to be an even greater part of disaster preparedness

Essential Services #4 Possible Next Steps	Rating	Lead
1. Clarify HAN and make sure it is getting to all who need it.	High	Bill Chalcraft
2. Initiate marketing/promotion plan to encourage partnerships.	Immediate	Mike Smith

3. Develop communication plan and identify key persons responsible for implementation plan.	Immediate	Barb Buhler
4. Shift from State Public Health Laboratory to State Public Health Laboratory System; facilitate this understanding and define the identity of the system.	Immediate	Mike Smith

Essential Service #5:
Develop policies and plans that support individual and community health efforts
(Overall score 72.5/100)

Key Idea 5.1.1. The State Public Health Laboratory and system partners contribute their expertise and resources to inform and influence policy.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Laboratories aren't recognized for all they do
- If laboratories had more funding, could do more testing
- Hard to get money from people being tested; need for public funding
- The State Public Health Laboratory used to be funded 100% by fees for service
- Federal funding has been a great help for staffing and equipment
- Be careful that the private and public laboratories do not compete in marketing
- Cross training is good but have to have sufficient people to do this

Key Idea 5.1.2. Policies and plans are informed by science and data.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Having good data influences good decisions
- Realities of funding and staffing often compete with scientific desires
- State Public Health Laboratory is always asking where we need to improve

Key Idea 5.2.1. The State Public Health Laboratory System obtains input from diverse partners and constituencies to develop new policies and plans and modify existing ones.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- Good feedback/communication among health entities

Key Idea 5.2.2. State Public Laboratory System issues are represented in state level and policies.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Need communication to police, fire departments etc. regarding where infectious disease outbreaks are before they are called to these areas

Key Idea 5.3.1. Plans and policies are widely disseminated to inform members of the State Public Health Laboratory System, other stakeholders, and the public.

→ Rated at significant activity

Notes and Parking Lot Issues

- H1N1 efforts worked well
- Website has lots of information
- Listservs needs to be expanded
- Need to talk about listserv composition

Key Idea 5.3.2. State Public Health Laboratory system plans and policies are routinely evaluated and updated.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Different groups rate communication efficacy differently; from constant to need more

Essential Services #5 Possible Next Steps	Rating	Lead
1. Pursue adequate funding.	High	Joan Adam
2. Increase role in laboratory-related policymaking.	High	Joan Adam
3. Coordinate agency contacts for all departments including emergency personnel; need electronic contact list for the whole system.	High	Bill Chalcraft

Essential Service #6:
Enforce laws and regulations that protect health and ensure safety
 (Overall score 89/100)

Key Idea 6.1.1. The State Public Health Laboratory System regularly and periodically reviews and recommends revisions of federal and state laws and regulations pertaining to laboratory practice.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- People communicate as needed
- CLIA can revoke laboratory certificates for noncompliance

Key Idea 6.2.1. The State Public Health Laboratory System has mechanisms in place to encourage or promote compliance by all laboratories in the system with all applicable state and federal regulations.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- DENR certifies laboratories for compliance
- Significant effort to comply with water regulations
- Timeliness of notice of changes can be difficult
- Good training opportunities
- Need to discuss laboratory evaluations/performance evaluations
- CDC has many training and supporting resources

Key Idea 6.2.2. All laboratories in the State Public Health Laboratory System are compliant with all applicable laws and regulations.

→ Rated at optimal activity

Notes and Parking Lot Issues:

- Laboratories are consistently inspected

Key Idea 6.3.1. The State Public Health Laboratory System has the appropriate resources to support enforcement functions for laws and regulations.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Funding is limited but enforcement is a priority
- A lot of collaboration (i.e., environmental collaborates with water and DOH food inspectors)
- Get passive reporting, often through hospital discharge data

Key Idea 6.3.2. The State Public Health Laboratory and other appropriate agencies collaborate to fulfill their enforcement function.

→ Rated at significant activity

Notes and Parking Lot Issues:

- None

Essential Services #6 Possible Next Steps	Rating	Lead
1. Ensure quality assurance and compliance in clinical setting.	Medium	Lon Kightlinger

Essential Service #7:
**Link people to needed personal health services and assure the provision of
 healthcare when otherwise unavailable**
 (Overall score 67/100)

Key Idea 7.1.1. The State Public Health Laboratory System identified laboratory service needs and collaborates to fill gaps.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Need more public marketing of health laboratory services
- Pursue access to electronic data by smaller communities needs
- Cross train staff to provide consistency in service

Essential Services #7 Possible Next Steps	Rating	Lead
1. Need electronic capability improvements in test response, recordkeeping, and administrative tasks.	High	Kevin DeWald
2. Increase promotion/marketing of State Public Health Laboratory through electronic means.	High	Barb Buhler
3. Increase cross-training of State Public Health Laboratory staff to maintain current services.	High	Brent Lee

Essential Service #8:
Assure a competent public health and personal health care workforce
 (Overall score 35/100)

Key Idea 8.1.1. All laboratories within the State Public Health Laboratory System identify position requirements for all laboratory workforce categories.

→ Rated at significant activity

Notes and Parking Lot Issues

- None

Key Idea 8.1.2. The State Public Health Laboratory System has tools to assess competency of the laboratory workforce.

→ Rated at significant activity

Notes and Parking Lot Issues:

- Mandatory continuation education needs further discussion

Key Idea 8.2.1. Laboratories within the State Public Health Laboratory System identify staff development needs.

→ Rated at moderate activity

Notes and Parking Lot Issues:

- Size of institution often determines access to staff development
- Laboratory regulations need further discussion on this issue

Key Idea 8.2.2. Laboratories within the State Public Health Laboratory System promote the availability of resources for staff development.

→ Rated at moderate activity

Notes and Parking Lot Issues:

- Need a state training coordinator
- Availability of staff (workload) a problem

Key Idea 8.3.1. The State Public Health Laboratory System maintains an environment that attracts and retains exceptional staff.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- Workforce shortage
- Recruitment and retention
- State compensation and career moves are limited
- Incentives for job recruitment, i.e., school loan forgiveness

Key Idea 8.3.2. The State Public Health Laboratory System addresses workforce shortage issues.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- Build up a team approach to address capabilities
- Provide opportunity to observe how jobs work
- Hold state meeting on issue
- Pursue funding for education and training
- Issue of people leaving positions

Essential Services #8 Possible Next Steps	Rating	Lead
1. Increase opportunities for staff development.	High	Mike Smith
2. Identify a state training coordinator.	High	Jim Zeck
3. Establish partnerships for recruitment and retention.	High	Pat Tilley

Essential Service #9:
Evaluate effectiveness, accessibility, and quality of personal and population-based services
(Overall score 0.8/100)

The subgroup that discussed Essential Service #9 felt there was a lot of activity within the state addressing this essential service. However, since there is no formal system, the subgroup could not identify any activities attached to a nonexistent formalized system. Therefore, "no activity" was reported for all but one key idea and that was rated as "minimal activity".

Key Idea 9.1.1. The State Public Health Laboratory System range of services, as related to its mission and purpose, are evaluated on a regular basis.

→ Rated at no activity

Notes and Parking Lot Issues:

- Mission statements for individual components but not for the system
- Group unable to rate performance of the System although there are good services from many of the component parts

Key Idea 9.1.2. The State Public Health Laboratory System has a process in place for periodic review and evaluation of the test menus and technologies in use by laboratories within the system.

→ Rated at no activity

Notes and Parking Lot Issues:

- No communication within the system
- Pockets of collaboration but it is not measured or reported back

Key Idea 9.2.1. The accessibility and effectiveness of personal and population-based laboratory services provided throughout the state is regularly determined.

→ Rated at no activity

Notes Parking Lot Issues:

- Some pieces of the system do exist but need to be joined
- Lack of systematic/formal communication between components
- Individual laboratories have processes in place but no system-wide process
- System is stove-piped
- Forensics has a system

Key Idea 9.2.2. The quality of personal and population-based laboratory services provided throughout the state is regularly determined.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- South Dakota doesn't license laboratorians
- DCI does consumer satisfaction surveys
- State Public Health Laboratory does consumer satisfaction surveys and cost analysis of services
- The "system" can't do anything if it doesn't know it exists
- A lot of good activity within silos but no systematic connectivity or coordination
- Perspective is starting to shift from being customers of the system to being part of the system

Key Idea 9.3.1. The level and utility of collaboration among members of the State Public Health Laboratory System is measured and the results are shared.

→ Rated at no activity

Notes and Parking Lot Issues:

- Collaboration is happening but isn't being evaluated

Essential Services #9 Possible Next Steps	Rating	Lead
1. Form an advisory group or hire consultant to steer the system. a. Assess strengths of State Laboratory System b. Develop evaluation plan within the system plan.	Immediate	Mike Smith

Essential Service #10:
Research for insights and innovative solutions to health problems
(Overall score 18.8/100)

Key Idea 10.1.1. The State Public Health Laboratory System has adequate capacity to plan research and innovation activities.

→ Minimal activity

Notes and Parking Lot Issues:

- Not rated as the group felt there was no system capacity to plan research and innovation activities
- Hospitals have IRBs

Key Idea 10.1.2. The State Public Health Laboratory System collaborates to finance research activities.

→ Rated as significant activity

Notes and Parking Lot Issues:

- Success at grant writing allows many positive activities which would otherwise not be possible
- Often collaborate to finance research activities and support each other in grant writing

Key Idea 10.2.1. The State Public Health Laboratory System research efforts draw on diverse perspectives and expertise to stimulate innovative thinking.

→ Rated at minimal activity

Notes and Parking Lot Issues:

- Research is done throughout the state
- When resources are so tight, research is often a low priority
- More research necessary in the area of adolescent drinking

Key Idea 10.2.2. The State Public Health Laboratory System research is evaluated to foster improvement and innovation.

→ Rated at no activity

Notes and Parking Lot Issues:

- Rated as "no activity"; although partners did research which fostered improvement and innovation, it was not done on a systematic basis

Key Idea 10.2.3. The State Public Health Laboratory System disseminates research outcomes, best practices, and recognition of research activities.

→ Not rated

Notes and Parking Lot Issues:

- Not rated; although partners did research and disseminated it, it was not done on a systematic basis

Essential Services #10 Possible Next Steps	Rating	Lead
1. Although communication and coordination of research is positive, in this time of very limited resources, this is not a priority for the South Dakota Public Health Laboratory System in South Dakota. The subgroup did commend those organizations able to carry out research activities and hopes dissemination of results will continue.	Immediate	Mike Smith

F. PERFORMANCE SUMMARY GRID

Essential Public Health Services										
	1	2	3	4	5	6	7	8	9	10
Optimal Activity	76.2	78.0				89.0				
Significant Activity					72.5		67.0			
Moderate Activity			29.3	30.3				35.0		
Minimal Activity										18.8
No Activity									0.8*	

*The subgroup that discussed Essential Service #9 felt there was a lot of activity within the state addressing this essential service. However, since there is no formal system, the subgroup could not identify any activities attached to a nonexistent formalized system. Therefore, "no activity" was reported for all but one key idea and that was rated as "minimal activity".

Essential Service #1: Monitor Health Status

1.1 Surveillance Information Systems	78.0
1.2 Monitoring Health Status	74.4
<i>Optimal Activity</i>	<i>Overall Score – 76.2</i>

Essential Service #2: Diagnose and Investigate

2.1 State of the Art Testing	100.0
2.2 Collaboration and Networks	67.0
2.3 Continuity of Operations	67.0
<i>Optimal Activity</i>	<i>Overall Score – 78.0</i>

Essential Service #3: Inform, Educate, and Empower

3.1 Outreach and Communication	33.0
3.2 Public Education	50.0
3.3 Education	5.0
<i>Moderate Activity</i>	<i>Overall Score – 29.3</i>

Essential Service #4: Mobilize Partnerships

4.1 Constituency Development	5.0
4.2 Communication	19.0
4.3 Resources	67.0
<i>Moderate Activity</i>	<i>Overall Score – 30.3</i>

Essential Service #5: Develop Policies and Plans

5.1 Role in Policy Making	67.0
5.2 Partnerships in Planning	83.5
5.3 Dissemination and Evaluation	67.0
<i>Significant Activity</i>	<i>Overall Score – 72.5</i>

Essential Service #6: Enforce Laws and Regulations	
6.1 Revision of Laws and Regulations	100.0
6.2 Encourage Compliance	100.0
6.3 Enforcement	67.0
<i>Optimal Activity</i>	<i>Overall Score – 89.0</i>

Essential Service #7: Link People to Services	
7.1 Availability of Laboratory Services	67.0
<i>Significant Activity</i>	<i>Overall Score – 67.0</i>

Essential Service #8: Competent Workforce	
8.1 Workforce Competencies	67.0
8.2 Staff Development	33.0
8.3 Assuring Workforce	5.0
<i>Moderate Activity</i>	<i>Overall Score – 35.0</i>

Essential Service #9: Evaluation of Effectiveness	
9.1 System Mission and Purpose	0.0
9.2 System Effectiveness	2.5
9.3 System Collaboration	0.0
<i>No Activity</i>	<i>Overall Score – 0.8</i>

Essential Service #10: Research	
10.1 Planning and Financing	36.0
10.2 Implementation and Dissemination	1.7
<i>Minimal Activity</i>	<i>Overall Score – 18.8</i>

G. RECOMMENDATIONS

- ❖ Improve communication
 - Develop a system of key contacts (i.e., directory) including all possible members of the System
 - Distribute report of assessment to partners for input and prioritizing of actions. When finalized, redistribute to broader group
 - Explore electronic social media (i.e., earmarked website, use of Facebook or Twitter)
 - Explore options for increased electronic communication on testing results, communication of policy and procedures
 - Develop system of publicizing what information is available to partners and the public through the South Dakota Public Health Laboratory System and how to access it

- ❖ Formalize system
 - Establish a South Dakota Public Health Laboratory System advisory board
 - Ensure all system partners are included
 - Facilitate private/public collaboration discussion
 - Develop written documents outlining mission, component responsibilities, and assets of the System

- ❖ Support adequacy and stability of system funding
 - Support state commitment to maintain technology and expertise needed for public health testing

- ❖ Support workforce development
 - System partners need to work together to improve retention and recruitment of staff
 - System partners need to explore creative options to improve retention and recruitment such as loan forgiveness, paid internships, etc.
 - Hire or assign responsibilities for a state training coordinator

H. NEXT STEPS

- ❖ Establish a South Dakota Public Health Laboratory System Advisory Group to discuss, prioritize and tentatively assign responsibilities for recommendations compiled during the L-SIP assessment as well as identify additional action items to be addressed. Convene the first meeting of this group and prioritize goals by December 31, 2010.

- ❖ Develop a communication plan to more effectively and completely communicate among South Dakota Public Health Laboratory System partners.

- ❖ Identify areas where South Dakota Public Health Laboratory System partners can more effectively share information and provide better services to the citizens of South Dakota. Convene focus group meeting with chronic disease programs and environmental laboratories in the state and produce a listing of items needed to improve data sharing between agencies.

Appendix A

Essential Public Health Services and Core Functions and Capabilities of State Public Health Laboratories

Ten Essential Public Health Services

1. Monitor Health Status to Identify Community Health Problems
2. Diagnose and Investigate Health Problems and Health Hazards in the Community
3. Inform, Educate and Empower People About Health Issues
4. Mobilize Community Partnerships to Identify and Solve Health Problems
5. Develop Policies and Plans that Support Individual and Community Health Efforts
6. Enforce Laws and Regulations that Protect Health and Ensure Safety
7. Link People to Needed Personal Health Services and Assure the Provision of Healthcare When Otherwise Unavailable
8. Assure a Competent Public Health and Personal Health Care Workforce
9. Evaluate Effectiveness, Accessibility and Quality of Personal and Population-Based Services
10. Research for Insights and Innovative Solutions to Health Problems

Core Functions and Capabilities of State Public Health Laboratories

1. Disease Prevention, Control and Surveillance
2. Integrated Data Management
3. Reference and Specialized Testing
4. Environmental Health and Protection
5. Food Safety
6. Laboratory Improvement and Regulation
7. Policy Development
8. Emergency Response
9. Public Health Related Research
10. Training and Education
11. Partnerships and Communication

Appendix B

List of Participants

Group A – Essential Services 3, 4, and 9

(Facilitator: Norma Schmidt; Theme Takers: Katie Engle and Rea Riggle)

Nancy Allard, Unified Judicial System
Darlene Bergeleen, Dept. of Health, Family and Community Health
Barb Buhler, Dept. of Health, Public Information Officer
Rich Hanson, Dept. of Environment & Natural Resources
Clark Hepper, Dept. of Health, Health Protection
Bonnie Jameson, Dept. of Health, Disease Prevention
John Kangas, Avera Laboratory System
Franz Moritz, Division of Criminal Investigation
Bill Rath, Bureau of Information and Telecommunications
Pamela Schochenmaier, Dept. of Health, Chronic Disease
Kayla Tinker, Dept. of Health, Correctional Health
LaJean Volmer, Dept. of Health, Public Health Preparedness
Kari Weisbeck, Dept. of Health, Finance Office
Colleen Winter, Dept. of Health, Director of the Division of Health and Medical Services
Nancy Woster, Dept. of Health, Community Health Nursing

Group B – Essential Services 2, 5, and 10

(Facilitator: Linda Ahrendt; Theme Takers: Teresa Chicoine and Nancee Knox)

Joan Adam, Dept. of Health, Director of the Division of Administration
Nicole Asmussen, Dept. of Health, Finance Office
Lee Axdahl, Dept. of Public Safety, Office of Highway Safety
Kevin DeWald, Dept. of Health, Health Information Technology
Danielle Dracy, Dept. of Public Safety, Office of Emergency Management
Rob Fines, Hughes/Stanley County Emergency Manager
Susan Gannon, Dept. of Health, Disease Prevention
Brenda Hyde, SD Women's Prison
Derric Iles, SD Geological Survey
Bridget Mayer, Attorney General's Office
Carol McMasters, Rapid City Regional
Ryan Mechaley, Dept. of Public Safety
Allen Miller, Sanford Hospital
Rick Pudwill, Falls Community Health
Linda Schaefer, Dept. of Health, Disease Prevention
Patrick Snyder, Dept. of Environment & Natural Resources
Lori Starr, 82nd Civil Support Team

Group C – Essential Services 1, 6 and 8

(Facilitator: Sandi Durick; Theme Takers: Laurie Gregg and Kristy Deal))

Nastassia Alavi, Midcontinent Testing Laboratory
Bob Coolidge, Dept. of Health, Licensure & Certification
Beth Cooper, Bureau of Personnel
Warren Erickson, Sacred Heart Hospital
Mark Fendrich, Federal Bureau of Investigation
Eldon Blemaster, Pierre Police Department
Lon Kightlinger, Dept. of Health, State Epidemiologist
Wendy Kloeppner, Hughes County State's Attorney's Office
Deanna Kyburz, Dept. of Health, Brown Co. Community Health
Tom Martinec, Dept. of Health, Deputy Secretary of Health
Mark Mayer, Dept. of Environment & Natural Resources
Dave Morgan, Dept. of Health, Disease Prevention
Tim Murray, City of Aberdeen
Dustin Oedekoven, DVM, State Veterinarian
Connie Richards, Dept. of Health, Licensure & Certification
Bill Sarringer, Mid-Dakota Rural Water
Pat Tille, South Dakota State University
Jim Zeck, SD Rural Water

Other Department of Health Staff

Stacy Ellwanger, State Public Health Laboratory
Gail Gray, Special Projects Director
Brent Lee, Assistant Director, State Public Health Laboratory
Mike Smith, Director, State Public Health Laboratory

Appendix C Meeting Evaluation

South Dakota Public Health Laboratory System Assessment Participant Evaluation Totals

We appreciate your feedback and take your suggestions seriously. Thank you!

Utility of Meeting:

Stated objectives of meeting were met.....
 Dialogue was useful.....
 I support the efforts being made.....
 Next steps are clear.....
 Meeting was a good use of my time.....

	Poor		Good		Superb
	1	2	3	4	5
		5	12	25	6
		2	9	26	11
		1	5	19	24
	2	8	17	14	4
	3	3	19	16	7

Meeting Arrangements:

Advance notice of the meeting.....
 Meeting room accommodations.....
 Advance materials for meeting were useful.....
 Advance materials were received with time to review..

	Poor		Good		Superb
	1	2	3	4	5
			6	20	23
		1	1	16	31
	1	3	5	20	20
		1	4	18	26

Flow of Meeting:

Started on time.....
 Clear objectives for meeting.....
 Agenda followed or appropriately amended.....
 Facilitation was effective.....
 The "right" people were at the meeting.....

	Poor		Good		Superb
	1	2	3	4	5
		1	3	11	34
	1	5	9	19	14
			7	19	24
		1	8	20	18
	1	3	15	19	9

Would you participate in this process again?
 Do you see this as a helpful tool and process?

	Yes	No
	39	4
	40	2