Healthy people and places

December 2010

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Intake. believe it

or not

Intake Team

Volume 2, Issue 12

Eww, Gross... Bedbugs!

Phil Pellitteri an entomologist, who runs the Insect Diagnostic Lab at the University of Wisconsin-Madison recently spoke to the Intake nurses along with several EH staff about bed bugs.

Bedbugs have gotten recent press; bedbugs in clothing stores, movie theaters, hotels, etc. And, Intake staff regularly receive

phone calls from Dane County residents inquiring about bed bugs.

The good thing about bedbugs is that they do not cause diseases to humans, although the bed bug bites could become infected from scratching.

Some facts about bed-

bugs:

- They are resistant to most insecticides
- Bedbugs can only reproduce if they

feed on humans. They cannot feed on other animals and reproduce.

- Peak feeding time is 4 a.m.
- Bedbugs feed for approximately 3-5 minutes at a time.
- Bedbugs are killed when heating a room to 112 degrees (or higher)
- New research indicates that bedbugs may sense CO2
- Very costly to eliminate: get an expert to do the iob!



Guest Speakers

At the request of staff, Intake has had guest speakers come to the last few meetings and it has worked well.

In September, Maureen Oostdik came to speak about dental resources and referrals.

In November, Phil Pellitteri came to talk about bed bugs. In December, Burlie Williams from 211 came to talk about 211's new online database.

And, in January, Sue Webb-Lukomski from PHMDC's Chronic Disease team will come to talk about Chronic Disease and resources for the intake nurses.



By having guest speakers attend Intake Meetings, the Intake nurses are able to learn up to date information on referrals and resources in the community.



New Tool to Log Intake Calls

With the help of Melanie Jicha, PHMDC Administrative Services Supervisor), the Intake team now has a new call log.

The new call log is an Excel Spreadsheet that has dropdown boxes, the ability to sort columns and extract important data. The previous call log was a Word document that made it difficult to easily extract data in order to effectively evaluate the program.

With the new log, we are able to analyze the type of calls, the duration of calls and the disposition (result) of the call. This information allows us to identify call trends which can result in the development of press releases to inform the public about common public health concerns, identify areas that staff indicate they would like more information (see previous section on guest speakers) and evaluate our overall effectiveness in providing this service to the public.

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	Α	В	С	D	E	F	G
1	<u>Date</u>	Nurse	<u>Name</u>	Nature of Call	<u>Comments</u>	<u>Disposition</u>	Duration of Call
2	9/1	HD	Self	Family-Child Health	Confirm appt. with her PHN	Call Resolved	0-5 min
3	9/1	HD	Self	Dental Calls/Referrals	Dane county resident with extreme tooth pain. Was at UC for pain relief	orwarded Call to other PHMDC Sta	0-5 min
4	9/1	HD	linic/Hospita	ACD	ncentra called re Question re TB. Client with past hx of pos. TBST now ne	Call Resolved	10-15 min
5		FH	Self	nronic Disease/Adult Heal	needs cholesterol screening - no health insurance	Referred to Other Agency (NOT 211	10-15 min
6		FH	Self	Dental Calls/Referrals	needs ER Dental care	Referred to Other Agency (NOT 211	5-10 min
7		FH	Self	Access to Care	sick; no health insurance	Referred to Other Agency (NOT 211	5-10 min
8		FH	linic/Hospita	Family-Child Health	looking for PHN assigned to a PCC referral they made	Call Resolved	0-5 min
9	9/2	NW	Self	ACD	osed to bats -referred to urgent care for prophylaxis/given resources for	Call Resolved	5-10 min
10	9/2	NW	Self	Family-Child Health	pregnancy and car seat	Call Resolved	5-10 min
11	9/2	NW	Self	ACD	scables	Call Resolved	5-10 min
12	9/2	NW	Self	Other	refugee looking for Connie-informed to leave message -rtn 9/7	Forwarded Call to Nurse	5-10 min
13	9/2	NW	Private Agency	ACD	elderly woman needs help with nitpicking	Call Resolved	5-10 min
14	9/2	FH	Self	nronic Disease/Adult Heal	end - smoked marijauna and will need drug test for job - wants a place t	orwarded Call to other PHMDC Sta	5-10 min
15	9/2	FH	Self	Other	trying to call Dean Clinic - had wrong number - gave correct one	Call Resolved	0-5 min
16	9/2	FH	Self	Dental Calls/Referrals	2 adult sons need dental work - no insurance - one with a lot of pain	Call Resolved	5-10 min
17	9/2	FH	Self	ACD	travel shot questions	Call Resolved	5-10 min
18	9/3	PF	Self	Other	eeded information about transferring CNA certification to WI; immunizat	Call Resolved	more than 15 min
19	9/3	PF	Self	Other	arly hosp. discharge and outcomes. Recommended contact w/WHA, DCMS	Call Resolved	10-15 min
20	9/3	HD	Self	Family-Child Health	Request for info re PNC Program. No ins.	Call Resolved	5-10 min
21	9/3	HD	Self	ACD	IMMS recird	orwarded Call to other PHMDC Sta	0-5 min

Currently, 3 nurses consistently work intake remotely.

Remote Intake

What does it mean to work Intake remotely?

The main Intake station is located in the CCB. However, it is not a requirement to work Intake from this site. Some Intake Nurses take calls from their desks. The Intake Phone line is forwarded to the Intake Nurse's designated phone (either cell phone or desk phone) and the nurse will take calls at whichever location she is working.



Some nurses like the ability to work from their desk so they can work on other projects or other program work when not taking phone calls. Some nurses like the flexibility to

work from a different office location after working some clinic hours (i.e. Immunization clinic or TB clinic).

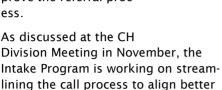
Not every Intake nurse likes working intake remotely. Some nurses still prefer to take calls out of the CCB. Where the majority of the Intake resources are housed.

By allowing Intake Nurses to work remotely it cuts down on the cost of mileage, has increased productivity and staff have stated that it improves their job satisfaction.

Intake & 211

Intake continues to work with Burlie Williams and United Way's 211 to manage the number of resources Intake is responsible for and improve the referral process.

with 211's capacity.



During H1N1, PHMDC started working more closely with 211 and found out that they have a wealth of information at their fingertips and that much of the work we were doing was being



duplicated.

As part of program evaluation, PHMDC management are always asking, "Is anyone else doing this work? & Can anyone else do this work?"

Some duplicated referral sources/resources include:

- Health/Dental referrals
- Food pantry resources
- Drug/Alcohol treatment resources
- Personal care items
- Housing/Utility assistance

Intake has identified specific domains (i.e. health, dental, PHMDC services, etc) that they will continue to provide while the other services are referred to 211 who will provide resources for the other domains (i.e. food pantries, utility assistance, personal care items, etc).

However, the result of this partnership with 211 includes PHMDC staff being trained in the 211 resource database. At the December Intake meeting Burlie trained staff in how to utilize the online database so they can have the same information at their fingertips as the 211 staff. In return we will be updating 211 about the resources PHMDC is responsible for maintaining. We feel this is a great partnership that will benefit our community.

Intake: Believe it or not

Here are some interesting stories from calls received by Intake Nurses representing the variety of calls the regularly respond to:

- Mother of a 16 y.o. who was described as having "destructive behavior" including physical injury to mother and grandparent; wanted to give up parental rights; mother stated she had "had it" with counseling.
- Woman called requesting recommendation for an appropriate mask to use when working at DeJope Gaming Casino (due to excessive amounts of cigarette smoke).



- Caller from the WI Law Library seeking information about where in the state statutes it mentions requirement of Vitamin K injection for newborns.
- 77 y.o. woman wanted to speak to a nurse with a lot of experience about the effectiveness of vinegar spray in the shower; was vinegar spray antibacterial or not; had even mentioned Judy Aubey by name after speaking with her and finding her very knowledgeable.
- Friend of a recent immigrant who was suffering from physical and emotional affects of female castration. Requested info about where to find medical resources for this client while in the US for a 3 month VISA. Requesting an expert who knows about female castration and has experience working with women suffering

from this type of abuse.

Employer of a person who may have Lyme Disease and wondering if he/she needed to report it. The employee called several times to discuss his need to link with a doctor knowing how to treat Lyme Disease. Employee had lab work done at a lab that WI DPH did not consider credible; Employee's partner called several times as well looking for follow-up care for partner. At least 3 different Intake Nurses spoke with this caller.

