

1. Background

The Ohio Department of Health (ODH) Bureau of Infectious Disease Control proposed transferring the case management functions of the Perinatal Hepatitis B Prevention Program (PHBPP) to the local health departments. It was decided that ODH PHBPP would continue to provide:

- Technical assistance
- Consultation
- Support functions

The two will work together to identify new partners in the fight to prevent perinatal hepatitis B in Ohio. The LHD Perinatal Hepatitis B Workgroup is a voluntary, but integral, part of accomplishing the goals of the PHBPP.

The LHD Perinatal Hepatitis B Workgroup was established In May 2002 after several needs assessment methods were conducted:

- **An initial needs assessment** of the PHBPP revealed case management could be done at the local level, with technical assistance provided by the ODH PHBPP.
- **Key informant interviews** with ODH and LHD staff were conducted in late 2001. The interviews revealed the LHD's desire and need to become more involved with perinatal hepatitis B case management.
- **A survey** was sent to the nursing directors of the 139 LHD's in Ohio (97 surveys completed and returned). 45% of respondents expressed Interest in being part of the workgroup.
- **Research of public health literature** revealed support from a federal government agency on the establishment of an advisory committee (workgroup) that would provide a good foundation for the PHBPP. According to the CDC, "If we, as a society, are to eliminate the transmission of the hepatitis B virus in the United States, we must implement programs in local communities that deal with local conditions" (Managing a Hepatitis B Program Guide, 1996, page 1). The literature also recommended that LHD personnel perform case management duties. The Advisory Committee on Immunization Practices (ACIP) recommended in its 2001 draft of "Hepatitis B Virus Infection: A Comprehensive Immunization Strategy to Eliminate Transmission in the United States" that hepatitis B surface antigen (HBsAg) positive women be reported to the LHD for appropriate case management to ensure follow-up of their infants and vaccination of sexual and household contacts.

The initial face-to-face meeting of the workgroup was held on August 9, 2002. The following recommendations were made: draft a local level protocol; create a PHBPP manual and ensure LHD access to the Artemis database. The LHD Perinatal Hepatitis B Workgroup has accomplished the enormous task of writing a case management protocol for Ohio's LHD's from the LHD perspective and updated the manual. The workgroup now serves as a network and resource for LHD's.

Regional trainings were conducted in August and September of 2003 with the goal of initiation of shared case management effective January 1, 2004.

In January 2004 ODH began sharing case management with the local health departments, and by 2005 the LHD's had taken over case management completely. ODH now serves as advisor and provides technical assistance, as needed.

In the end of 2010, a new case management module was incorporated into ODRS to replace Artemis as the online case management database. There is a Training Manual for ODRS Perinatal Hepatitis B Case Management available in the 'HELP' section on the ODRS home page.