1. Identify the Problem
Maryland regulations state that health care providers must report Chlamydia Trachomatis (CT) to the Local Health Department (LHD) using a morbidity report. The LHD then reports to the state health department. This allows treatment and disease trends to be monitored.

From June 1, 2015 to August 31, 2015 there were 196 cases of CT in Harford County. We received only 135 morbidity reports.

2. Develop AIM Statement
By February 1, 2016, the percentage of morbidity reports received from providers for cases of CT will increase from 70% (baseline) to 80% (goal).

3. Describe the current process

4. Identify Potential Causes
The Harford County Health Department is only receiving CT morbidity reports on 70% of cases.

Potential ROOT causes: Providers (1) are unaware of regulation requiring submission of morbidity reports for certain infections, (2) don’t know where to send the reports, how to send it or and what infections require morbidity reports.

5. Identify All Possible Solutions
Possible solutions for the problem focus on educating the providers and staff. Categories addressed included: (1) staff, (2) environment, (3) procedures, and (4) supplies. Education needed to be simple – one page for all staff to access. All documents needed for compliance needed to be provided. Information needed to be sent efficiently.

6. Develop Improvement Theory
If we:
1. create a “catchy” flyer to promote the submission of CT morbidity reports from providers,
2. create clear and concise guidelines on when and how to submit morbidity reports and,
3. provide a copy of a morbidity report
Then we will increase the % of correctly submitted CT reports from 70% to 80%.

7. Test the Theory
Educational flyers along with a copy of a blank morbidity report were mailed or faxed to 57 Harford County providers on October 1, 2015.

8. Study the Results
There were 259 CT cases from 11-1-15 to 1-31-16.
- 217 morbidity reports received.
- 42 missing morbidity reports.

Morbidity reports were received from 84% of cases, which exceeded the our goal of 80%.

INTERESTING FACT → of the 42 missing morbidity reports, 28 cases were from providers outside of Harford County. Our Outreach only targeted Harford County providers.

9. Decide Next Steps
Our theory proved to be correct. Flyers and blank morbidity report forms will continue to be sent to county providers on a quarterly basis. Information in the flyers will be expanded to include a list of all reportable diseases.

Sending to all county providers appears to be an efficient way to get information out.