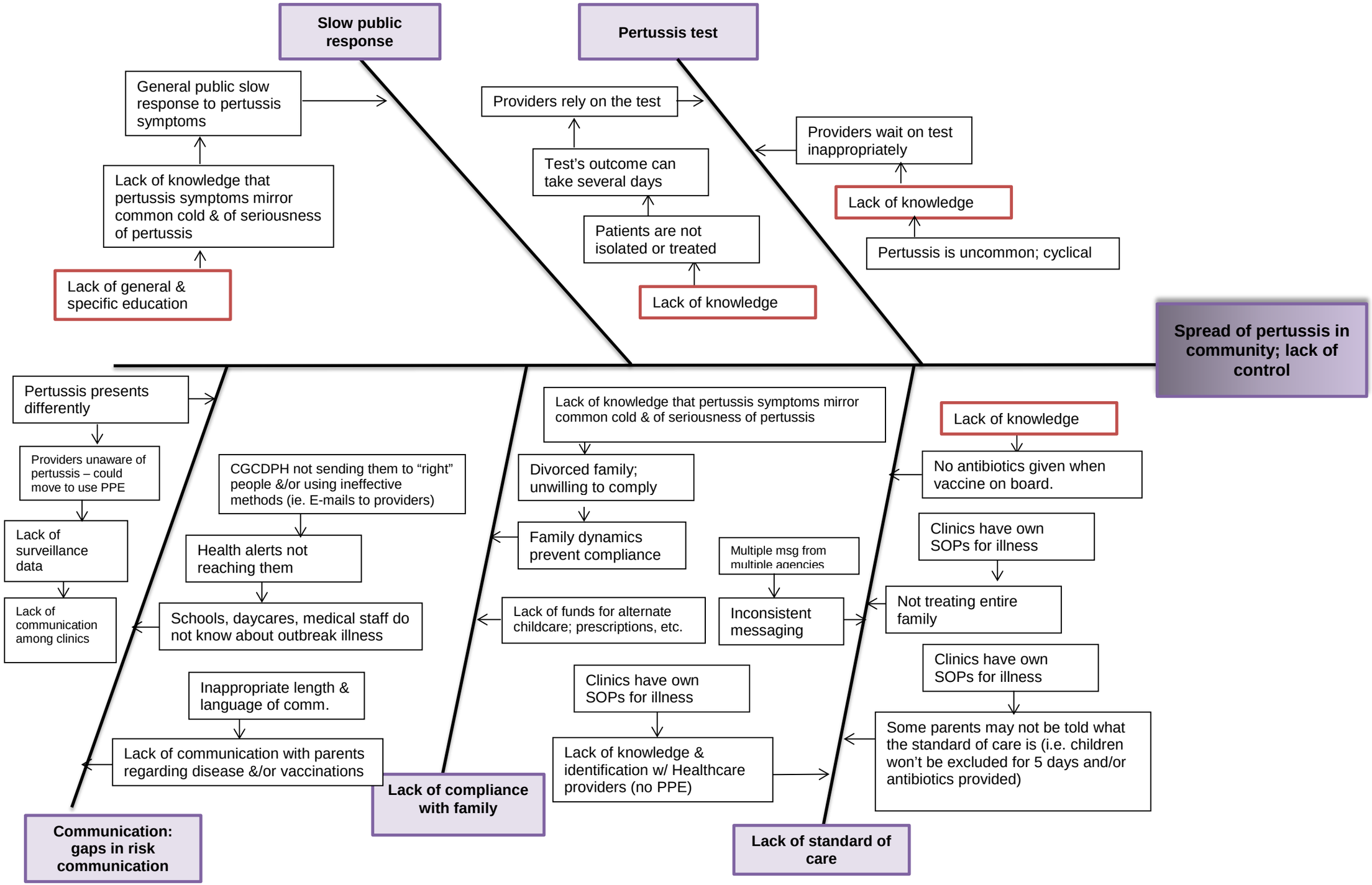
Slow public response
General public slow response to pertussis symptoms
Lack of knowledge that pertussis symptoms mirror common cold & of seriousness of pertussis
Lack of general & specific education
Pertussis test
Providers rely on the test
Test's outcome can take several days
Patients are not isolated or treated
Lack of knowledge
Providers wait on test inappropriately
Lack of knowledge
Pertussis is uncommon; cyclical
Spread of pertussis in community; lack of control
Pertussis presents differently
Providers unaware of pertussis – could move to use PPE
Lack of surveillance data
Lack of communication among clinics
CGCDPH not sending them to "right" people &/or using ineffective methods (ie. E-mails to providers)
Health alerts not reaching them
Schools, daycares, medical staff do not know about outbreak illness
Inappropriate length & language of comm.
Lack of communication with parents regarding disease &/or vaccinations
Communication: gaps in risk communication
Lack of knowledge that pertussis symptoms mirror common cold & of seriousness of pertussis
Divorced family; unwilling to comply
Family dynamics prevent compliance
Lack of funds for alternate childcare; prescriptions, etc.
Clinics have own SOPs for illness
Lack of knowledge & identification w/ Healthcare providers (no PPE)
Lack of compliance with family
Lack of knowledge
No antibiotics given when vaccine on board.
Clinics have own SOPs for illness
Multiple msg from multiple agencies
Inconsistent messaging
Not treating entire family
Clinics have own SOPs for illness
Some parents may not be told what the standard of care is (i.e. children won't be excluded for 5 days and/or antibiotics provided)
Lack of standard of care