



PUBLIC HEALTH DIVISION  
Office of the State Public Health Director  
Kate Brown, Governor

Oregon  
**Health**  
Authority

800 NE Oregon Street, Suite 930  
Portland, OR 97232  
Voice: 971-673-1222  
FAX: 971-673-1299  
TTY: 711

February 6, 2019

Ms. Sarah Nebeker, Chair  
Clatsop County Board of Commissioners  
800 Exchange St., Suite 410  
Astoria, OR 97103

Dear Chair Nebeker:

The modified triennial onsite agency review of Clatsop County Department of Public Health was conducted October 5 through November 15, 2018. The Oregon Health Authority Public Health Division reviewed county public health programs for compliance with state and federal public health laws and compliance with the Intergovernmental Agreement for the Financing of Public Health Services and the Intergovernmental Agreement for Environmental Health Services. This review was modified as part of a multi-year transition to a regional triennial review schedule; the last full triennial onsite review was conducted in 2016 and the next regular triennial review will occur in 2021.

The review included the appraisal of items in 14 program areas, listed below. Program areas with compliance findings are indicated with an asterisk.

Administration	Public Health Emergency Preparedness*
Babies First! and Perinatal	Sexually Transmitted Diseases
Communicable Disease	Tobacco Prevention and Education
Drinking Water Services	Tuberculosis
Fiscal	Vital Records
Food, Pool and Lodging Health & Safety*	Women, Infants and Children (WIC)*
Immunizations*	WIC Farm Direct Nutrition Program*

An overview report is enclosed, which includes a list of specific compliance findings, descriptions of programs, and areas of strength identified throughout the review. We urge you to review the report as it contains important information about your public health programs and their requirements.

Please note that the results of this triennial review are very good. We have shared the results of the review with Michael McNickle, Public Health Director and Local Public

Health Administrator. Our team is working closely with Michael McNickle to resolve all findings.


A full report with all documentation from the review will be sent to Michael McNickle. We think the report will be of assistance to your public health staff in their continuing efforts to provide quality public health services to your community.

Our office will contact Michael McNickle to determine if you would like to meet with us to go over findings and answer any questions. If you would like such a meeting, we leave it to the Board of Commissioners to determine if this meeting of the Local Public Health Authority occurs with one or more of the commissioners present.

Overall, agency reviewers find the Clatsop County Department of Public Health to be composed of a committed team of professionals who deliver quality public health services to your community. The citizens of Clatsop County are very fortunate to have this agency providing comprehensive public health services.

We thank you for ensuring that all compliance findings are resolved and for your support for the strong public health work the Clatsop County Department of Public Health is providing.

Sincerely,



Danna Drum  
Strategic Partnerships Lead



Andrew Epstein  
Public Health Systems Consultant

Enclosure

cc: Mark Kujala, Commissioner, Clatsop County  
Kathleen Sullivan, Commissioner, Clatsop County  
Lianne Thompson, Commissioner, Clatsop County  
Pamela Wev, Commissioner, Clatsop County  
Michael McNickle, Public Health Director and Local Public Health Administrator



**February 6, 2019**

## **Clatsop County Department of Public Health Triennial Review Report**

This is an overview report of the October 5 – November 15, 2018 modified triennial review of Clatsop County Department of Public Health (CCDPH). This report is a summary of individual reports from participating programs put together by the Oregon Health Authority (OHA) Office of the State Public Health Director. Detailed individual reports will be sent to Michael McNickle, Public Health Director and Local Public Health Administrator. We urge you to review this document as it contains important information about your public health programs and their requirements.

Note: This review is considered a modified review because it occurred less than three years since the last triennial review (December 2016) due to the statewide transition to a new triennial review schedule. In some cases, as noted below, if a state program conducted a full review in 2016, then for the 2018 review that program may have not conducted a new review or may have conducted a modified review.

CCDPH received from OHA \$395,308 Federal funds including \$185,562 for the WIC Program for the fiscal year 2018. CCDPH also received \$14,968 from State General Fund Support and \$104,740 Other Funds for the same period.

**Report Prepared by:** Andrew Epstein, Public Health Systems Consultant, Office of the State Public Health Director

## **COMPLIANCE FINDINGS SUMMARY**

### **Administration**

The LPHA is in compliance with all program requirements.

### **Babies First! And Perinatal**

The LPHA is in compliance with all program requirements.

### **Communicable Disease**

A modified review was conducted. No compliance issues were identified.

### **Drinking Water Services**

The LPHA is in compliance with all program requirements.

### **Fiscal**

The LPHA is in compliance with all program requirements.

### **Food, Pool and Lodging Health & Safety**

The LPHA must do the following to comply with program requirements:

1. Conduct a complete inspection to assign a public notice of sanitation within 45 days after opening for a restaurant or bed and breakfast facility. **Due date to comply: 3/31/2019**
2. Clearly state on the food inspection report if a priority or priority foundation violation has been resolved at the time of the semi-annual inspection and document how the violation was corrected. If a priority or priority foundation violation has not been corrected during the food facility inspection, a recheck inspection must be conducted within 14 days. **Due date to comply: 3/31/2019**

### **Immunizations**

The LPHA must do the following to comply with program requirements:

1. Submit vaccine orders according to the tier assigned by the Oregon Immunization Program. CCDPH is on a monthly ordering tier. Place a single monthly order in the second half of every month. **Resolved: 10/8/2018**

### **Public Health Emergency Preparedness**

The LPHA must do the following to comply with program requirements:

1. Submit a list of updates to emergency preparedness plans resulting from findings made in actual incidents and exercise improvement plans. **Due date to comply: 4/15/2019**

### **Sexually Transmitted Diseases**

The LPHA is in compliance with all program requirements.

### **Tobacco Prevention and Education Program**

The LPHA is in compliance with all program requirements.

### **Tuberculosis**

The LPHA is in compliance with all program requirements.

### **Vital Records**

The LPHA is in compliance with all program requirements.

**Women, Infants and Children (WIC)**

The LPHA must do the following to comply with program requirements:

1. Designated breastfeeding coordinator must be an International Board-Certified Lactation Consultant (IBCLC) or complete the State provided Level 3 breastfeeding training. **Due date to comply: 3/31/2019**
2. Local Program must check and document temperature of room where microcuvettes are stored as indicated in policy. **Due date to comply: 3/31/2019**
3. WIC staff must correctly assign all applicable risks identified during certifications. **Due date to comply: 3/31/2019**
4. WIC staff must manually change risk level from medium to high when indicated by policy. **Due date to comply: 3/31/2019**
5. WIC staff should be consistently providing health outcome statements during each certification appointment. **Due date to comply: 3/31/2019**
6. WIC Staff will make required referrals per policy. **Due date to comply: 3/31/2019**
7. WIC staff will document each quarterly nutrition education provided at each appointment attended by each participant. **Due date to comply: 3/31/2019**
8. All WIC participants identified as high-risk during assessment will be referred to the Registered Dietitian Nutritionist (RDN)/WIC Nutritionist. **Due date to comply: 3/31/2019**
9. High-risk participants will have a care plan documented in their record. **Due date to comply: 3/31/2019**
10. High-risk care plans will include all components outlined per policy. **Due date to comply: 3/31/2019**

**WIC Farm Direct Nutrition Program**



The LPHA must do the following to comply with program requirements:

1. Ensure that every entry on each check register page has an issuance date or a line through it originating from another entry with an issuance date. **Resolved:**  
**12/31/2018**

## **PROGRAM OVERVIEW AND STRENGTHS**

### **Administration, Civil Rights and Health Officer**

CCDPH provides an array of public health services including Communicable Disease Prevention and Investigation, Environmental Health, Immunizations, Maternal and Child Health, Public Health Emergency Preparedness, Tobacco Prevention Programs and Vital Records. The Clatsop County Board of Commissioners is the governing body of the Local Public Health Authority (LPHA). Michael McNickle is the Public Health Director and Local Public Health Administrator. Tom Duncan, MD, serves as Clatsop County's Health Officer.

Health Officer and Civil Rights reviews were not conducted as part of the October 2018 modified review. Local Public Health Administrator Mike McNickle attested that there have been no significant changes in Civil Rights and Health Officer documents and efforts in the time period since the last full triennial review in 2016.

Program strengths:

- Under the leadership of Michael McNickle, CCDPH has increased its collaboration with neighboring counties to address shared issues of concern. An example has been Clatsop County's lead role with the Public Health Modernization Capacity Building Grant, through which Clatsop County, Tillamook County, Columbia County, The Public Health Foundation of Columbia County and the Columbia Pacific Coordinated Care Organization have been working together to assess regional data on sexually transmitted infections and to identify vulnerable populations and develop regional strategies to address population-specific needs.
- CCDPH also collaborates with neighboring counties through the regional Prescription Drug Overdose Program. CCDPH operates a successful harm reduction program, which provides syringe exchange and naloxone outreach and training, and is working to regionalize those efforts with other counties.
- The Clatsop County Board of Commissioners has been very supportive of public health efforts. In addition to providing county general fund support, Commissioners have taken actions such as adopting a proclamation in support of the county's syringe exchange harm reduction program.

- CCDPH has been working on establishing its first School-Based Health Center for the Jewell School District to provide health services for students, staff and faculty.

### **Babies First! & Perinatal**

Maternal and Child Health (MCH) Perinatal and Babies First! programs have continued to gain stability and provide needed support for at-risk perinatal women and their children. A full time Nurse Home Visitor has been in place since September 2016. The county's goal is to hire another full-time Nurse Home Visitor.

Program strengths include:

- Mandy Mattison, Lead Nurse for Nurse Home Visiting, has demonstrated a high level of nursing skills and relationship development with clients.
- CCDPH has well-established community partnerships and linkages with providers and community agencies. There is an excellent ongoing referral process with partners made aware of MCH programs on a consistent basis.

### **Drinking Water Services**

The drinking water program provides technical services and support to public water systems. These services include responding to water quality alerts, requests from water system operators, drinking water contamination events, responding to spills, emergencies, and inspection of water system facilities. The drinking water services provided to water systems result in reduced health risk and increased compliance with drinking water standards. The drinking water program reports data to Oregon Health Authority, Drinking Water Services (DWS) as necessary for program management and to meet federal Environmental Protection Agency (EPA) Safe Drinking Water Act program requirements.

The drinking water program is in the hands of professional environmental health specialists. The program is well organized and operated and works cooperatively with state staff to help ensure safe drinking water for the 29 water systems it supervises.

### **Fiscal**

CCDPH's core functions are to assess, preserve, promote and protect the health and wellness of all county residents. It provides a comprehensive system of care, ranging from advocacy and education to clinics. The goal is to enhance the health of county communities through various programs and services.

CCDPH has sound and sufficient internal controls to adequately safeguard assets, to detect and prevent errors in a timely manner. The fiscal operation is well organized, monitored and efficient with a commitment to quality, fairness and accuracy.

### **Food, Pool and Lodging Health and Safety**

Clatsop County Environmental Health works in partnership with OHA and the industry to protect public health by licensing, inspecting and enforcing health and safety regulations in food, pool and lodging facilities. These include restaurants, mobile food units, temporary food booths at events, public pools and spas, hotels and motels, bed and breakfasts and organizational camps.

Clatsop County Environmental Health was last reviewed in 2016. At that time, some inspection frequencies were identified as out of compliance. Clatsop County resolved this by adding staff and completing the required inspections; the compliance finding was considered corrected at the end of 2017. Since the inspection frequencies for 2016 and 2017 were reviewed as part of the resolution of the 2016 compliance findings, there are no inspection numbers to include as part of the 2018 modified triennial review.

Meredith Reiley has been state standardized; this certification complies with the field review portion of the triennial review. Field staff that were reviewed exhibited good communication skills with operators and employees of the food service facilities and are focusing on critical risk factors that are most associated with foodborne illness.

### **Immunizations**

With expert leadership from Chel Baker, RN, Clatsop County continues to provide excellent immunization services to all area residents. During their last Vaccines for Children (VFC) compliance visit in March 2017, no compliance issues were found. Overall, Clatsop County immunization staff are a model of diligence and professionalism.

In 2018, Clatsop County collaborated with the American Cancer Society and the Oregon Immunization Program to improve HPV vaccine uptake in their county. This effort included significant immunization outreach to their surrounding communities. Thanks to Clatsop County's hard work on this project, HPV immunization up-to-date rates have climbed steadily since the projects inception.

### **Public Health Emergency Preparedness**

CCDPH contracts with Clatsop County Emergency Management to coordinate and deliver the Public Health Emergency Preparedness (PHEP) program. Clatsop County receives approximately \$73,800 annually from the OHA Public Health Division to



operate its PHEP program. This budget funds Vincent Aarts, Emergency Management Coordinator, at 0.33 FTE. The budget also funds approximately \$10,600 in additional CCDPH staff time to help support program implementation as needed, including activities such as planning, training and exercise, technical support, and emergency response.

The CCDPH Emergency Preparedness program demonstrated many notable strengths, including the following examples:

- In addition to maintaining an All-Hazards base plan/Emergency Support Function #8, CCDPH is engaged in the following planning efforts:
  - Participation in Countywide Continuity of Operations Planning
  - Mass Fatalities Incident Response Planning
  - Maintenance of a Strategic National Stockpile (SNS)/Medical Countermeasures Distribution Plan
- CCDPH's PHEP Program develops a comprehensive Annual Work Plan and Multi-Year Training and Exercise Plan, which contribute to program success.
- All CCDPH staff receive emergency preparedness training, including FEMA's IS 100 & 700 courses at a minimum, and the program maintains a robust training tracking system.
- CCDPH maintains systems to conduct routine and emergency communications with the community at large.
- CCDPH has demonstrated aptitude in developing Incident Action Plans (IAPs) when responding to planned events, such as Hood to Coast (2018), and exercises.
- CCDPH utilizes Homeland Security Exercise Evaluation Program (HSEEP) guidelines and after-action improvement plans to ensure a continuous cycle of improvement across exercise/planning efforts.
- Strong relationships with local Emergency Management and the larger response community leverage enhanced opportunities for coordination in planning, training, exercise and response activities.

### **Sexually Transmitted Diseases (STD)**

CCDPH in Astoria offers STD screening, testing, and treatment services Monday through Thursday. Consistent with trends statewide, Clatsop County's STD case counts have risen in recent years. The county recently experienced a sharp increase in syphilis cases, with the 2016 total jumping to nine cases from three in 2015. Gonorrhea cases increased from 12 cases in 2015 to 22 in 2016 and 28 in 2017. The county has twice applied for and

received special needs funding from the state STD Program in 2017 and 2018 to address the syphilis and gonorrhea outbreaks. These funds have been used to support community outreach, increased case investigation efforts to identify and treat partners, and procurement of additional testing and treatment supplies.

CCDPH has a strong communicable disease team providing STD services and conducting timely case investigations. Staff rose to the challenge of investigating and managing the increased burden of STD cases, as evidenced by the completeness of records in Orpheus. The clinic environment is welcoming and STD prevention brochures are plentiful in all areas. Many clinic signs and educational materials are written in English and Spanish. There are initiatives focused on reaching populations at higher risk, including people who use/inject drugs, and connecting them with local community resources. CCDPH has also proactively pursued funding for increased prevention efforts and is actively engaged in the community.

### **Tobacco Prevention and Education Program**

The Tobacco Prevention and Education Program (TPEP) in Clatsop County pursues a comprehensive approach to reducing the negative economic and health impacts of tobacco on the community through policy, systems and environmental change strategies. Clatsop County TPEP program staff offer information and technical assistance to local decision makers in government and nongovernmental agencies as well as to community leaders on evidence-based strategies for comprehensive tobacco control strategies, such as creating tobacco-free environments, countering pro-tobacco influences through tobacco retail licensing, promoting treatment for tobacco addiction among adults and youth, and reducing the burden of tobacco-related chronic disease.

Clatsop County fulfills all responsibilities related to local enforcement of the Oregon Indoor Clear Air Act, through educating community members and businesses on clean indoor air requirements, as well as follow-up on complaints received about Clatsop County businesses and organizations through the Workplace Environmental Monitoring System (WEMS).

The TPEP program engages in extensive outreach to and partnerships with government agencies and their decision makers, substance abuse prevention partners, community coalitions, the American Cancer Society, social service agencies, the business and education sectors and health systems partners such as Columbia Pacific Coordinated Care Organization (CCO) to address the hazards and health impacts of tobacco as the leading cause of preventable death in the state.

Clatsop County TPEP staff continue to work toward establishing tobacco-free environments by restricting smoking, tobacco use and vaping in public places and workplaces. During this review period, the TPEP program supported Clatsop Community College in successfully adopting and developing an implementation plan for a gold standard tobacco-free campus policy. TPEP staff also supported the adoption of a smoke-free property policy at the Northwest Housing Authority on all its properties in Clatsop, Columbia, and Tillamook counties effective January 1, 2018.

During this review period, Clatsop County TPEP applied for and was awarded a competitive Strategies for Policy and Environmental Change (SPArC) grant through OHA's Health Promotion and Chronic Disease Prevention section to accelerate policy goals around strengthening and expanding the Indoor Clean Air Act and Tobacco Retail Licensure in Clatsop County.

The TPEP Coordinator provides technical assistance to health systems partners in Clatsop County to expand capacity and infrastructure for tobacco cessation efforts. This includes strengthening systems to refer individuals to the Oregon Tobacco Quit Line for cessation support in partnership with the Women, Infants and Children (WIC) program, Federally Qualified Health Centers, hospital partners and the CCO.

TPEP program staff participate in all required training and technical assistance activities and submit work plans and reports in a timely manner. Staff performance on program work demonstrates an ongoing commitment to advancing tobacco prevention efforts both in Clatsop County and across Oregon.

### **Tuberculosis (TB)**

Clatsop County is low incidence for TB disease, although there is typically a TB case or contact investigation every couple of years.

The TB program is well organized, and staff are knowledgeable about TB. Required paperwork, N95 mask fit testing and new staff TB testing were in place and appropriately implemented during the review. In particular, Clatsop County does an outstanding job of ensuring a smooth transition when patients are referred for care. They have a good relationship with community clinics, communicate well with providers and give providers the support needed to care for the patient.

### **Vital Records**

Last year Clatsop County was the county of birth for 404 infants and the registered place of death for 351 individuals. The county vital records office serves their community by offering a local office where certified copies of birth and death records are available to

order by authorized individuals. The county is limited to providing this service for the first six months after the event, whether birth or death. Orders placed in this office are typically completed within one day.

The CCDPH Office of Vital Records consistently provides excellent customer service to their customers and partners throughout the community. The county registrar, Dawn Bergeson, has a good understanding of the operations of the office. Dawn and her deputies provide services efficiently and in a timely manner to their county partners and community members.

Staff members from Astoria funeral homes and Columbia Memorial Hospital expressed their appreciation for the county staff members' thoughtful and thorough responses to questions and responsiveness to orders placed.

## **WIC**

WIC's mission is to safeguard the health of low-income women, infants, and children up to age 5 who are at nutrition risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care. Delivering high quality nutrition services is essential in not only carrying out this mission, but also ensuring that WIC continues to be the premiere national public health nutrition program. The most recent fact sheet for this local WIC agency can be found on the Oregon WIC website: <http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/annual.aspx>

Clatsop County WIC staff demonstrate outstanding customer service and exceptional participant rapport through consistent use of participant-centered counseling skills, timely follow up of missed appointments, relevant referrals to community resources and strong team work. This commitment to providing quality services is evident in their recent innovative implementation of a state grant for enhancement of WIC clinic environments using a trauma-informed approach.

## **WIC Farm Direct Nutrition Program**

The Oregon Farm Direct Nutrition Program (FDNP) provides WIC families with FDNP checks once a year to purchase fresh, locally-grown fruits, vegetables and cut herbs directly from local farmers.

Onsite issuance at farmers markets in Astoria, Seaside and Cannon Beach strengthens redemption rates and enhances accessibility to FDNP services for WIC participants throughout the county.



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February 6, 2020

The Honorable Kathleen Sullivan, Chair  
Clatsop County Board of Commissioners  
800 Exchange St., Suite 410  
Astoria, OR 97103

Dear Chair Sullivan:

The triennial onsite agency review of Clatsop County Department of Public Health was conducted between October 5 and November 15, 2018. Findings were determined based on compliance with federal and state statutes or rules, the Intergovernmental Agreement for the Financing of Public Health Services and the Intergovernmental Agreement for Environmental Health Services.

A letter listing items that needed correction was sent to you after the review. The Public Health Administrator was provided a document listing the specific items and the time frame for correction.

We are very pleased to write you this letter thanking you and your staff for resolving all the compliance findings.

Sincerely,

Danna Drum  
Strategic Partnerships Lead

Andrew Epstein  
Public Health Systems Consultant

cc: Mark Kujala, Commissioner, Clatsop County  
Sarah Nebeker, Commissioner, Clatsop County  
Lianne Thompson, Commissioner, Clatsop County  
Pamela Wev, Commissioner, Clatsop County  
Michael McNickle, Public Health Director and Local Public Health Administrator