

AGENCY REVIEW

Linn County Public Health

October, 2017

Prepared by
Oregon Health Authority
Public Health Division

Kim La Croix, MPH, RD
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PUBLIC HEALTH DIVISION
Office of the State Public Health Director

Kate Brown, Governor

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Linn County Public Health Triennial Review Report

This is an overview report of the October and November 2017 triennial review of the Linn County Public Health Department. 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 Todd Noble, Local Public Health Administrator, and Glenna Hughes, Public Health Program Manager. We urge you to review this document as it contains important information about your public health programs and their requirements.

Linn County Department of Health Services received \$1,136,511.34 Federal Funds, including \$644,525 for the WIC Program for fiscal year 2017. The Health Department also received \$75,802.30 State General Funds and \$224,188.06 Other Funds for the same period.

Report Prepared by: Kimberly La Croix, Local Health Department Consultant,
Office of the State Public Health Director

COMPLIANCE FINDINGS SUMMARY

Administration

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

1. Written performance evaluations must be conducted annually or according to county policy.
 - Licensed employee evaluations were not viewed onsite or three weeks after the onsite review, as requested, to confirm that performance evaluations were conducted.

RESOLVED: 12/21/2017

2. All members of the workforce must be trained in Health Insurance Portability and Accountability Act (HIPAA).

- Documentation of confidentiality statements (HIPPA training) were not viewed onsite or three weeks after the onsite review, as requested, to confirm.

RESOLVED: 12/20/2017

Babies First! And Perinatal

The LPHA is in compliance with all program requirements.

Civil Rights

The LPHA is in compliance with all program requirements.

Communicable Disease

The LPHA is in compliance with all program requirements.

Drinking Water

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. The LPHA must maintain an inspection rate of 100% for all licensed facilities. The following program is below the compliance rate: Vending Machine Program [OAR 333-012-0055\(1\)](#). DUE DATE TO COMPLY: 6/29/2018
2. Recheck inspections of priority and priority foundation violations are not occurring in a timely manner. Some recheck inspections are conducted several weeks after the semi-annual inspection. The LPHA must conduct recheck inspections within 14 days of the semi-annual inspection. [OAR 333-012-0055\(3\)\(e\)](#). DUE DATE TO COMPLY: 3/30/2018

Health Officer

The LPHA is in compliance with all program requirements.

Health Security Preparedness and Response

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

1. Provide evidence of NIMS (National Incident Management System) training records for Public Health Program Manager and Health Officer. DUE DATE TO COMPLY: 6/30/2018
2. Train all LPHA employees for emergency response roles. Nine out of 24 staff need to complete one or more ICS (Incident Command Structure) trainings. DUE DATE TO COMPLY: 6/30/2018

HIV Prevention

The LPHA is in compliance with all program requirements.

Immunizations

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

1. LPHA must meet the following vaccine management requirements:
 - Reconcile inventory in ALERT IIS monthly.
 - Submit vaccine orders according to the tier assigned by Oregon Immunization Program.RESOLVED: 11/30/2017
2. LPHA must bill quarterly for vaccines administered to insured patients. Bills must be paid within 30 days of the invoice date. Third Quarter 2016 and First Quarter 2017 were paid after 30 days of invoice date.
DUE DATE TO COMPLY: 1/25/2018
3. LPHA must ensure that clinical immunization staff view CDC-provided continuing immunization education annually.
DUE DATE TO COMPLY: 1/25/2017
4. LPHA must comply with Vaccine Billing Standards.
Create an implementation plan that addresses each of the following:
 - Identify staff responsible for billing and contracting activities
 - Identify major health insurance plans in the jurisdiction, including those most frequently carried by LHD clients

- Determine an administration fee for Billable clients based on the full cost recovery of services provided and documents how fees were determined
- Charge the maximum allowable vaccine administration fee for all eligible VFC/317 clients and discount the fee for eligible clients as needed
- Develop immunization billing policies and procedures that address:
 - Strategies to manage clients who are not eligible for VFC or 317 and are unable to meet the cost of immunizations provided
 - The actual cost of administration fees and the adjustments made, if any, to administration fees based on payer, patient age, and/or vaccine eligibility code
 - The purchasing of privately owned vaccine and how fees are set for vaccine charges to the client
 - The appropriate charge for vaccine purchased from OIP, by including a statement that says, “We will not charge more than the OIP-published price for billable vaccine.”
 - Billing processes based on payer type (DMAP/CCOs, private insurance, etc.), patient age, and vaccine eligibility code
 - The appropriate billing procedures for Medicaid-covered adults
 - The appropriate billing procedures for Medicaid-covered children birth through 18 years
 - Is updated annually or as changes occur
- With certain limited exceptions as published in vaccine eligibility charts, use no federally funded vaccine on insured clients, including adult Medicaid and all Medicare clients
- As needed, consider developing contracts or other appropriate agreements with relevant payers to assure access to immunization services for insured members of the community
- Fulfill credentialing requirements of contracts/agreements
- Bill private and public health plans directly for immunization services, when feasible, rather than collecting fees from the client and having them submit for reimbursement
- Screen immunization clients to determine amount owed for service at all LHD clinics, including those held offsite
- Devise a plan to implement results of administration fee cost analysis
- Conduct regular quality assurance measures to ensure costs related to LHD’s immunization services are being covered

- Implement administration charges based on results of the administration fee cost analysis
- Work to ensure access to immunizations for Medicare-eligible members of the community and, if access is poor, provide Medicare Part B and/or Part D vaccines, as needed, and bill appropriately to cover the cost

DUE DATE TO COMPLY: 1/25/2018

5. LPHA must meet the following performance measures:

- Account for 95% of all vaccine inventory in ALERT IIS
- Quarter 3 2017, Linn County Health Department - Albany: 92.5%

DUE DATE TO COMPLY: 1/25/2018

Reproductive Health

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

1. Protocols and consent forms must note that a client's acceptance of family planning services must not be prerequisite to eligibility. RESOLVED: 1/17/2017
2. Financial protocols must be aligned with the Oregon Health Authority Reproductive Health protocols that have been available online since 2015. DUE DATE TO COMPLY: 1/13/2017
3. Once updated, protocols must be approved by the Grantee (Reproductive Health Program). DUE DATE TO COMPLY: 1/13/2017

Sexually Transmitted Infections

The LPHA is in compliance with all program requirements.

Tobacco Prevention & Education Program

The LPHA is in compliance with all program requirements.

Tuberculosis (TB)

The LPHA is in compliance with all program requirements.

Vital Records

The LPHA is in compliance with all program requirements.

Women Infants & Children (WIC) Program

The WIC compliance review was separate from the Triennial Review and was conducted in December 2016.

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

1. Ensure that processing standards are met. (Policy 605) *This is a repeat finding from 2014.* RESOLVED: 5/31/2017
2. Ensure that eligibility pending and proof information is appropriately documented. (Policy 616) RESOLVED: 4/30/2017
3. Ensure that all anthropometric measurements are accurately taken. (Policy 625) RESOLVED 4/30/2017
4. Ensure that there is documentation indicating awareness of WIC requirements by the local homeless facilities that serve WIC families. (Policy 655) RESOLVED 4/30/2017
5. Ensure that all personnel paid directly by WIC funds complete a quarterly time study. (Policy 316) RESOLVED 1/31/2017
6. Ensure that staff time spent on nutrition education is appropriately documented on quarterly time studies to support accurate reporting of nutrition education expenditures. (Policy 315) *This is a repeat finding from 2014.* RESOLVED 5/31/2017

WIC Farm Direct Nutrition Program (FDNP)

The LPHA is in compliance with all program requirements.

PROGRAM OVERVIEW AND STRENGTHS

Administration and Civil Rights

The Public Health Department Manager, Glenna Hughes, has been in her role since January 2017. Despite challenges with personnel and staffing, she has helped

ensure Linn County Public Health performs public health duties to prevent and promote the health of Linn County's citizens. Strong infrastructure is present for all public health programs and there is a lot of potential for program development. Glenna remains flexible and is working on team cohesion with the help of experienced staff from communicable disease and health promotion.

Todd Noble has been the Local Public Health Administrator since July 2017. With his experience as a program manager for behavioral health, Todd is poised to foster enhanced integration between public health and mental health and to be a voice for collaborative efforts statewide.

Long standing collaborative relationships and initiatives between Benton County and Linn County have set the stage for new regional public health work. Linn County is a grant recipient, along with Lane, Benton and Lincoln counties for public health modernization and HIV early intervention funding. Although Linn County is not the project lead, the public health system and the residents of Linn County will benefit from regional approaches to improve immunizations and prevent HIV.

Linn County Public Health was accredited by the Public Health Accreditation Board in June 2017. Public Health Accreditation is a significant undertaking that requires meeting rigorous standards for delivering quality services.

Babies First & Perinatal

The Perinatal and Babies First Programs continue to be implemented in a way that is reflective of the skills of the following MCH Staff members: Karol Elizondo, RN, MBA, Nurse Home Visitor; Rebeca Moreno, Oregon Mothers Care (OMC) Coordinator; and Norma O'Mara, RN, BSN, MCH/Reproductive Health Supervisor.

Program strengths include:

- Excellent level of nursing expertise regarding implementation of MCH Nurse Home Visiting programs.
- OMC Coordinator provides a comprehensive model of service provision to community women and families.
- All programs have well-established relationships with area physician providers, and community agencies.

Tri-County collaboration has been established between Benton, Lincoln and Linn counties to support mutual shared Maternal Child Health programming for women and families, titled “Family Child Health Nurse Visiting Services.”

Communicable Disease

Communicable disease is doing an outstanding job in disease investigation and outbreak investigation. Debbie Uri is a seasoned nurse epidemiologist.

Drinking Water

The drinking water program provides services to public water systems that result in reduced health risk and increased compliance with drinking water monitoring and maximum contaminant level requirements. The drinking water program reduces the incidence and risk of waterborne disease and exposure of the public to hazardous substances potentially present in drinking water supplies. Services provided through the program include investigation of occurrences of waterborne illness, drinking water contamination events, response to spills, emergencies, and inspection of water system facilities. The drinking water program reports data to OHA, Drinking Water Services (DWS) necessary for program management and to meet federal Environmental Protection Agency (EPA) Safe Drinking Water Act program requirements.

Water system files were reviewed and found to demonstrate superb documentation of work performed. The Drinking Water Program is in the hands of very competent and professional environmental health specialists. The program is well organized and operated, and works cooperatively with state Drinking Water Program staff to help ensure safe drinking water for the 173 water systems it supervises.

Fiscal

It appears that the County Department of Health Services has sufficient internal controls to adequately safeguard assets, to detect and prevent errors in a timely manner. The operation is fairly organized and efficient with commitment to quality, fairness and accuracy.

Food, Pool and Lodging Health and Safety

Environmental Health Licensing Programs consists of Food, Pool and Lodging facilities.

Linn County Environmental Health is doing a good job of providing Environmental Health services to the community. The inspection rates for licensed facilities are good in all program areas, except for the Vending Machine Program which is below the compliance rate.

During the field review staff met all of the required elements of a thorough inspection. Staff exhibited good communication skills with operators and employees of the food service facilities during the field review. Staff are focusing on critical risk factors that are most associated with foodborne illness. Alyson Reynolds has been state standardized and satisfactory completion and maintenance of the standardization process complies with the field review portion of the triennial review.

Health Officer

The Health Officer, Dr. William Muth, is an experienced infectious disease physician and Health Officer. Dr. Muth provides expert medical guidance for Linn County Public Health, especially in his area of expertise, communicable disease. Dr. Muth has regular communication with the Debby Uri, communicable disease nurse and engages with health officers across the state via monthly Health Officer conference calls and attendance at the annual Oregon Epidemiology Conference. Once a month Dr. Muth presents to the Board of County Commissioners on infectious disease in Linn County.

Health Security, Preparedness and Response

The Linn County Public Health (LCPH) Emergency Preparedness Program is coordinated by one part-time employee, Sarah Bates, who reports directly to the Public Health Manager. Ms. Bates' recent work has involved extensive work with community partners including the recent launch of the Linn-Benton COAD (Community Organizations Active in Disasters).

Linn County Public Health has developed and maintained excellent community partnerships in preparedness. The Public Health Emergency Preparedness (PHEP) Coordinator works with local partners to address local needs found through assessments, exercises, and responses. There are joint efforts in developing materials and programs to support local preparedness efforts.

Immunizations

LCPH provides essential services to Linn County residents. Karyn Walker has been the county's immunization coordinator for many years and is deeply involved in the community. This is a solid immunization program with dedicated staff. During their last VFC compliance visit in July 2016, there was only one compliance issue that was quickly corrected.

Linn County's staff provides significant Immunization and Perinatal Hepatitis B outreach and support to the community. Linn County has a small and diverse population that relies on the one-on-one relationships that Health Department staff build with their patients. Karyn is extremely knowledgeable around immunizations and how best to support county health needs.

Reproductive Health

The Linn County Public Health clinic location is a few buildings set back from the main highway through Albany. Reproductive Health shares a building with WIC. Clinic hours are clearly posted at the clinic and on the website.

The clinic provides reproductive health services for men and women in need as outlined for Title X. Data from calendar year 2016 shows 82% of family planning clients are at or below 138% FPL. Medical services are provided according to national standards of care, ensuring quality family planning services. Documentation of appropriate education and anticipatory guidance are noted on the Client Visitation Records (CVR) for the encouragement of preventive healthcare.

Linn County provides culturally responsive reproductive health services by operating a health clinic with bilingual clerical staff and provides interpreter services as needed.

The Reproductive Health program recently volunteered to participate in the Statewide Information and Education Committee that is coordinated through the Oregon Health Authority for family planning and reproductive health topics.

Linn County reproductive health medical staff have demonstrated that they are providing care according to US Preventive Services Task Force (USPSTF) standards. A client centered approach was observed in the clinics during the Triennial Review. Staff in the Family Planning Reproductive Health clinics are from a variety of specialties: Certified Nurse Midwife (CNM), Nurse Practitioner

(NP), Registered Nurse (RN), and Medical Assistant (MA) with delegated authority from Public Health Officer (MD).

In 2015, the Linn County teen (10-17 years of age) pregnancy rate was 5.0 per 1000 Youth. This is a decrease since 2005 when the rate was 7.6 per 1000 Youth.

Sexually Transmitted Disease (STD) Prevention

LCPH offers STD services out of locations in Albany and Lebanon. The county has seen a considerable increase in gonorrhea over the past several years and is currently in the midst of a gonorrhea outbreak.

Their rate of gonorrhea nearly tripled from 2015 (33.51/100,000) to 2016 (93.8/100,000). A review of their STD data for 2017 year-to-date indicates this rate will rise further and that the county is on course to match or exceed the already high statewide rate for 2017. This gonorrhea outbreak involves a great deal of additional health department resources for case follow-up, interviewing, as well as testing and treatment of sexual partners. The county has also seen its number of early syphilis cases almost double from 2016 (5 cases) to 2017 (9 as of date of review). These cases are often very complex and can involve a great deal of staff time particularly related to clinical management and partner follow-up.

Linn County's STD program benefits greatly from highly experienced and committed staff. There are strong systems in place for follow-up of gonorrhea, syphilis and HIV cases as well as other prevention activities such as condom distribution. The quality of their HIV/STD case work as evidenced by data in the Oregon Public Health Epidemiology User System (ORPHEUS) is very strong. The county should also be commended for working proactively with the state STD program to identify new strategies to address their ongoing gonorrhea outbreak.

Recommendations for improvement include:

- Initiate steps to increase the percentage of early syphilis and gonorrhea cases containing HIV status or date of most recent HIV test.
- Review QA recommendations from OHA HIV/STD Prevention Program to update their "Client-Centered HIV Counseling and Testing" policy.

Tobacco Prevention & Education Program (TPEP)

Linn County has continued to implement its TPEP program through a comprehensive approach that includes facilitating community partnerships,

creating tobacco-free environments, countering, promoting quitting of tobacco among adults and youth, and reducing the burden of tobacco. Linn County has fulfilled all responsibilities related to local enforcement of the Oregon Indoor Clean Air Act.

Linn County TPEP has successfully promoted policy change for healthy, tobacco-free environments in a variety of settings within the county including: Willamette Health Center, Albany Public Library, parks in City of Sweet Home, homeless shelters and Festival Latino. Linn County TPEP has done a great job at collaborating with other prevention staff to implement projects as well as work towards future work plan strategies.

The TPEP program follows statewide tobacco control laws and takes required action on Indoor Clean Air Act complaints that are received through the Workplace Exposure Monitoring System (WEMS) in a timely matter. The TPEP program has adapted a unique approach to site visits and completes them with their counterpart from Benton County and vice versa.

The TPEP program promotes the Oregon Tobacco Quit Line by integrating Quit Line information into presentations with community partners and decision makers as well as to mental health providers and in health clinics. Print materials are taken to all public health related events and available in the lobby for clients that come to public health for various services.

Program staff continue to establish and maintain strong relationships with a broad range of policy makers, partners and community stakeholders including Linn Together coalition, Linn Benton Health Equity Alliance, Samaritan Health Services, OSU Extension, Chance of Albany and Lebanon, and Stand Youth Coalition.

Tuberculosis

A case of TB disease is diagnosed in Linn County every few years. Linn County also has needed to manage occasional large, complex contact investigations and evaluation of B waiver immigrants.

Staff are experienced and very knowledgeable about tuberculosis. The approach to managing TB cases and contact investigations is thoughtful and well implemented

with excellent outcomes. The documents needed for the review were well organized. Linn County has a very strong TB program.

Vital Records

Linn County was the county of birth for 960 infants last year and the registered place of death for 1,299 individuals last year. The Linn County Office of Vital Records 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 Linn County Office of Vital Records consistently provides excellent customer service to their customers and partners throughout the community. The county registrar and the lead deputy provide a renewed organization, providing a depth of understanding and a commitment to continual improvement.

The staff members work in close collaboration to ensure all areas of the vital records office run smoothly and securely. The Office of Vital Records provides a positive linkage between the community and the state vital records office. Records and reports are handled with careful attention to maintaining security and confidentiality. State staff that have contact with the county report an excellent relationship with the office.

Women Infants & Children (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>

Program strength

The Linn County WIC program staff are committed to the provision of quality services as evidenced by their excellent customer service, strong teamwork and willingness to participate in innovative quality improvement projects such as:

- Linn County WIC was awarded a Delivery Systems Transformation grant from their local Coordinated Care Organization (CCO), InterCommunity Health Network to locate an Internationally Board-Certified Lactation Consultant in the Lebanon Pediatric Clinic with the goal of expanding breastfeeding services in East Linn County.
- WIC staff have been instrumental in expanding the local breastfeeding coalition to Lincoln County. The WIC coordinator recently presented the Linn-Benton-Lincoln Breastfeeding Coalition's first Breastfeeding Advocate Award to a local physician.
- For the past year, the WIC program has been an integral part of the new Sweet Home FQHC, a joint effort between Linn and Benton County Health Departments.
- Linn County WIC was one of two pilots for the implementation of EBT services in Oregon. The successful 2016 statewide rollout of eWIC benefits can be credited in part to the work that this agency completed during the fall of 2015.

WIC Farm Direct Nutrition Program (FDNP)

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

The Linn County WIC staff distributed 1408 check packets during the 2016 FDNP season, an increase of 535 from the 2015 season. This success can be contributed to an active marketing campaign and multiple issuance opportunities at health fairs and individual appointments.

QUALITY ASSURANCE RECOMMENDATIONS

Communicable Disease

Report animal bites to the Oregon Health Authority through the ORPHEUS system.

Drinking Water Services

Develop the practice of using one Alert ID per contact report. This practice helps ensure that each alert is associated with a contact report on Data Online and reflected accurately.

Sexually Transmitted Disease

- Program is encouraged to take steps to increase the percentage of their early syphilis and gonorrhea cases containing HIV status or date of most recent HIV test.
- Program is encouraged to review QA recommendations from OHA HIV/STD Prevention Program in order update their “Client-Centered HIV Counseling and Testing” policy, as needed.

Maternal Child Health

- Update MCH Nurse Home Visiting Policies by end of December 2018.
- Increase additional Nurse Home Visitor FTE when possible.



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January 18, 2018
Mr. Roger Nyquist, Chair
Linn County Board of Commissioners
315 4th Ave SW
Albany, OR 97601

Dear Chair Nyquist:

The triennial onsite agency review was conducted for Linn County Public Health in October and November 2017. 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 Financial Assistance Agreement.

The review included the appraisal of items in 17 program areas, listed below. Program areas with compliance findings are indicated with an asterisk.

Administration*	Immunizations*
Babies First! and Perinatal	Reproductive Health*
Civil Rights	Sexually Transmitted Infections
Communicable Disease	Tobacco Prevention & Education
Drinking Water Services	Tuberculosis
Fiscal	Women Infants and Children (WIC)*
Food, Pool Lodging Health & Safety*	WIC Farm Direct Nutrition Program (FDNP)
Health Officer	Vital Records
Health Security Preparedness and Response*	

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

A full report will be sent to Todd Noble and Glenna Hughes. 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 team is working closely with Linn County Public Health Program Manager Glenna Hughes and Local Public Health Administrator Todd Noble to resolve all the findings.

Our office will contact Todd Noble to schedule a time to meet with you to go over findings and answer any questions. We leave it to the local Board of Commissioners if this meeting of the Local Public Health Authority occurs with one or more of the commissioners present.

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

We thank you for assuring that all compliance findings are resolved and for your support for the strong public health work Linn County is providing to its community.

Sincerely,



Danna Drum
Strategic Partnerships Lead



Kim La Croix
Local Health Department Consultant

Enclosures

cc: John K. Lindsey, Vice Chair, Linn County Commissioner
Will Tucker, Linn County Commissioner
Todd Noble, Administrator/Mental Health Director, Linn County Department of Health Services
Glenna Hughes, Program Manager, Linn County Public Health
Ralph Wyatt, Linn County Administrator