



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

Oregon
Health
Authority

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March 12, 2020

The Honorable Jim Bernard, Chair
Clackamas County Board of County Commissioners
2051 Kaen Rd.
Oregon City, OR 97045

Dear Chair Bernard:

The triennial onsite agency review of Clackamas County Public Health Division was conducted January 6 through January 30, 2020. 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.

The triennial review included the appraisal of items in 19 program areas, listed below. Program areas with compliance findings are indicated with an asterisk.

Administration	Public Health Emergency Preparedness
Babies First! and Perinatal	Reproductive Health Community
Civil Rights	Participation & Assurance of Access
Communicable Disease	Sexually Transmitted Diseases
Drinking Water Services*	Tobacco Prevention and Education
Fiscal	Tuberculosis
Food, Pool and Lodging Health & Safety	Vital Records
Health Officer	Women, Infants and Children (WIC)*
HIV Prevention	WIC Farm Direct Nutrition Program
Immunizations	WIC Breastfeeding Peer Counseling

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 excellent. Our team is working closely with Richard Swift, Local Public Health Administrator, to resolve all findings.

A full report with all documentation from the review will be sent to Richard Swift. 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 Richard Swift 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 Clackamas County Public Health Division to be composed of a committed team of professionals who deliver quality public health services to your community. The citizens of Clackamas 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 Clackamas County is providing.

Sincerely,



Danna Drum
Strategic Partnerships Lead



Andrew Epstein
Public Health Systems Consultant

Enclosure

cc: Sonya Fischer, Commissioner
Ken Humberson, Commissioner
Paul Savas, Commissioner
Martha Schrader, Commissioner
Richard Swift, Interim Public Health Director and Local Public Health Administrator



March 12, 2020

Clackamas County Public Health Division Triennial Review Report

This is an overview report of the January 2020 triennial review of Clackamas County Public Health Division. This report is a summary of individual reports from participating programs compiled by the Oregon Health Authority (OHA) Office of the State Public Health Director. Detailed individual reports will be sent to Richard Swift, Interim 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.

Clackamas County received from OHA Public Health \$1,532,994 in Federal Funds for the fiscal year 2019. The LPHA also received \$561,260 from State General Fund Support and \$1,356,145 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 Local Public Health Authority (LPHA) is in compliance with all program requirements.

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 Services

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

1. Send a failure to take corrective action letter when a public water system does not correct a deficiency by the due date assigned. **Resolved: 2/28/2020**

Fiscal

The LPHA is in compliance with all program requirements.

Food, Pool and Lodging Health & Safety

The LPHA is in compliance with all program requirements.

Health Officer

The LPHA is in compliance with all program requirements.

HIV Prevention

The LPHA is in compliance with all program requirements.

Immunizations

The LPHA is in compliance with all program requirements.

Public Health Emergency Preparedness (PHEP)

The LPHA is in compliance with all program requirements.

Reproductive Health Community Participation & Assurance of Access

The LPHA is in compliance with all program requirements.

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:

By March 26, 2020, submit a Corrective Action Plan (CAP) including action steps that will be taken to achieve compliance. Due dates for resolving each of the following compliance items will be set after OHA reviews and approves the CAP.

1. Manually change risk level from medium to high when indicated by policy.
2. Make required referrals per policy.
3. Screen for immunization status, using a documented record, at certification and mid-certification appointments for all children between the ages of 3 and 24 months.
4. Offer all participants (or participant caregivers) the opportunity to register to vote using the required language at certification and recertification appointments or when they are reporting a change of address.
5. Develop a written agreement for nutrition education provided by non-WIC program.
6. Refer all WIC participants identified as high-risk during assessment to the Registered Dietitian Nutritionist (RDN)/WIC Nutritionist.
7. Perform a monthly physical inventory of eWIC card stock.
8. Ensure that staff conducting income eligibility for a participant are different than the staff responsible for risk determination for that participant.
9. Ensure participant confidentiality when interviewing and counseling participants.

WIC Farm Direct Nutrition Program

The LPHA is in compliance with all program requirements.

WIC Breastfeeding Peer Counseling

The LPHA is in compliance with all program requirements.

PROGRAM OVERVIEW AND STRENGTHS

Administration, Civil Rights and Health Officer

The Clackamas County Public Health Division (CCPHD) provides an array of public health services within the foundational program areas of communicable disease control,

environmental public health, prevention of injury and disease and health promotion, and access to clinical preventive services. CCPHD's Center for Public Health Advancement develops and supports public health foundational capabilities through public health workforce development, data analysis, policy and planning, research, emergency response and outreach. The Clackamas County Board of Commissioners is the Local Public Health Authority (LPHA) governing body. Richard Swift is Local Public Health Administrator and interim Public Health Director. Dr. Sarah Present is the Health Officer.

Program strengths:

- County Commissioners are supportive of public health and have been exploring with CCPHD public health policies such as tobacco retail licensing.
- CCPHD has demonstrated a strong commitment to civil rights and health equity through comprehensive civil rights policies and procedures, establishment of health equity zones and use of public health modernization funds to advance health equity work.
- Clackamas County's Health Officer, Dr. Sarah Present, balances clinical and population-health responsibilities within her 0.5 FTE role at CCPHD. She has been a leader within Clackamas County and across the tri-county region addressing opioids, climate change, and other emerging public health issues.
- The Center for Public Health Advancement is an innovative model for training and skill building across foundational public health capabilities for public health staff as well as infrastructure support for CCPHD programs.
- To advance public health improvement goals, CCPHD has leveraged internal and external partnerships with entities including:
 - Department of Transportation and Development (DTD) – to create a shared position between DTD and CCPHD focusing on transportation, housing and health in all policies.
 - County jail and local law enforcement – to address opioid use response and support continuity of treatment for substance use disorders.
 - Emergency Medical Services – to engage fire districts, dispatch centers and hospitals to increase organization and responsiveness of emergency medical system.

- Health Share CCO – Richard Swift serves on the CCO Board, and CCPHD Operations Manager Philip Mason-Joyner sits on the CCO’s Community Advisory Council. CCO partnerships include a data sharing MOU, reimbursement by the CCO for services provided by the county for CCO members, and a CCO-funded vaccine hesitancy initiative which Clackamas County leads.
- Early Learning Hub – Public Health Assistant Director Julie Aalbers serves on the Early Learning Hub’s Board, with others in CCPHD supporting early learning collaborative improvement efforts.

Babies First! And Perinatal

CCPHD offers maternal and child health (MCH) services through the Babies First! and CaCoon Public Health Nurse Home Visiting programs, Oregon Mothers Care and MCH Title V Block Grant Activities. Targeted Case Management (TCM) services are provided through the Home Visiting programs, with support from TCM Medicaid billing. MCH Title V Block Grant activities (classes through WIC, breastfeeding support, and Healthy Smiles) are focused on the perinatal period. A home visiting nurse receives and follows up on Early Hearing Detection and Intervention (EHDI) referrals.

CCPHD is rebuilding their Nurse Home Visiting Team in a thoughtful and strategic way; the current, single nurse home visitor (NHV) has been able to maintain a large caseload and develop efficient electronic documentation workflows. The NHV developed a unique, ongoing collaboration for support of children with special health needs with county Educational Service District (ESD) school-based services; she continues to have a direct relationship with the ESD and is involved with teachers in classrooms to better understand family needs.

The program supervisor has begun to incorporate evidence-based practice of reflective supervision into the Babies First! and CaCoon programs, following a recommendation issued in 2019. She also coordinated a novel approach to ensure appropriate chart review by eliciting support from the health officer.

Communicable Disease (CD)

Clackamas County CD investigations are conducted by CD nurses and an epidemiologist. CD staff follow up on required public health interventions as per Oregon Investigative Guidelines. In the triennial review period, there were 2,307 reportable disease conditions and 108 outbreaks.

CD staff collaborate on investigations, have a clear division of responsibilities, and are committed to process improvement to increase timeliness and completeness of case investigations. CCPHD's epidemiologist supervises outbreak investigations. Staff regularly attend trainings offered by OHA Acute and Communicable Disease Prevention and provide helpful feedback on case investigation tools.

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 services provided to water systems result in reduced health risk and increased compliance with drinking water standards. The drinking water program reports data to OHA Drinking Water Services (DWS) as necessary for program management and to meet federal Environmental Protection Agency Safe Drinking Water Act program requirements.

The Drinking Water Program is in the hands of experienced, professional and hardworking environmental health specialists. The program is well organized and operated, and works cooperatively with state DWS staff to help assure safe drinking water for the 319 active public water systems it supervises.

Fiscal

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

Food, Pool and Lodging Health and Safety

Clackamas 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 facilities include restaurants, mobile food units, temporary food booths at events, public pools and spas, hotels and motels, bed and breakfasts and organizational camps.

Clackamas County staff are doing an excellent job providing environmental health services to the community. Inspection rates for licensed facilities are in compliance for all program areas. Field staff exhibited good communication skills and rapport with operators and employees of the food service facilities during the standardization process and field review. Staff is focusing on critical risk factors that are most associated with foodborne illness.

HIV Prevention

CCPHD's HIV Prevention Program subcontracts with Cascade AIDS Project to provide Sexually Transmitted Infection (STI)/HIV screening services to Oregon's priority populations, including men who have sex with men, persons who present with STIs, and partners of persons living with HIV/AIDS. CCPHD also contracts with Outside In to provide comprehensive harm reduction and syringe services for persons with a lived experience of substance use.

Innovative approaches for implementing HIV prevention strategies utilize community stakeholders, community-based organization staff, disease intervention specialists and clients to identify and inform HIV prevention service decisions to reduce the opportunities for acquiring HIV in Clackamas County's most vulnerable populations. CCPHD is building capacity to provide HIV rapid-test screenings in the county's clinical settings. Staff changes have resulted in the team growing stronger and developing a clearer, more defined vision for what is needed in Clackamas County.

Immunizations

CCPHD is committed to improving immunization rates and increasing access to immunizations. Erica Wright, program coordinator, works with delegate clinics to ensure all program requirements are followed. CCPHD provides immunization clinics for school exclusion and seeks other opportunities to provide immunizations for vulnerable communities. Clackamas County has met all program requirements including as pertains to school law and work with hospitals on Hepatitis B screening and vaccination.

Public Health Emergency Preparedness (PHEP)

CCPHD's PHEP program is staffed at approximately 0.9 FTE. The program continues to excel and sets a standard for the State of Oregon. Program staff have created fantastic county and regional partnerships for incident preparedness and response. Clackamas County played a major role in planning, coordinating and exercising in the Portland Area Capabilities Exercise (PACE 2019), which brought together local, county and state partners to exercise and validate medical countermeasure plans.

Reproductive Health Community Participation and Assurance of Access

CCPHD is ensuring the provision of clinical services within their community and is working with 40 community partners to improve access to reproductive health services. Partners include 211 Info, Cascade AIDS Project, Children's Center, Clackamas Community College, Clackamas County School Based Health Centers, Clackamas Women's Services, DHS, Educate Ya, Families en Accion, Impact NW, Kaiser, Lake Oswego Adult Community Center, Milwaukie Health Center, Oregon School Based Health Center Alliance, Multnomah County Health Department, NAYA, Neighborhood Health Center, Northwest Family Services, Oregon AIDS Education and Training

Centers, OHSU, Outside In, Planned Parenthood, Pregnancy Care Clinic in Canby, Providence Women's Clinic, SE Pregnancy Resource center, The Living Room, Volunteers in Medicine, Wolfpack LLC and Youth Era.

CCPHD developed and implemented a local program plan focused on ensuring access to reproductive health services. Through the development of strategic community relationships, the Clackamas County Sexual and Reproductive Health (SRH) Coalition was created to address access to reproductive health services within Clackamas County.

CCPHD provided data and information about gaps in services and community partners advocated for access to reproductive health services at School Based Health Centers (SBHC), resulting in the Oregon City School Board voting unanimously to begin dispensing contraceptives at the SBHC. This decision addressed equity, removed barriers to health and prioritized health as a cornerstone of education. CCPHD was able to accomplish this change by working across sectors and departments.

Sexually Transmitted Diseases (STD)

CCPHD conducts STD public health services. STD clinical services are conducted by the county-run Federally Qualified Health Center (FQHC), which sits in a separate division from public health and were not included in this review.

Case investigations are conducted by a team consisting of a public health nurse and two disease intervention specialists (DIS), with the public health nurse managing syphilis investigations due to the higher level of complexity and the DIS handling chlamydia and gonorrhea cases. Case investigators can access the county FQHC appointment system to schedule STD treatment for patients and partners.

Clackamas County experiences moderate STD morbidity. The total number of syphilis cases increased 55% between 1/1/2017 and 12/31/2019, from 53 to 82 cases. There was a 29% spike in gonorrhea cases between 2017 and 2018, from 336 to 432 cases, but the 2019 total was just an 8% increase over 2017.

Case investigations are robust, led by public health nurse Mary Horman with disease investigative specialists Katrina Doughty and Jonathan Torres. When attempts to reach patients by phone and letters are unsuccessful, case investigators conduct field visits to locate patients in order to provide partner services. At weekly meetings, the team discusses challenging cases with Health Officer Sarah Present. Over 80% of patients received appropriate treatment for gonorrhea and early syphilis, and most of the priority data metrics also surpass the benchmarks.

CCPHD is pursuing implementation of STD prevention strategies including field treatment and digital partner services, which are aimed at removing barriers to care. Digital partner services involve using technology (e.g., internet sites, mobile apps) to identify partners of patients, collect their locating information, and notify them of a possible exposure or potential risk in order to disrupt disease transmission.

The STD team's engagement with community providers and partner agencies is outstanding, with strong collaboration between the STD team, Cascade AIDS Project, and the county's Sexual and Reproductive Health Coalition. Mary and Katrina have given two trainings to WIC staff promoting STD testing and congenital syphilis prevention strategies. The team has strengthened the relationship with staff at Clackamas Volunteers in Medicine (Founders Clinic) by providing in-person presentations on STD case reporting. CCPHD staff have also met with providers at other community clinics and urgent care centers.

CCPHD finds innovative ways to educate the community. Case investigators send patients who have completed partner services interviews a packet containing STD educational materials, health department contact information, and condoms. Jonathan Torres, sometimes in partnership with Cascade AIDS Project staff, visits community sites including the Clackamas Service Center, and provides STD prevention supplies to Operation Nightwatch, which serves vulnerable populations.

Lastly, Clackamas County does an excellent job disseminating information about the ongoing STD epidemic. As part of the Portland metro area's call to action to reduce STD rates, Clackamas County issued a Public Health Impact report in August 2018 highlighting the skyrocketing rates of chlamydia, gonorrhea, and syphilis. Additionally, the STD team was featured in an Oregon Public Broadcasting article/recording that same month about surging STD rates and the health department's partner services efforts.

Tobacco Prevention and Education Program

Clackamas County's Tobacco Prevention and Education Program (TPEP) takes a comprehensive approach to tobacco prevention. The program facilitates community partnerships, creates tobacco-free environments, counters pro-tobacco influences, promotes quitting among adults and youth, and works to reduce the social and economic burden of tobacco-related chronic diseases. The program educates community partners and decision-makers on the tobacco retail environment and fulfills local duties and activities related to enforcing the Oregon Indoor Clean Air Act.

The TPEP program has strong multisector partnerships, utilizes data and promotes evidence-based policy, systems and environmental changes to improve the health of

Clackamas County and protect adults and youth from the harms of tobacco. Clackamas County TPEP provides information, resources and technical assistance to community leaders and policymakers on reducing the burden of tobacco on families and employers through advancing tobacco control strategies such as creating tobacco-free environments. For example, West Linn passed a tobacco-free properties policy, protecting workers and the public from being exposed to secondhand smoke and promoting a healthy and vibrant community.

Clackamas County TPEP has demonstrated the ability to build partnerships, educate stakeholders and decision makers about tobacco prevention efforts, and use data to drive strategy. This has resulted in the introduction and advancement of county-wide tobacco retail licensure as a key intervention under consideration to reduce youth access to tobacco and improve the health of the community.

Tuberculosis (TB)

With three to five TB cases per year, Clackamas County typically has a higher incidence of TB compared to many LPHAs in Oregon. CCPHD staff and the Health Officer have a high level of proficiency in many aspects of TB management including care of complex TB cases with comorbidities and large worksite contact investigations. The program is professional and organized. Staff go out of their way to understand the patient's perspective in order to provide the best possible individualized care.

The communicable disease team works hard to ensure patients are well cared for and is diligent about locating and evaluating TB contacts, with high rates of contacts evaluation and latent tuberculosis infection treatment. That same diligence applies to B waiver immigrant follow-up and evaluation. 86-100% of B waiver immigrants were evaluated within 120 days of notification, representing a huge improvement from past years.

Vital Records

According to preliminary data, Clackamas County was the county of birth for 4,205 infants and the registered place of death for 3,380 individuals in 2019. 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 CCPHD Office of Vital Records consistently provides excellent customer service to their customers and partners throughout the community. Staff members demonstrate a good understanding of the operations, policies and procedures required of their roles.

Staff members provide services efficiently and in a timely manner to their county partners and community members.

The Clackamas County Office of Vital Records has nine staff members, allowing sufficient coverage for vacations, illness and other times where an office with few staff members might struggle.

Women, Infants and 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 premier 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>

CCPHD's innovative outreach serves as a model for other agencies. Clackamas County's WIC taskforce has brought together engaged and invested partners to work collaboratively to increase WIC enrollment. CCPHD uses a data-driven caseload strategy work plan that is well designed with smart objectives to help guide outreach. The program has been creative and varied in its efforts to improve outreach including development of a partner myth busters document, which has also been used by the state outreach coordinator and other agencies; regular, planned outreach events within the community; and investment in WIC staff working on outreach. CCPHD has also employed creative strategies to improve WIC access including offering an online WIC sign up form, utilizing Prevention Pays to enhance communication with participants, offering walk-ins, and working with public health home visit nurses to do WIC certifications.

WIC Farm Direct Nutrition Program (FDNP)

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

Program strengths:

- Clackamas County WIC staff do an excellent job distributing FDNP checks to WIC participants with 99% of their allocation distributed in 2019.

- Based on data available at the time of the review, Clackamas County WIC participants purchased \$37,864 in fresh produce from local farmers in 2019.

WIC Breastfeeding Peer Counseling (BFPC)

The purpose of BFPC services is to increase breastfeeding duration and exclusivity rates by providing basic breastfeeding information, encouragement and appropriate referral at specific intervals to pregnant and breastfeeding women who are participants through a Peer Counselor from the local community.

Program strengths:

- The Clackamas BFPC program does an excellent job of having regular contact with peer counseling participants.
- Peer counselors use phone and text services to enhance contact with participants.
- Documentation of contacts was thorough and complete.
- Staff appropriately provided referrals to more advanced breastfeeding experts when needed.

QUALITY ASSURANCE RECOMMENDATIONS

Administrative

1. Continue to invest in strengthening foundational public health capabilities, building on the innovative work being done through CCPHD's Center for Public Health Advancement.

Communicable Disease

1. Recommend submitting outbreak reports within 30 business days from the end of an outbreak.

Babies First! And Perinatal

1. Recommend ensuring the Oregon Mothers Care program is aware of nurse home visiting and sends referrals, as appropriate.
2. Recommend more consistently including that the referral outcome is communicated back to referral source.
3. Recommend the nursing care plan includes plan for next visit clearly documented for all encounters.

4. Recommend the nursing care plan includes response to interventions clearly documented for all encounters.

STD

1. The state recommends that public health staff implement a system for reviewing gonorrhea and syphilis cases on a regular basis to ensure priority fields in the state data system are completed (race, ethnicity, gender of sex partners, HIV status/date of most recent test, pregnancy status), appropriate treatment is prescribed, and any necessary provider education is provided in a timely manner.



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January 14, 2021

The Honorable Tootie Smith, Chair
Clackamas County Board of County Commissioners
2051 Kaen Rd.
Oregon City, OR 97045

Dear Chair Smith:

The triennial onsite agency review of Clackamas County Public Health Division was conducted January 6 through January 30, 2020. 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 the Board of County Commissioners 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: Sonya Fischer, Commissioner
Paul Savas, Commissioner
Mark Shull, Commissioner
Martha Schrader, Commissioner
Gary Schmidt, Clackamas County Administrator
Richard Swift, Health, Housing and Human Services Director
Philip Mason-Joyner, Public Health Director and Local Public Health Administrator
Julie Aalbers, Public Health Assistant Director