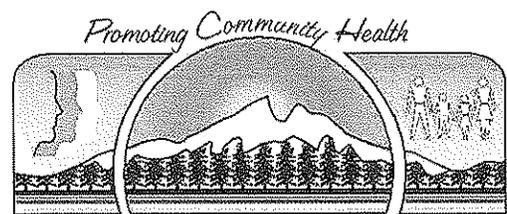


Klamath County Public Health



KLAMATH COUNTY *department of* PUBLIC HEALTH

Annual Plan 2013-2014

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Executive Summary

This updated Annual Plan for 2013-2014 includes updates in the following sections: an assessment of health indicators and population demographics, a description of local public health service delivery and the level of service provided, a narrative of our unmet needs, and a checklist of compliance issues.

Klamath County Department of Public Health (KCPH) is a local health department that works to promote and protect public health and to prevent health issues. Our staff is committed to achieving the Department's mission of "Working together to promote healthy choices that improve the quality of life and well-being of our communities."

KCPH is responsible for providing the five essential services mandated by state statute (ORS 431.416) and rule (OAR Chapter 333, Division 14) primarily through federal grant dollars passed through by the Oregon Public Health Services Division, and client and licensee fees. In addition, we receive less than \$1.00 per capita from the State of Oregon. With the loss of Secure Rural Schools (Timber Revenue) money, the department receives less than 10% of its budget from the Klamath County General Fund. The geographic location among other demographics present challenges in providing public health services. Many residents have limited access to health resources due to long travel distances, transportation, and financial barriers. Klamath County continues to be ranked among the bottom in both health indicators and health outcomes. The worsening health status of the county has been compounded by an aging population, more young poor families, poor economy, lessened opportunities for employment and education, and a growing demand on limited local resources.

Despite the pervasive geographic, demographic, and financial challenges to achieving our vision of healthy people in healthy communities, KCPH provides excellent services for the residents of Klamath County. These services provided by KCPH continue to fulfill the Ten Essential Services of Public Health.

KCPH seeks efficient and effective community work by collaborating with community partners to provide the essential services. These community partnerships are critical as, health is at the forefront of nearly every conversation. KCPH is proactively navigating through a changing health system, working to ensure that public health needs are met. KCPH remains informed on the establishment of the local CCO and supportive of progress in its development. Additionally, this past year KCPH partnered with our local hospital, FQHC, and managed care organization to complete a community health assessment.

The completed health assessment serves as a stepping stone as we continue our progress toward national accreditation. KCPH plans to continue accreditation work in the upcoming year.

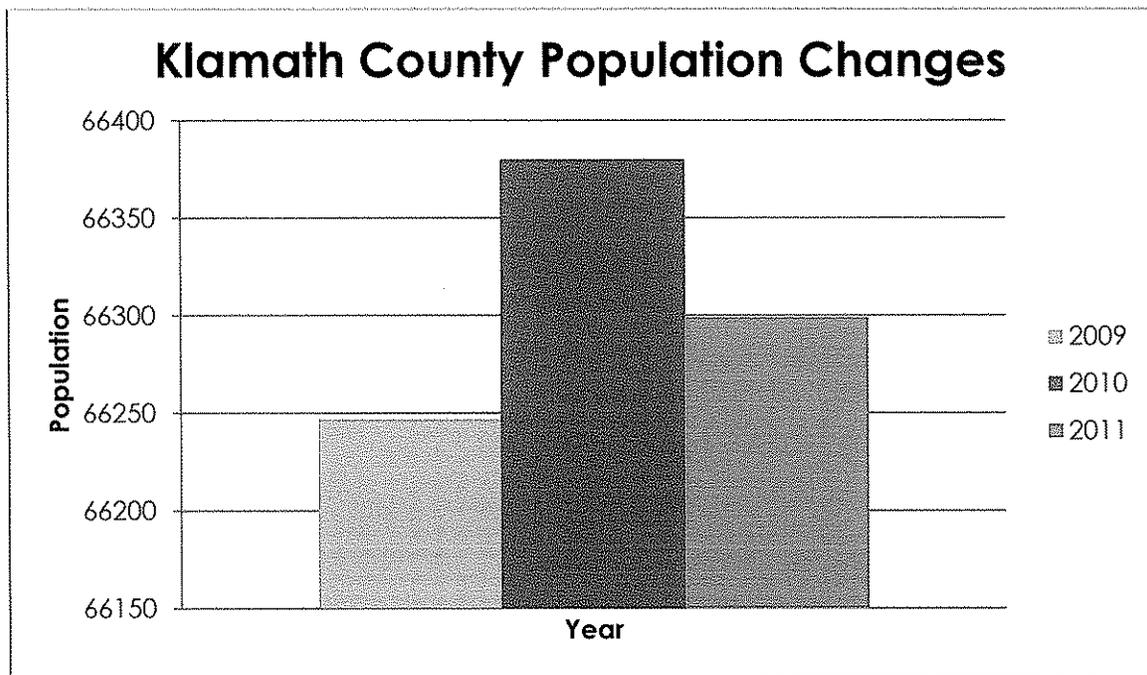
Assessment

In years past, KCPH has lacked the financial resources and staffing capacity to conduct a comprehensive community health assessment. This year, KCPH was presented with new funding opportunities and community partnership opportunities. Public health accreditation and health system transformation that have enabled KCPH to initiate a community health assessment process which will provide the basis for the CHA's required of our local CCO, nonprofit medical center system federally qualified health center. KCPH and community partners are currently employing the MAPP process and working to complete a comprehensive assessment of the health and well-being of our community.

The following health assessments have been completed and are available upon request.

- 2008: Tobacco Related and other Chronic Disease Assessment
- 2011: Klamath County Breastfeeding Needs Assessment

In 2011, we observed a decrease in the population of Klamath County due to the dislocations created by the job losses of the "Great Recession". The majority of Klamath County residents are white (85.9%).



Source: United States Census

	Klamath County	Error Margin	National Benchmark*	Oregon	Rank (of 33)
Health Outcomes					31
Mortality					28
Premature death	8,545	7,747-9,343	5,466	6,343	
Morbidity					33
Poor or fair health	18%	15-21%	10%	14%	
Poor physical health days	4.5	3.7-5.2	2.6	3.7	
Poor mental health days	3.5	2.9-4.2	2.3	3.3	
Low birthweight	7.60%	6.9-8.3%	6.00%	6.00%	
Health Factors					21
Health Behaviors					27
Adult smoking	24%	20-29%	14%	18%	
Adult obesity	27%	22-31%	25%	26%	
Physical inactivity	21%	18-25%	21%	18%	
Excessive drinking	13%	10-17%	8%	16%	
Motor vehicle crash death rate	23	19-28	12	14	
Sexually transmitted infections	179		84	303	
Teen birth rate	48	45-52	22	35	
Clinical Care					9
Uninsured	23%	21-25%	11%	19%	
Primary care physicians	842:01:00		631:01:00	984:01:00	
Preventable hospital stays	37	33-41	49	42	
Diabetic screening	80%	74-87%	89%	85%	
Mammography screening	68%	61-74%	74%	68%	
Social & Economic Factors					24
High school graduation	63%			66%	
Some college	55%	51-60%	68%	64%	
Unemployment	13.40%		5.40%	10.80%	
Children in poverty	26%	19-33%	13%	22%	
Inadequate social support	13%	11-17%	14%	16%	
Children in single-parent households	32%	27-37%	20%	30%	
Violent crime rate	265		73	271	
Physical Environment					18
Air pollution-particulate matter days	3		0	12	
Air pollution-ozone days	0		0	1	
Access to recreational facilities	9		16	12	
Limited access to healthy foods	8%		0%	6%	
Fast food restaurants	45%		25%	43%	

* 90th percentile, i.e., only 10% are better

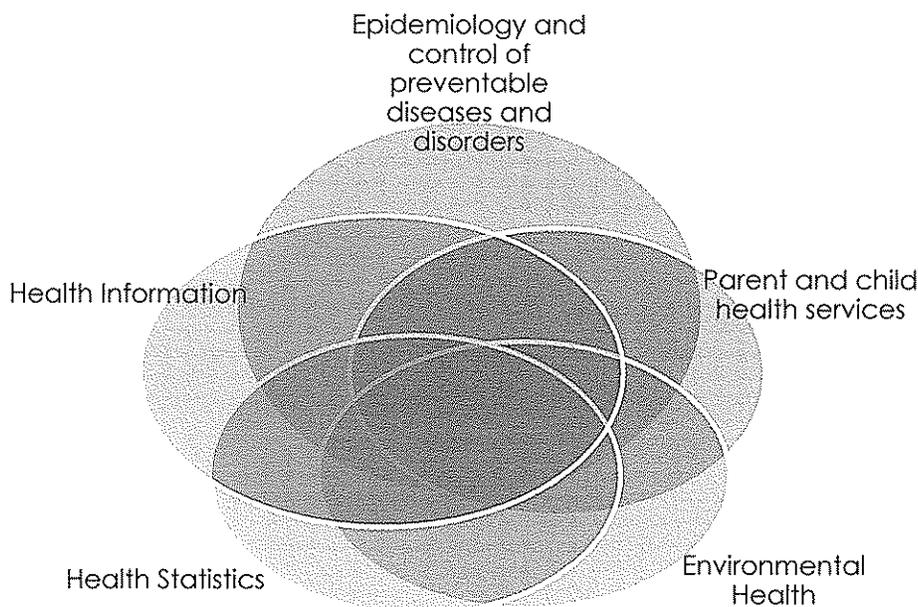
Note: Blank values reflect unreliable or missing data

Source: 2012 County Health rankings

Adequacy of Public Health Services

During fiscal Year 2012-2013, KCPH received diminished dedicated County General Funds to support general operations, as previously provided with Alcohol and Tobacco tax revenue. This was the first time since 2007 that the Department has not received unrestricted monetary support from Klamath County. The reduction of support was solely due to the impact of the loss of timber revenue, which has historically provided the bulk of non-user funding for County resources. Despite inadequate funding, KCPH strives to provide quality services for residents, and serves as a safety net for public health services.

KCPH provides the five essential services mandated by ORS 431.416 and OAR Chapter 33, Division 14.



Assurance of Five Basic Services

Epidemiology and control of preventable diseases and disorders

- A. Communicable Disease:** Nurses work to investigate diseases that are reportable by law to identify source and prevent spread. The KCPH continues to experience an increase in CD reports and investigations, in part due to the increase in the reportable events. We expect to request increased County Funding to meet the demand above and beyond the levels the State Funding allows us to undertake. There are not sufficient

funds for preventative activities that address the high level of need in Klamath County.

- B. HIV Prevention:** Since the loss of funding for HIV testing, the Department has had to limit the number of no charge tests available to the public. We are no longer able to provide no cost "peace of mind" counseling and testing. In 2011, 23 people were living with HIV in Klamath County.
- C. Immunization:** KCPH provides immunizations for the public against preventable diseases. Childhood and adult vaccinations are given in accordance to regulation and need. We expect to see in 2013-14 an increase in the number of County children fully immunized at age 2. The most recent State report on childhood immunizations ranks Klamath County as having the 4th best immunization rate among Oregon counties for this age group, at 79% vs. the state average rate of 73%.
- D. Sexually Transmitted Infections:** Clients with signs or symptoms are seen promptly by a trained nurse or nurse practitioner. Staff report STI's and ensure treatment and partner treatment. Chlamydia remains the most common STI in Klamath County. Klamath has the 10th highest rate of Chlamydia among other counties. The department lacks the funding necessary to outreach to high risk populations with effective preventative activities.
- E. Tuberculosis Program:** This underfunded program provides treatment and case management to persons with tuberculosis. KCPH experienced its first case of active TB in a resident in several years in 2012, whose drug resistant tuberculosis is requiring time intensive DOT intervention and case management services. The Department is also seeing an "uptick" in physician reports of suspected cases, and anticipates follow up on more cases of "resistant TB" reports in 2013-14.

Parent and child health services

- A. Babies First!:** Public Health Nurses identify infants born at risk for development delay and provide services to these families according to program guidelines. Due to staffing turnover, services provided in this program have greatly diminished over past year's levels, but those services are expected to be restored according to plan.
- B. CaCoon:** In response to identified high need in Klamath County, the Department provides services to children with special health needs per program guidelines, and is a priority MCH intervention for the Department.

- C. Teen Pregnancy:** Our Clinic will continue to reserves late afternoons for teens in order to ensure appointment availability that matches with school schedules. Public Health Nurses provide a full range of family planning services and education to teens.
- D. Women's Health:** Public Health Nurses provide full exams to women, including breast and pelvic exams, Pap smears, and STI screening. Nurses also provide information and education on family planning and STIs. Our annual Family Planning plan is attached as Appendix A.
- E. Women, Infant, and Children (WIC):** Nutritional health services for children from birth to five years of age, pregnant women, and postpartum women are provided in this flagship program for the Dept. The Department was dismayed to discover a rapid decline in WIC participation in 2012, in the face of great need in the County. The Program has identified and implemented an array of innovations to restore participation rates to 98% or higher in 2013-14, in spite of declining birth rates.

Environmental health

- A. Air Quality:** Achieving and maintaining healthy air quality continues to be the most critical and visible challenge that KCPH has been tasked to achieve, for both public health and economic reasons. KCPH issues daily air quality advisories and conducts both educational and enforcement activities during the air quality season. Specialists, technicians, and health educators work to ensure awareness of and compliance with local ordinances in order to help Klamath County reach attainment with EPA requirements for air quality standards adequate to protect the public health. Excluding unique (1 in 20 years) weather events we expect to secure the community support necessary to be in compliance.
- B. Drinking Water:** Registered Environmental Health Specialists work to ensure safe drinking water from public sources for residents. Specialists are responsible for monitoring over 140 EPA Regulated Public Water Supplies which must meet EPA Public Water Supply Regulations.
- C. Licensed Facilities:** In 2011 Specialists licensed and inspected a total of 145 traveler's accommodations, organizational camps, and swimming pools and spas, as required. They also licensed and inspected 227 facilities which provide food and beverage to the public. In addition to providing oversight for 373 temporary public food service events, the Department

also recorded the issuance of over 1,000 food handler cards in 2011. A decrease in staffing in 2012 has increased the challenge of ensuring "food facilities" compliance with the Revised Food Rules and adopted in the same year. In spite of staffing challenges, EH Staff developed and implemented an outstanding check list reflecting the different categories of priority and core items for each public food facility to improve their understanding of and compliance with the new rules.

Health statistics

- A. Birth:** Klamath County registry and issuance of birth certificates:
KCPH estimates an issuance for a slight decline in the number of recorded births in 13-14 as were averaged between 2008-2011, approximately 800.

- B. Death:** Electronic death registry and death certificate issuance:
KCPH estimates an issuance for the same levels of recorded deaths in 13-14 as were recorded in prior average years, approximately 700.

Information and referral

Staff provides health information and referral to over 6,000 residents through its internal programs. The Department also expects to field over 1700 requests annually from residents calling and/or visiting the Department for health related inquiries. In addition to information and referral services to the public during business hours, KCPH employs health educators & Health Promotion Specialists who participated in educational interactions with residents. These staff provide information and education about the My Future My Choice program, Tobacco Prevention and Education Program, chronic disease prevention, Safe Routes to School program, hygiene, family planning services, and other available services. The availability of new MPH graduates in Oregon has enabled us to recruit staff with highly respected advanced epidemiological and analytical skills

Adequacy of Other Services

Accreditation and Health Transformation

KCPH continues to pursue public health accreditation in 2013-14. KCPH has initiated work on a comprehensive Community Health Assessment with stakeholders, key partners, and leaders in the community. This assessment will not only be used to meet our accreditation requirements, but will meet be tailored to meet the requirements for the CCO, FQHC, and our local non-profit hospital.

This Community Health Assessment will be used as a platform for developing a Community Health Improvement Plan overview in 2013-14. This baseline work will reflect a pioneering community collaboration, and will lay the ground work for both internal and external strategic plans.

School Based Health Center

The school based health center in Gilchrist continues to operate, providing the comprehensive care to K-12 children and their preschool siblings. Negotiations are currently underway to meet this small community's need and request for a health center to provide community based primary care. Lack of adequate funding for SBHC operations is providing impetus to explore other operation options in 2013-2014.

Oral Health

Dental health continues to be a major issue in Klamath County. The lack of affordable dental care access is still being identified as an unmet community need for tertiary or surgical services. We are acutely aware of the reality of Schools of Dentistry not having the capacity to produce enough most advanced practitioners to meet "end stage" needs. In response, Klamath continues to promote and maintain its pioneering work in partnering with dental managed care to pilot early, effective oral health interventions with pregnant women and their under 2 years of age to prevent the ravages of the infectious disease responsible for dental decay. A priority intervention in 2013-14 will be securing oral health treatment sources in "North County" in 13-14.

Health Promotion/Disease and Injury Prevention (HPDP)

The HPDP division focuses putting healthy options in reach for all residents of Klamath County. HPDP staff work to use smart policy that supports an environment that provides access to healthy options. Our TPEP program continues to provide rewarding results, even with diminished funding. In 2013-14 the department anticipates continued support for and expansion of policies which support improved community health status. The Department was unsuccessful in its' bid to continue the accomplishments we achieved with the prototype resources provided by the limited and very competitive Community Health grant funding stream. The Department joins others in expressing disappointment and concern about the consequences of Oregon's public health system's failure to find resources to fund all LPH's in Oregon to put in place the practices and policies singularly proven to promote the health status of the community.

Action Plan

Epidemiology and control of preventable diseases and disorders

See 2013-14 plans noted under assessment.

Environmental health

Even though our Environmental Health programs “enjoy” high level visibility in the community, the Department entered 2012 anticipating a 25% staffing reduction. Because of staff dedication and diligence, the Environmental Health program was able to absorb this FTE reduction through fighter scheduling, and is slated to repeat its 100% inspections completed performance of 2011. (see additional plans noted under assessment section for Environmental Health)

Health statistics

The Department expects to negotiate and resolve its issues of outstanding balances on the part of one local funeral home with the expected result in maintaining the same outstanding level and quality of service in 2013-14 that traditionally we have been providing to local residents. We look forward to the opportunity of engaging in enhanced, in person local or regional Vital Records training by State staff.

Information and referral

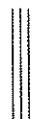
No Update

Public health emergency preparedness

Under the direction of Program Element 12, staff works closely with the Emergency Management Department and other emergency services in the community to build community preparedness and resilience. This year, an assessment of the differences between prescribed CDC Capabilities organized by function and current local capabilities using a state provided evaluation tool will be conducted. In 2013-14 the Department will modify its PHEP plan based on the results of this assessment.

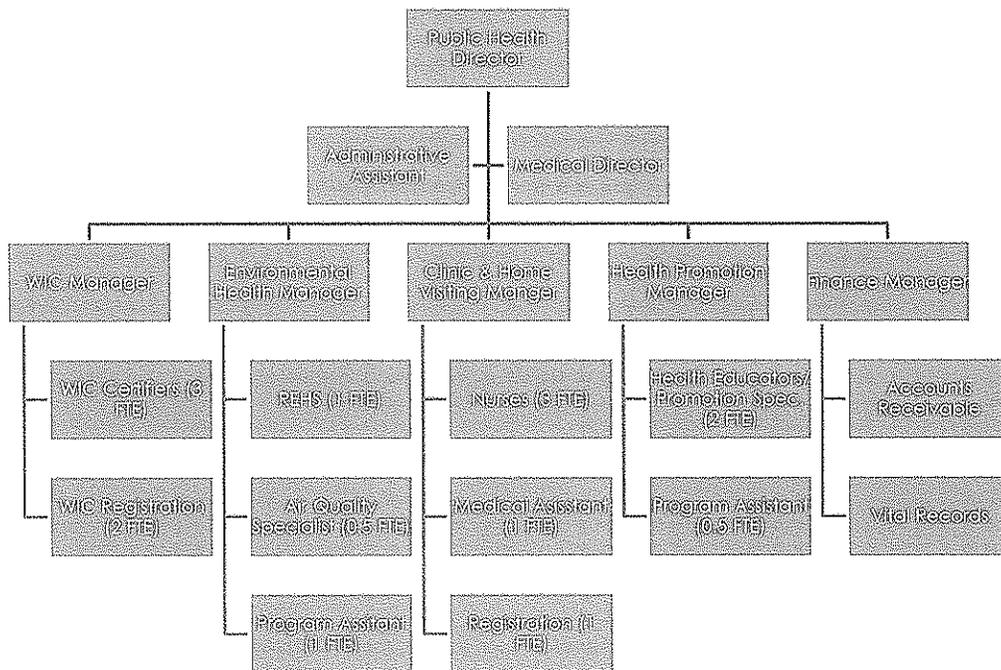
Other issues

Specified action plans for 14-14 will be provided to the State as they become contractually due for the purposes of posting to the Klamath County Health Department webpage as Plan Addendum updates.





Additional Requirements



Unmet Needs

No changes, but additions.

As we continue to manage an active tuberculosis case this year, we are reminded that tuberculosis funding continues to be remarkably inadequate.

At the time of this writing, Klamath County lacks an operational CCO.

KCPH lacks funding to replace the air polluting woodstoves that are hindering our ability to reach attainment with the EPA standards.

KCPH now receives no general fund dollars from Klamath County.

Budget

Review our most recent [Financial Assistance Contract](#).

Our most recent budget is available online at:

http://www.klamathcounty.org/depts/finance/Downloads/KC/Budget/2012_Budget/pdfs/E%20440%20Public%20Health.pdf

For additional inquiries, please contact:

Jessica Dale, Finance Manager
jdale@co.klamath.or.us | 541-882-8846



LHD Survey

Health Department Personnel Qualifications

Local health department Health Administrator minimum qualifications:

The Administrator must have a Bachelor degree plus graduate courses (or equivalents) that align with those recommended by the Council on Education for Public Health. These are: Biostatistics, Epidemiology, Environmental health sciences, Health services administration, and Social and behavioral sciences relevant to public health problems. The Administrator must demonstrate at least 3 years of increasing responsibility and experience in public health or a related field.

Answer the following questions:

Administrator name: **Marilynn Sutherland**

Does the Administrator have a Bachelor degree? Yes No

Does the Administrator have at least 3 years' experience in public health or a related field? Yes No

Has the Administrator taken a graduate level course in biostatistics? Yes No

Has the Administrator taken a graduate level course in epidemiology? Yes No

Has the Administrator taken a graduate level course in environmental health? Yes No

Has the Administrator taken a graduate level course in health services administration? Yes No

Has the Administrator taken a graduate level course in social and behavioral sciences relevant to public health problems? Yes No

Yes No The local health department Health Administrator meets minimum qualifications: Partially

If the answer is "No", submit an attachment that describes your plan to meet the minimum qualifications.

Yes No The local health department Supervising Public Health Nurse meets minimum qualifications:

Licensure as a registered nurse in the State of Oregon, progressively responsible experience in a public health agency;

AND

Baccalaureate degree in nursing, with preference for a Master's degree in nursing, public health or public administration or related field, with progressively responsible experience in a public health agency.

If the answer is "No", submit an attachment that describes your plan to meet the minimum qualifications.

Yes No The local health department Environmental Health Supervisor meets minimum qualifications:

Registration as a sanitarian in the State of Oregon, pursuant to ORS 700.030, with progressively responsible experience in a public health agency

OR

a Master's degree in an environmental science, public health, public administration or related field with two years progressively responsible experience in a public health agency.

If the answer is "No", submit an attachment that describes your plan to meet the minimum qualifications.

Yes No The local health department Health Officer meets minimum qualifications:

Licensed in the State of Oregon as M.D. or D.O. Two years of practice as licensed physician (two years after internship and/or residency). Training and/or experience in epidemiology and public health.

If the answer is "No", submit an attachment that describes your plan to meet the minimum qualifications.

The local public health authority is submitting the Annual Plan pursuant to ORS 431.385, and assures that the activities defined in ORS 431.375-431.385 and ORS 431.416, are performed.

Shaunna Sutkula *Klamath* *06/07/13*
 Local Public Health Authority County Date



TITLE X PROGRAM SERVICES AND OPERATIONS

Please complete for program services supported by your Title X grant award.

Agency: Klamath County Public Health Department Completed by: Kathy DeVoss R.N. Jessica Dale
 Fiscal Budget Manager

If your agency sites provide the same services, one form is sufficient. If different services are provided at different sites, please copy this form and fill out one per site.

1. SERVICES PROVIDED: THE PUBLICATION "PROGRAM GUIDELINES FOR PROJECT GRANTS FOR FAMILY PLANNING SERVICES" IDENTIFIES REQUIRED SERVICES FOR TITLE X PROJECT SITES. SERVICE CATEGORIES SHOWN BELOW ARE FROM SECTION 8 OF THE GUIDELINES.

Please review the list and identify any services required for Title X projects that are offered by referral only (not directly by your agency on site).

	Services offered by referral only
Client Education	
Counseling	
History, Physical Assessment, & Laboratory Testing	
Fertility Regulation	X
Infertility Services (Level 1)	
Pregnancy Diagnosis & Counseling	
Adolescent Services	
Identification of Estrogen-Exposed Offspring	X

2. WHICH OF THE FOLLOWING RELATED SERVICES ARE PROVIDED AT YOUR CLINIC SITE(S)?

	On-Site	By Referral	Not At All
STD Examination and Treatment	X		
HIV Counseling & Testing	X		
Preconception Counseling	X		
Postpartum Examinations		Y	
Female Sterilization		X	
Vasectomy		X	
Colposcopy		X	
Endometrial Biopsy		X	
Cryotherapy	X		
Minor Gynecological Problems		X	
Primary Care		X	
Genetic Information and Referral		X	
Cervical Biopsy		X	

3. PLEASE INDICATE WHICH OF THE FOLLOWING BIRTH CONTROL METHODS ARE PROVIDED AT YOUR CLINIC SITE(S).

- | | |
|--|---|
| <input checked="" type="checkbox"/> Oral Contraceptives | <input checked="" type="checkbox"/> Diaphragm |
| <input checked="" type="checkbox"/> Progestin-only Pill | <input type="checkbox"/> Cervical Cap |
| <input checked="" type="checkbox"/> Emergency Contraception (immediate need) | <input checked="" type="checkbox"/> Male Condom |
| <input checked="" type="checkbox"/> Emergency Contraception (future need) | <input checked="" type="checkbox"/> Female Condom |
| <input checked="" type="checkbox"/> Depo Provera | <input checked="" type="checkbox"/> Vaginal Spermicides |
| <input checked="" type="checkbox"/> IUD Insertion (Paragard) | <input checked="" type="checkbox"/> Transdermal Patch |
| <input checked="" type="checkbox"/> IUS Insertion (Mirena) | <input checked="" type="checkbox"/> Vaginal Ring |
| <input checked="" type="checkbox"/> IUD Removal | <input checked="" type="checkbox"/> Abstinence Counseling |
| <input checked="" type="checkbox"/> IUS Removal | <input type="checkbox"/> Nexplanon |
| <input checked="" type="checkbox"/> NFP/Fertility Awareness | |

4. PLEASE IDENTIFY THE LEVEL OF AGENCY STAFF RESOURCES DEDICATED TO THE FAMILY PLANNING PROGRAM (BY FTE)

Medical Care Services Staff	Total	Bilingual	Language
Physicians	_____ FTE	_____ FTE	_____
PAs/NPs/CNMs	<u>.2</u> FTE	_____ FTE	_____
RNs	<u>1.5</u> FTE	_____ FTE	_____
Clinic Assistants	<u>.5</u> FTE	_____ FTE	_____
Management/Admin. Staff	_____ FTE	_____ FTE	_____
Management Staff	_____ FTE	<u>.5</u> FTE	<u>Spanish</u>
Administrative Support	_____ FTE	<u>.5</u> FTE	<u>Spanish</u>
Fiscal Staff	<u>.25</u> FTE	_____ FTE	_____
Other Professional Staff			
Health Educator	_____ FTE	_____ FTE	_____
Other <u>Office Assistant</u>	<u>.6</u> FTE	_____ FTE	_____

5. CERVICAL CYTOLOGY / PAP SMEAR INFORMATION

Name of cervical cytology lab: Labcorp Cost per test: \$16.75
 Current cervical cytology turn-around time: 2 to 3 days

The annual number of cervical cytology tests with results of: (1) ASC or higher and (2) HSIL or higher, currently must be collected for FPAR. Please provide the following:

INSTRUCTIONS:

1. Record totals for the time period of **12/01/2011 - 11/30/2012**.
2. Totals should reflect cervical Pap tests conducted at your **Title X clinic sites only**. Do not count cervical cytology tests performed at FPEP-only sites.

Number of cervical cytology tests with a result of ASC or higher: 37
 Number of cervical cytology tests with a result of HSIL or higher: 2

6. INFORMATION & EDUCATION (I&E) ADVISORY COMMITTEE

Does your family planning agency have an I & E Advisory Committee of 5 to 9 members that reviews and approves materials? Yes/ No Are the reviews documented in writing? Yes/No

7. HEALTHY EATING / PHYSICAL ACTIVITY

Does your clinic provide healthy eating and/or physical activity intervention or counseling? Yes/ No
 If yes, have you used tools or resources from either of the following:

The *Healthy Weight Management is for Everyone* guide Yes/No
 The healthy weight management web on-line toolkit Yes/No

8. COMMUNITY PARTICIPATION

Please indicate which of the following activities your program has participated within the last year:

Community Participation	Community Outreach and Education	Project Promotion
<input checked="" type="checkbox"/> Community participation committee meeting ___ Community: ___ Forum ___ Survey ___ Round tables ___ Task Forces ___ Review ___ Suggestion Box Other: _____	<input checked="" type="checkbox"/> Health fair ___ Rodeo ___ Teen events ___ Community presentations ___ County fair ___ Community education ___ School education ___ Neighborhood meeting ___ Homeless shelter ___ Drug and alcohol programs ___ Domestic violence programs Other: <u>My Future my choice</u>	<input checked="" type="checkbox"/> Phone book ___ Newspaper <input checked="" type="checkbox"/> Web ___ Theater <input checked="" type="checkbox"/> Brochures ___ Flyers/posters ___ TV ads ___ Outdoor advertising <input checked="" type="checkbox"/> Facebook ___ Texting ___ Clinic open house ___ Annual FP Report/data Other: _____

Thank you for providing us with this information!

2013 FAMILY PLANNING PROGRAM TRAINING NEEDS ASSESSMENT

Based on feedback from your clinic staff and your own preferences, please select the **TOP 5** of the following 11 training topics by circling the numbers next to your choices.

<u>Clinical Services</u>	<u>Education and Counseling</u>	<u>Staff Development and Program Management</u>
<p>1. STD Update</p> <p>2. Contraceptive Update</p> <p>Other: _____</p>	<p>3. Contraceptive Methods Counseling</p> <p>4. Reproductive Life Plan Counseling</p> <p>5. Client-Centered Counseling and Behavior Change</p> <p>6. Teen Outreach and Reproductive Health Services</p> <p>7. Engaging and Promoting Community Involvement</p> <p>Other: _____</p>	<p>8. QI Tools and Resources</p> <p>9. Billing and Fee Collection Training</p> <p>10. Working Collaboratively with Community Partners</p> <p>11. Credentialing</p> <p>Other: _____</p>

We hope to facilitate several special training 2013 events based on agencies' interest level. Please indicate your number of staff needing training in the following areas and who would likely be able to attend a training. Enrollment is limited for each training event.

Topic	Number of Staff
Male Exam for RN/NPs	1
Female Exam for RN/NPs	
Basic STD Laboratory Skills for RN/NPs	
IUD / IUS Insertion/Removal	
Nexplanon Insertion/Removal	
Clinical Breast Exams for RNs/NPs	

If you are interested in hosting a training event at your agency, please provide your name and agency: _____

If you have any questions or comments about this questionnaire, please contact Judy Andreasen at (971) 673-0355.

Thank you for completing this needs assessment!

Reproductive Health (RH) Coordinators' Meeting Survey

Please take a moment to fill out this brief survey to assist us in planning the 2013 Fall RH Coordinators' Meeting.

1. In the past, we've been asked if additional staff could attend the RH Coordinators' Meeting. In addition to the RH Coordinator, would other staff from your agency be interested in attending the meeting? We realize there may be many factors involved with making this decision, but ask for your best guess for this next meeting. (Please note that expenses for additional staff attending may not be fully covered by the RH Program.)

YES - If Yes, how many additional staff? _____

NO

Comments:

[Click here to enter text.](#)

2. Please indicate a preference on where you would like to see the next RH Coordinators' Meeting held:

Portland

Eugene Area

Salem Area

Central Oregon

Thank you!

Family Planning Program - Contact Information Update

January 2012

Please review the information below and make corrections, additions, or deletions as needed.

Agency address, phone, and fax

Klamath County Health Department
 403 Pine Street
 Klamath Falls OR 97601

Phone: (541) 882-8846 Fax: (541) 850-5392

Agency Staff Roles (check all roles that apply; add or remove contacts and correct email addresses as needed)

Name	Administrator / Director	FP Coordinator	Nursing Supervisor	Billing Contact	Fiscal Coordinator	Ahlers Data Contact	Outreach Contact	Update Newsletter Recipient	Email address
Kathy Devoss	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	kdevoss@co.klamath.or.us
Tina Johnson Tina Lingenfelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	johnsent@cehin.org Lingenfelter@co.klamath.or.us
Monna Miller Jessica Dale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	mmiller@ce.klamath.or.us JDale@co.klamath.or.us
Zaera Raithe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	zraithe@co.klamath.or.us
Marilyn Sutherland	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	msutherland@co.klamath.or.us

Note: Administrators, Family Planning Coordinators, and Billing Contacts automatically receive the Update Newsletter and it is always available online at: <http://www.oregon.gov/DHS/ph/fp/updates.shtml>

Clinic Directory

Klamath County Health Department

Agency number:

2452

Service area: Klamath Co.

<i>Clinic Name</i>	<i>Site Number</i>	<i>Address</i>	<i>Office Hours</i>	<i>Clinic Hours</i>
Klamath Falls Clinic	7218	403 Pine St. Klamath Falls	8:00-5:00	M-F 8-5 Thurs 8-5 8-5 FP Appts. Wed 1-5 FP Appts.