

**AGENCY REVIEW**

**CLATSOP COUNTY PUBLIC HEALTH**

**December 2 - 7, 2013  
Prepared by  
Oregon Health Authority  
Public Health Division**

**Laurie Smith, RN, MPH  
Public Health Nursing Consultant**

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**COMMUNITY LIAISON**

**ADMINISTRATION**

The LPHA must assure fees for public health services are reasonably calculated not to exceed the cost of the services performed. An updated cost analysis is required according to fiscal review. Date of most recent cost analysis is 2010. [ORS 431.415\(3\)](#)  
*Repeat finding from 2007 and 2010.*

4/30/14

A written policy and procedure is needed for HIPAA training (new employee and ongoing annual training). *Repeat finding from 2007 and 2010.*

3/28/14

**For more detailed information, please see the completed program review tool in section 2.**

**REVIEWER:** Laurie Smith

**RESPONDENT:** Brian Mahoney,  
Sheri Salber, Bryan Hall

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**PERINATAL & BABIES FIRST!**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed program review tools in sections 3 and 12 .**

**REVIEWER:** Fran Goodrich

**RESPONDENTS:** Patsty Lee Horecny,  
Brian Mahoney

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**ACUTE AND COMMUNICABLE DISEASE PROGRAM**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed program review tool in section 5.**

**REVIEWER:** Theresa Watts

**RESPONDENT:** Sheri Salber

<b>CLATSOP COUNTY PUBLIC HEALTH</b>	
<b>COMPLIANCE FINDINGS</b>	<b>TIMELINE FOR CHANGE</b>
<p><b>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR</b></p> <p><b>COMMUNITY LIAISON</b></p> <p><b>CIVIL RIGHTS</b></p> <p>The LPHA must assure civil rights compliance responsibilities are met.</p> <ul style="list-style-type: none"> <li>• Provide documentation that the Civil Rights Self Assessment has been reviewed by the LPHA.</li> <li>• Provide documentation that there is a plan to improve any deficient areas identified by the Civil Rights Self Assessment.</li> </ul> <p><b>For more detailed information, please see the completed program review tool in section <u>4</u>.</b></p>	<p>4/30/14</p>
<b>REVIEWER:</b> Laurie Smith	<b>RESPONDENT:</b> Brian Mahoney

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR HEALTH PROTECTION**

**DRINKING WATER**

- The LPHA is not performing water system survey follow ups on a routine basis. 3/7/2014
- LPHA is not listing deficiencies and dates to be corrected by, nor are these dates being provided to DWS. 3/7/2014
- LPHA is not ensuring water systems with uncorrected deficiencies have an approved corrective action plan which is then provided to DWS. 3/7/2014

LPHA must review surveys from 2011 and 2012, and contact those systems with deficiencies to determine their current status. LPHA is then to implement a routine follow up process as needed. 3/7/2014

**For more detailed information, please see the completed program review tool in section 6.**

**REVIEWER:** Tony Fields

**RESPONDENT:** Maureen Taylor

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**FISCAL**

The LPHA must base Family Planning/Title X charges on a schedule of discounts (SOD) consistent with Guidelines: 42 CFR 59.5\_Section 6. This includes at a minimum:

- Submit completed cost analysis study. Federal auditor recommends updating the cost analysis every 2 years. *Repeat finding from 2007 and 2010.*

03/31/2014

**For more detailed information, please see the completed program review tool in section 7.**

**REVIEWER:** Marivic Tupaz

**RESPONDENT:** Bryan Hall,  
Brian Mahoney

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR HEALTH PROTECTION**

**FOOD, POOL, AND LODGING HEALTH & SAFETY**

The LPHA must maintain an inspection rate of 100% for all licensed facilities. The Recreation Parks Program is below the compliance rate. [OAR 333-012-0055\(1\)](#)

6/30/14

The LPHA must clearly state on the food inspection report if a Priority(P)/Priority Foundation(Pf) violation has been resolved at the time of the semi-annual inspection and document specifically how the P/Pf violation was corrected. [OAR 333-012-0055\(3\)\(d\)\(A-D\)](#)

3/31/14

The LPHA must conduct a recheck inspection within 14 days for priority/priority foundation violations that were not corrected during the inspection. [OAR 333-012-0055\(3\)\(e\)](#)

3/31/14

The LPHA is not meeting the minimum criteria for onsite foodhandler classes. [OAR 333-175](#)

3/31/14

**For more detailed information, please see the completed program review tool in section 8.**

**REVIEWERS:** Cindy Robinson and Erica Van Ess

**RESPONDENT:** Maureen Sheffield-Taylor

**CLATSOP COUNTY PUBLIC HEALTH**

<b>COMPLIANCE FINDINGS</b>	<b>TIMELINE FOR CHANGE</b>
<p><b>CENTER FOR PUBLIC HEALTH PRACTICE</b></p> <p><b>IMMUNIZATION PROGRAM</b></p> <p>The LPHA must ensure that its Vaccine Administration Record (VAR) is in compliance with and approved by the Oregon Immunization Program.</p> <p>The LPHA must ensure that at least two staff members participated in vaccine training in the last 12 months.</p> <p>The LPHA must ensure that its standing orders are current and signed by the health officer.</p> <p><b>For more detailed information, please see the completed program review tool in section 10.</b></p>	<p>December 31, 2013 <i>Resolved Dec. 16, 2013</i></p> <p>December 31, 2013 <i>Resolved Dec. 11, 2013</i></p> <p>December 31, 2013 <i>Resolved Dec. 17, 2013</i></p>
<p><b>REVIEWER:</b> Carlos Quintanilla, Tuesday Graham</p>	<p><b>RESPONDENT:</b> Sheri Salber, Nancy Mazzarella-Tisch, Brian Mahoney</p>

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**COMMUNITY LIAISON**

**LABORATORY**

The LPHA must comply with 42 CFR part 493 the Clinical Laboratory Improvement Amendments (CLIA). Assure that:

- The lab follows established written polices and procedures for specimen submission, handling, and referral. [42CFR493.1242](#)
- Annual personnel competency testing is documented for all individuals performing laboratory tests, including physicians and mid-level practitioners. [42CFR493.1235](#) Updated personnel competency testing is needed for UA dipstick, urine hCg, and microscopy.
- There is a written quality assurance plan includes chart reviews for pre-analytic, analytic, and post-analytic phases of laboratory testing. [42CFR493.1200\(a\)](#)

5/30/14

4/30/14

5/30/14

**For more detailed information, please see the completed program review tool in section 11.**

**REVIEWER:** Laurie Smith

**RESPONDENT:** Sheri Salber

<b>CLATSOP COUNTY PUBLIC HEALTH</b>	
<b>COMPLIANCE FINDINGS</b>	<b>TIMELINE FOR CHANGE</b>
<b>CENTER FOR PREVENTION AND HEALTH PROMOTION</b>	
<b>REPRODUCTIVE HEALTH</b>	
<ul style="list-style-type: none"> <li>• Clatsop County Health Public (CCPH) must develop a community participation group who meet at least annually to evaluate the Family Planning Program.</li> <li>• An I &amp; E advisory group must meet at least annually to review and approve all educational material developed by CCPH.</li> <li>• Protocols must be written for natural family planning, pelvic exams, abnormal pap management, breast self-exam, testicular self-exam that cite and follow a National Standard.</li> <li>• CCPH’s protocols for all hormonal birth control methods must cite the U.S. Medical Eligibility Criteria and U.S. Selected Practice Recommendations for Contraceptive Use, 2013.</li> <li>• Protocols for cervical cancer screening, colo-rectal cancer screening, Chlamydia testing, and clinical breast exams must cite and describe the national standard the agency follows.</li> <li>• CCPH must develop a protocol regarding high risk clients for HIV (IV drug users, MSM, female partners of MSM, and recently incarcerated) to be tested in FP clinic to meet Title X requirements.</li> <li>• Educational plans must be developed for breast self-exam, testicular self-exam and sexually transmitted infection (STI) risk reduction.</li> </ul>	<p>March 2014</p> <p>March 2014</p> <p>Jan 2014 <i>Resolved</i> <i>12/24/2013</i></p> <p>Jan 2014 <i>Resolved</i> <i>12/24/2013</i></p> <p>Jan 2014 <i>Resolved</i> <i>12/24/2013</i></p> <p>Jan 2014 <i>Resolved</i> <i>12/17/13</i></p> <p>Jan 2014 <i>Resolved</i> <i>12/17/13</i></p>
<b>For more detailed information, please see the completed program review tool in section 13.</b>	
<b>REVIEWERS:</b> Linda McCaulley, Connie Clark	<b>RESPONDENT:</b> Sheri Salber

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**SEXUALLY TRANSMITTED INFECTIONS (STI)  
PROGRAM**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed  
program review tool in section 14.**

**REVIEWER:** Doug Harger

**RESPONDENT:** Sheri Salber, Brian  
Mahoney

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**TUBERCULOSIS**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed program review tool in section 16.**

**REVIEWER:** Heidi Behm

**RESPONDENT:** Sheri Slaber

<b>CLATSOP COUNTY PUBLIC HEALTH</b>	
<b>COMPLIANCE FINDINGS</b>	<b>TIMELINE FOR CHANGE</b>
<p><b>CENTER FOR PREVENTION AND HEALTH PROMOTION</b></p> <p><b>TOBACCO PREVENTION AND EDUCATION PROGRAM</b></p> <p>The LPHA is in compliance with all program requirements.</p> <p><b>For more detailed information, please see the completed program review tool in section <u>15</u>.</b></p>	
<b>REVIEWER:</b> Sabrina Freewynn	<b>RESPONDENT:</b> Brian Mahoney

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**VITAL RECORDS**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed program review tool in section 17.**

**REVIEWER:** Judy Shioishi

**RESPONDENT:** Annette Brodigan

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS – 2012**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION  
SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR  
WOMEN, INFANTS AND CHILDREN (WIC)**

- Assure processing standards are met. (Policy 605)
- Assure routine reporting of voter registration activity to the Elections Division. (Policy 480)
- Assure Local Agency high-risk participant referral protocol is followed. (Policy 661)
- Assure expenditures reflected for nutrition education meet the program expenditure requirements. (Policy 315)

Resolved  
March 26, 2013

Resolved  
March 26, 2013

Resolved  
March 26, 2013

Resolved  
March 26, 2013

**For more detailed information, please see the completed program review tool in section 18.**

**REVIEWER:** Sara Sloan

**RESPONDENT:** Margo Lulich

**CLATSOP COUNTY PUBLIC HEALTH**

**COMPLIANCE FINDINGS – 2012**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**WIC FARM DIRECT NUTRITION PROGRAM (FDNP)**

- All FDNP Program areas are in compliance.

**For more detailed information, please see the completed program review tool in section 18.**

**REVIEWER:** Sara Sloan

**RESPONDENT:** Margo Lulich

PUBLIC HEALTH DIVISION  
Office of the State Public Health Director, Community Liaison  
John A. Kitzhaber, MD, Governor



800 NE Oregon Street, Suite 930  
Portland, OR 97232  
(971) 673-1222 Voice  
(971) 673-1299 FAX

January 21, 2014

The Honorable Scott Lee, Chair  
Clatsop County Board of Commissioners  
800 Exchange, Suite 310  
Astoria, OR 97103

Dear Commissioner Lee:

The triennial onsite agency review of Clatsop County Public Health was conducted between December 2 and 17, 2013. The Oregon Health Authority Public Health Division evaluated 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 approximately 973 separate items in 17 program areas. While there are some areas that need attention, keep in mind the vast majority of findings were positive.

A full report, including the specific timelines for correction, has been sent to Brian Mahoney, Public Health Administrator. Community Liaison staff will work with him to document resolution of the findings. We think the report will also be of assistance to your health office staff in their continuing efforts to provide quality public health services to your community.

Please send a written response within ten days affirming that you will meet the timelines for correcting the compliance findings. Once all the required elements are successfully completed, we will write you a letter to confirm that and close the file for this review.

Our office will contact Brian and your office to arrange an exit interview to go over the findings and answer any questions. We leave it to the local Board to decide if this meeting of the Local Public Health Authority (LPHA) and the Health Administrator is attended by one or more of the commissioners.

**Programs included in the compliance review**

Administration	Laboratory
Babies First!	Perinatal
Civil Rights	Reproductive Health
Communicable Disease	Sexually Transmitted Infections
Drinking Water	Tobacco Prevention & Education
Fiscal	Tuberculosis
Food, Pool & Lodging	Vital Records
Health and Safety	WIC
Health Officer	WIC Farm Direct Nutrition Program
Immunizations	

**Commendations**

Several program reviewers submitted commendations to the Office of Community Liaison as follows:

Clatsop County Public Health (CCPH) has an extremely high-functioning immunization program. Staff does an excellent job with vaccine storage and handling, and all performance measure compliance findings were met: timely data entry, correct coding and perinatal Hepatitis B. CCPH's immunization program serves the people of Clatsop County very well. This is particularly notable given the small number of staff.

The Tobacco Prevention and Education Program (TPEP) has successfully promoted policy change for tobacco-free environments in a variety of setting, including county properties, the county fair, and multi-unit housing. The experienced and knowledgeable program coordinator maintains a strong Tobacco Free Coalition and demonstrates exemplary coordination and collaboration skills in work with local institutions such as the community college and hospital. Also commendable is the program's use of local news media to further program objectives including promotion of the Oregon Tobacco Quit Line.

Clatsop County has established itself as a leader in the state by being one of the first counties to designate all county properties as tobacco-free and by allocating general funds to health promotion activities. The TPEP coordinator also serves as the county's Health Promotion Specialist, resulting in well-integrated efforts to promote health and prevent chronic disease through various activities from physical activity through a trails map to partnering with the hospital to promote chronic disease self-management programs. The program coordinator serves on the CCO's advisory council ensuring that community

health improvement efforts represent the community's needs and the leading public health challenges, including tobacco.

The MCH Home Visiting Nurse, Patsy Lee Horency and Annette Brodigan of Clatsop County Public Health, are integral members of, and coordinate support of the Clatsop County Connections Network (CCN). This group's membership includes a number of Clatsop County community agencies and professionals who share a common goal of providing resources for families w children and youth who have special health care needs. Members of the Clatsop County CCN include school nurses, a medical doctor, a psychiatric nurse practitioner, a Northwest Regional ESD behavioral specialist, and administrators from Clatsop Behavioral Healthcare and Clatsop Developmental Disabilities. Family representatives add the perspective of challenges they face in obtaining appropriate resources for their children's needs.

MCH program strengths include:

- High level of nursing expertise demonstrated in Perinatal and Babies First! Program implementation. The public health nurse currently providing coverage for MCH Home Visits has extensive public health work experience.
- MCH Home Visiting staff nurse is cross trained in all MCH Home Visiting programs.
- Well functioning referral system with single point of entry.
- Well established community partnerships and linkages with providers and community agencies. Consistent referral process noted with partners being made aware of MCH programs.
- Unique use of ORCHIDS Report Form, "Client Profile Report" as a client record form.
- Excellent documentation of child immunization records utilizing State of Oregon ALERT System.
- MCH Public Health Nurse, Patsy Lee Horency, maintains her certification as an International Breastfeeding Lactation Consultant.

The Drinking Water Program continues to be a solid performer among the 28 local public health authorities with drinking water agreements. Nearly 7% of the 15 water systems surveyed from 2011 through 2013 had no significant deficiencies. Of those 15 water systems, 10 are community water systems (CWS). One CWS had no deficiencies and was designated an "outstanding performer". This designation qualifies the system to be surveyed every five years instead of every three because of the proficiency of their utilities and operations. The high standards demonstrated by several of the water systems in the

LPHA's jurisdiction is a direct reflection on the drinking water staff's good working relationships with operators, technical skills, and dedication to supporting and encouraging operators to achieve success.

Clatsop County is doing an excellent job of providing Environmental Health services to the community. The overall inspection rate for licensed facilities is good with all program areas in compliance except the Recreation Park Program.

Maureen Sheffield-Taylor is state standardized. Satisfactory completion of the standardization process and maintenance complies with the field review portion of the triennial review. Meredith Riley is a new employee (less than 6 months accumulated field time) and will be evaluated during the next triennial review period.

## **Compliance Findings Summary**

### **Administration**

The LPHA must assure fees for public health services are reasonably calculated not to exceed the cost of the services performed. An updated cost analysis is required according to fiscal review. Date of most recent cost analysis is 2010.  
ORS 431.415(3) Repeat *finding from 2007 and 2010*

A written policy and procedure is needed for HIPAA training (new employee and ongoing annual training). *Repeat finding from 2007 and 2010*

### **Babies First!**

The LPHA is in compliance with all program requirements.

### **Civil Rights**

The LPHA must assure civil rights compliance responsibilities are met.

- Provide documentation that the Civil Rights Self Assessment (CRSA) has been reviewed by the LPHA.
- Provide documentation that there is a plan to improve deficient areas identified by the CRSA.

### **Communicable Disease**

The LPHA is in compliance with all program requirements.

### **Drinking Water**

- The LPHA is not performing water system survey follow ups on a routine basis.

- LPHA is not listing deficiencies and dates to be corrected by nor are these dates being provided to DWS.
- LPHA is not ensuring water systems with uncorrected deficiencies have an approved corrective action plan which is then provided to DWS.

LPHA must review surveys from 2011 and 2012, and contact those systems with deficiencies to determine their current status. LPHA is then to implement a routine follow up process as needed.

### **Fiscal**

The LPHA must base Family Planning/Title X charges on a schedule of discounts consistent with Guidelines: 42 CFR 59.5\_Section 6. This includes at a minimum:

- Submit completed cost analysis study. Federal auditor recommends updating the cost analysis every 2 years. *Repeat finding from 2007 and 2010*

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

The LPHA must maintain an inspection rate of 100% for all licensed facilities. The Recreation Parks Program is below the compliance rate. OAR 333-012-0055(1)

The LPHA must clearly state on the food inspection report if a Priority(P)/Priority Foundation(Pf) violation has been resolved at the time of the semi-annual inspection and document specifically how the P/Pf violation was corrected. OAR 333-012-0055(3)(d)(A-D)

The LPHA must conduct a recheck inspection within 14 days for Priority/Priority Foundation violations that were not corrected during the inspection. OAR 333-012-0055(3)(e)

The LPHA is not meeting the minimum criteria for onsite foodhandler classes. OAR 333-175

### **Immunizations**

The LPHA must ensure that its Vaccine Administration Record (VAR) is in compliance with and approved by the Oregon Immunization Program.

The LPHA must ensure that at least two staff members participated in vaccine training in the last 12 months.

The LPHA must ensure that its standing orders are current and signed by the health officer.

### **Perinatal**

The LPHA is in compliance with all program requirements.

### **Reproductive Health**

- Clatsop County Public Health (CCPH) must develop a community participation group who meet at least once annually to evaluate the Family Planning Program.
- An I & E advisory group must meet at least annually to review and approve all educational material developed by CCPH.
- Protocols must be written for natural family planning, pelvic exams, abnormal pap management, breast self-exam and testicular self-exam that cite and follow a National Standard.
- CCPH's protocols for all hormonal birth control methods must cite the U.S. Medical Eligibility Criteria and U.S. Selected Practice Recommendations for Contraceptive Use, 2013.
- Protocols for cervical cancer screening, colo-rectal cancer screening, Chlamydia testing, and clinical breast exams must cite and describe the national standard the agency follows.
- CCPH must develop a protocol regarding high-risk clients for HIV (IV drug users, MSM, female partners of MSM, and recently incarcerated) to be tested in FP clinic to meet Title X requirements.
- Educational plans must be developed for breast self-exam, testicular self-exam and sexually transmitted infections (STI) risk reduction.

### **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**

The LPHA is in compliance with all program requirements.

### **Vital Records**

The LPHA is in compliance with all program requirements.

### **Special Supplemental Nutrition Program for Women, Infants and Children (WIC)**

- Assure processing standards are met. (Policy 605)
- Assure routine reporting of voter registration activity to the Elections Division. (Policy 480)
- Assure Local Agency high-risk participant referral protocol is followed. (Policy 661)
- Assure expenditures reflected for nutrition education meet the program expenditures requirements. (Policy 315)

This biennial review was conducted in December 2012, and is included in this report. All compliance findings have been resolved.

### **WIC Farm Direct Nutrition Program (FDNP)**

The LPHA is in compliance with all program requirements.

### **Other**

#### **Fiscal**

Clatsop County Public Health received Federal Funds for several programs totaling \$391,072, including \$208,867 for the WIC Program in fiscal year 2013. The State General and Other Funds were a source of \$195,836 for that period. It appears that the county health department has sufficient internal controls to adequately safeguard assets and to detect and prevent errors in a timely manner. The review indicated a well-run fiscal operation with satisfactory accounting controls, purchasing procedures and attention to detail. The operation is well organized and efficient with a commitment to quality, fairness and accuracy.

#### **Health Officer**

Thomas Duncan, MD, is the Health Officer in Clatsop County.

#### **Laboratory**

Clatsop County Public Health Laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as a Provider Microscopy laboratory. The laboratory director listed for CLIA is JoAnn Giuliani, MD. The laboratory CLIA # is 38D065819. Their certificate is valid through December 31, 2015. The CLIA certificate covers the location at 820 Exchange Street in Astoria, and a second site, open Wednesdays, located at 1131 Broadway in Seaside. The following tests are being performed at both sites: Vaginal Wet/KOH preparations, Pregnancy Test, Hemoglobin, and Urine Dipstick. No complaints or issues have been reported to CLIA in the past three years.

**Summary**

Overall, agency reviewers believe Clatsop County Public Health staff is a committed team of professionals who deliver quality public health services to the community. We thank you for both your attention to correcting these few compliance findings and for the strong public health work you do for the community.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jan Kaplan', written over a faint, illegible stamp or background.

Jan Kaplan, MSW, Manager  
Community Liaison

cc: Debra Birkby, Clatsop County Commissioner  
Peter Huhtala, Clatsop County Commissioner  
Brian Mahoney, Public Health Administrator  
Sarah Nebeker, Clatsop County Commissioner  
Dirk Rhone, Clatsop County Commissioner