

AGENCY REVIEW

WALLOWA COUNTY HEALTH DEPARTMENT

August 6 – 27, 2012
Prepared by
Oregon Health Authority
Public Health Division



WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

COMMUNITY LIAISON

ADMINISTRATION

The LPHA must maintain an office open to the public during the normal work week of the local government.

1/31/13

The fees for public health services must be reasonably calculated not to exceed the cost of the services performed. The fee schedule is approved by the governing Board.

9/30/12

All policies and procedures must be signed by the current administrator.

9/30/12

Resolved 8/12

The LPHA must assure that nurse scope of practice is supported by current, signed policies, procedures, and standing orders. This is done by the current Health Officer.

9/30/12

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

REVIEWER: Rebecca Austen

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

BABIES FIRST!

The LPHA will ensure that all TCM case managers utilize the most recent version of the TCM Assessment and Plan Form and TCM Visit Form documents provided by the Office of Family Health.

Resolved

For more detailed information, please see the completed program review tool in section 3.

REVIEWER:

Lari Peterson

RESPONDENT:

Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

COMMUNITY LIAISON

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.

1/31/13

For more detailed information, please see the completed program review tool in section 4.

REVIEWER: Rebecca Austen

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

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: June Bancroft

RESPONDENT: Janie McArtor

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR

FISCAL

The LPHA must maintain internal controls consistent with OMB A102, A-133. This includes at a minimum:

- Segregation of duties to assure that staff processing request for payment of goods and services should be other than the Administrator who approves it.

10/31/2012

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

REVIEWER: Marivic Tupaz

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR HEALTH PROTECTION

FOOD, POOL & LODGING HEALTH AND SAFETY

The LPHA must maintain an inspection rate of 100% for all licensed facilities. The following programs are below the compliance rate: Restaurants, Bed and Breakfast, Traveler's Accommodations, and RV Parks.

12/31/12

The LPHA must provide access to a light meter for staff to share.
OAR 333-012-0055(8d)

12/31/12

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

REVIEWER: Eric Pippert

RESPONDENT: Rustin Rock

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

HEALTHY COMMUNITIES

The LPHA is in compliance with all program requirements.

For more detailed information, please see the completed program review tool in section 9.

REVIEWER: Kati Moseley

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

IMMUNIZATIONS

All State-Supplied Vaccine/IG must be offered to appropriate clients and may only be administered in accordance with the current recommendations of the Department of Health and Human Services' Advisory Committee on Immunization Practices (ACIP) and OHA's Communicable Disease Summaries, as summarized in OHA's Model Standing Orders for Vaccines.

- LPHA will submit a signed copy of OHA's Model Standing Orders for Measles/Mumps/Rubella Vaccine

The LPHA shall comply with the current immunization schedule, dosage and contraindications that are recommended by the joint decision of the American Academy of Pediatrics (AAP), and the DHHS Advisory Committee on Immunization Practices (ACIP):

- LPHA will stock and offer rotavirus vaccine

The LPHA must utilize OIP's *Standard Operating Procedures for Vaccine Management (SOP)* or own clinic-specific, OIP-approved policy addressing responsibilities for proper storage and handling of vaccine.

- Store the vaccine in the middle of the refrigerator or freezer to allow air to circulate around it.
- Change high and low alarms on temperature data loggers.

For more detailed information, please see the completed program review tool in section 10.

8/31/12
Resolved
8/16/12

8/31/12
Resolved
8/16/12

8/31/12
Resolved during
Review

REVIEWERS: Carlos Quintanilla,
Mallory Metzger

RESPONDENTS: Janie McArtor,
Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

COMMUNITY LIAISON

LABORATORY

The LPHA must comply with 42 CFR part 493 the Clinical Laboratory Improvement Amendments (CLIA). Consult with Laboratory Liaison to bring manual into compliance. Assure that:

- There is a written order for test; results are documented and signed off by provider.
- All lab procedures are current with lab director signature. Hemoglobin policy and procedure is not current.
- Provider proficiency is conducted annually.

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

REVIEWER: Rebecca Austen

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

PERINATAL PROGRAM

The LPHA is in compliance with all program requirements.

For more detailed information, please see the completed program review tool in section 12.

REVIEWER:

Lari Peterson

RESPONDENT:

Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

REPRODUCTIVE HEALTH

The LPHA shall comply with all Family Planning Program Requirements.

- Assure that clients seeking family planning services voluntarily sign a consent for service prior to receiving any services and that this consent is filed in the client's medical record. 10/15/12
- Assure that all clients receiving a prescriptive contraceptive method sign an informed consent for the method and that this consent is filed in the client's medical record. 10/15/12
- Assure that there are clinic protocols for all contraceptive methods that are adequate for nursing scope of practice and follow national standards. 12/15/12
- Assure that there are clinic protocols for Level I Infertility, Natural Family Planning, Male services. 12/15/12
- Assure that there are protocols for medical emergencies in family planning clinic, including cardiac arrest, syncope, hemorrhage, shock and respiratory difficulties. 11/15/12
- Assure that there are clinic protocols for breast and colo-rectal cancer screening that include the national standards of care. 11/15/12
- Assure that a plan is submitted that is acceptable to the State Reproductive Health Program to review and update exam procedures and protocols for all services offered at the family planning clinic that reflect current practice and are appropriate for nursing scope of practice. 11/15/12

For more detailed information, please see the complete program review tool in section 13.

REVIEWER: Carol Elliott

RESPONDENT: Laina Fisher & Janie McArtor

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

SEXUALLY TRANSMITTED INFECTION (STI)

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: Janie McArtor

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

TOBACCO PREVENTION AND EDUCATION PROGRAM

The LPHA is in compliance with all program requirements.

For more detailed information, please see the completed program review tool in section 15.

REVIEWER: Kati Moseley

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

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: Lindsey Lane

RESPONDENT: Janie McArtor

WALLOWA COUNTY HEALTH DEPARTMENT

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: Karen Hampton &
JoAnn Jackson

RESPONDENT: Jodi Beck

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2012

**TIMELINE
FOR CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

**SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR
WOMEN, INFANTS AND CHILDREN (WIC)**

- | | |
|---|------------------------------------|
| <ul style="list-style-type: none"> ● The Justice for All Poster must be displayed in an obvious place for all to see. (Policy 452) | <p>RESOLVED August 7, 2012</p> |
| <ul style="list-style-type: none"> ● Assure staff who provide WIC services complete all required training modules and completed modules are documented into TWIST. (Policy 440) <i>This is a repeat finding from 2010.</i> | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Conduct a self-evaluation of program operations, at a minimum of every other year. (Policy 215) | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure staff utilize the OHP portal, so participants with OHP can take advantage of being adjunctively eligible. (Policy 612) <i>This is a repeat finding from 2010.</i> | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure the eligibility pending box is checked if all required proofs are not provided at the certification appointment. (Policy 616) | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure timelines are met for bloodwork. (Policy 625) <i>This is a repeat finding from 2008 and 2010.</i> | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure all selected risks are documented correctly. (Policy 625 and 640) <i>This is a repeat finding from 2008 and 2010.</i> | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure food package assignment is appropriate for the participant category and risk. (Policy 770) | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● Assure a connection is made between the participant's program eligibility and desired health outcome (Policy 820) <i>This is a repeat finding from 2006, 2008 and 2010.</i> | <p>October 24, 2012</p> |
| <ul style="list-style-type: none"> ● A medical documentation form must be on file to support the food package assignment. (Policy 675) <i>This is a repeat finding from 2008 and 2010.</i> | <p>October 24, 2012</p> |

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2012

**TIMELINE
FOR CHANGE**

- | | |
|--|---|
| <ul style="list-style-type: none"> • Infants must receive a mid-cert health assessment. (Policy 646)<i>This is a repeat finding from 2008 and 2010.</i> • Required referrals for OHP and Drug/Alcohol must be made per Policies 880 and 885. (Policies 880 and 885) • Properly report the number of registrations submitted to the Elections Division weekly. (Policy 480) • Participants must be offered second nutrition education on a quarterly basis. (Policy 820) <i>This is a repeat finding from 2006, 2008 and 2010.</i> • If a participant does not attend second nutrition education, vouchers must be printed according to local procedure. (Policy 835) <i>This is a repeat finding from 2006, 2008 and 2010.</i> • Assure nutritionally high risk participants receive a nutrition care plan by the registered dietitian. (Policy 661) • Assure nutritionally high risk WIC participants are referred to the R.D. according to local agency protocol. (Policy 661) <i>This is a repeat finding from 2006, 2008 and 2010.</i> • Submit an annual nutrition education plan. (Policy 850) • WIC Coordinator must review voucher security and audit trail quarterly. (Policy 500) • Participant signature forms and food instrument stubs must be retained according to the timeline in Policy 426. (Policy 426) | <p>October 24, 2012</p> <p>RESOLVED August 7, 2012</p> <p>RESOLVED August 7, 2012</p> <p>October 24, 2012</p> |
|--|---|

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

REVIEWER: Karen Bettin

RESPONDENT: Laina Fisher

WALLOWA COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2012

**TIMELINE
FOR CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

WIC FARM DIRECT NUTRITION PROGRAM (FDNP)

- Assure all FDNP recipients are eligible to receive FDNP checks (Policy 1100).
- FDNP check register must be filled out correctly—including issue date and participant ID (Policy 1100).
- A physical inventory of FDNP checks must be conducted at least once during the FDNP season (Policy 1100).
This is a repeat finding from 2010.
- The participant orientation to the FDNP must include all required elements 3.0-3.6 of State Policy 1100.

October 24, 2012

October 24, 2012

RESOLVED
August 7, 2012

RESOLVED
August 7, 2012

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

REVIEWER: Karen Bettin

RESPONDENT: Laina Fisher

October 22, 2012

The Honorable Mike Hayward, Chair
Wallowa County Board of Commissioners
101 S River Street, Room 202
Enterprise, OR 97828

Dear Commissioner Hayward:

The triennial onsite agency review was conducted for the Wallowa County Health Department August 6 and 27, 2012. 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 802 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 Laina Fisher, Public Health Administrator. Staff in the Office of Community Liaison will work with her 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 Laina 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 Infection |
| Fiscal | Tobacco Prevention & Education |
| Food, Pool and Lodging | Tuberculosis |
| Health and Safety | Vital Records Management |
| Health Officer | WIC and WIC Farm |
| Healthy Communities | Direct Nutrition Program |
| Immunizations | |

Compliance Findings Summary

Administration

The LPHA must maintain an office open to the public during the normal work week of the local government.

The fees for public health services must be reasonably calculated not to exceed the cost of the services performed. The fee schedule is approved by the governing board.

All policies and procedures must be signed by the current administrator.

The LPHA must assure that nurse scope of practice is supported by current, signed policies, procedures, and standing orders. This is done by the current Health Officer.

Babies First!

The LPHA will ensure that all TCM case managers utilize the most recent version of the TCM Assessment Plan Form and TCM Visit Form documents provided by the Office of Family Health.

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.

Fiscal

The LPHA must maintain internal controls consistent with OMB A102, A-133. This includes, at a minimum:

- Segregation of duties to assure that staff processing request for payment of goods and services should be other than the Administrator who approves it.

Food, Pool and Lodging Health & Safety

The LPHA must maintain an inspection rate of 100% for all licensed facilities. The following programs are below the compliance rate: Restaurants, Bed and Breakfast, Traveler's Accommodations, and RV Parks.

The LPHA must provide access to a light meter for staff to share. OAR 333-012-0055(8d)

Healthy Communities

The LPHA is in compliance with all program requirements.

Immunizations

All State-Supplies Vaccine/IG must be offered to appropriate clients and may only be administered in accordance with the current recommendations of the Department of Health and Human Services' Advisory Committee on Immunization Practices (ACIP) and OHA's Communicable Disease Summaries as summarized in OHA's Model Standing Orders for Vaccines.

- LPHA will submit a signed copy of OHA's Model Standing Orders for Measles/Mumps/Rubella Vaccine.

The LPHA shall comply with the current immunization schedule, dosage and contraindications that are recommended by the joint decision of the American Academy of Pediatrics (AAP) and the DHHS ACIP:

- LPHA will stock and offer rotavirus vaccine.

The LPHA must utilize OIP's *Standard Operating Procedures for Vaccine Management (SOP)* or own clinic-specific, OIP-approved policy addressing responsibilities for proper storage and handling of vaccine.

- Store the vaccine in the middle of the refrigerator or freezer to allow air to circulate around it.
- Change high and low alarms on temperature data loggers.

Laboratory

The LPHA must comply with 42 CFR Part 493 the Clinical Laboratory Improvement Amendments (CLIA). Consult with laboratory liaison to bring manual into compliance.

Assure that:

- There is a written order for test, results are documented and signed off by provider.
- All lab procedures are current with lab director signature.
- Provider proficiency is conducted annually.

Perinatal

The LPHA is in compliance with all program requirements.

Reproductive Health

The LPHA shall comply with all Family Planning Program Requirements.

- Assure that clients seeking family planning services voluntarily sign a consent form for service prior to receiving any services and that this consent is filed in the client's medical record.
- Assure that all clients receiving a prescriptive contraceptive method sign an informed consent for the method and that this consent is filed in the client's medical record.
- Assure that there are clinic protocols for all contraceptive methods that are adequate for nursing scope of practice and follow national standards.
- Assure that there are clinic protocols for Level I Infertility, Natural Family Planning and Male Services.
- Assure that there are protocols for medical emergencies in family planning clinic, including cardiac arrest, syncope, hemorrhage, shock and respiratory difficulties.
- Assure that there are protocols for breast and colo-rectal cancer screening that include the national standards of care.
- Assure that a plan is submitted that is acceptable to the State Reproductive Health Program to review and update exam procedures and protocols for all services offered at the family planning clinic that reflect current practice and are appropriate for nursing scope of practice.

Sexually Transmitted Infection

The LPHA is in compliance with all program requirements.

Tobacco Prevention & Education Program and Healthy Communities

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.

WIC

- The Justice of All Poster must be displayed in an obvious place for all to see. (Policy 452)
- Assure staff who provide WIC services complete all required training modules and completed modules are documented into TWIST. (Policy 440) *This is a repeat finding from 2010.*
- Conduct a self-evaluation of program operations at a minimum of every other year. (Policy 215)
- Assure staff utilize the OHP portal so participants with OHP can take advantage of being adjunctively eligible. (Policy 612) *This is a repeat finding from 2010.*
- Assure the eligibility pending box is checked if all required proofs are not provided at the certification appointment. (Policy 616)
- Assure timelines are met for bloodwork. (Policy 625) *This is a repeat finding from 2008 and 2010.*
- Assure all selected risks are documented correctly. (Policy 625) *This is a repeat finding from 2008 and 2010.*
- Assure food package assignment is appropriate for the participant category and risk. (Policy 770)
- Assure a connection is made between the participant's program eligibility and desired health outcome. (Policy 820) *This is a repeat finding from 2006, 2008 and 2010.*
- A medical documentation form must be on file to support the food package assignment. (Policy 675) *This is a repeat finding from 2008 and 2010.*
- Infants must receive a mid-cert health assessment. (Policy 646) *This is a repeat finding from 2008 and 2010.*
- Required referrals for OHP and Drug/Alcohol must be made per Policies 880 and 885.

- Properly report the number of registrations submitted to the Elections Division weekly. (Policy 480)
- Participants must be offered second nutrition education on a quarterly basis. (Policy 820) *This is a repeat finding from 2006, 2008 and 2010.*
- If a participant does not attend second nutrition education, vouchers must be printed according to local procedure. (Policy 835) *This is a repeat finding from 2006, 2008 and 2010.*
- Assure nutritionally high risk participants receive a nutrition care plan by the registered dietitian. (Policy 661)
- Assure nutritionally high risk WIC participants are referred to the R.D. according to local agency protocol. (Policy 661) *This is a repeat finding from 2006, 2008 and 2010.*
- Submit an annual nutrition education plan. (Policy 850)
- WIC Coordinator must review voucher security and audit trail quarterly. (Policy 500)
- Participant signature forms and food instrument stubs must be retained according to the timeline in Policy 426.

WIC Farm Direct Nutrition Program (FDNP)

- Assure all FDNP recipients are eligible to receive FDNP checks. (Policy 1100)
- FDNP check register must be filled out correctly including issue date and participant ID. (Policy 1100)
- A physical inventory of FDNP checks must be conducted at least once during the FDNP season. (Policy 1100) *This is a repeat finding from 2010.*
- The participant orientation to the FDNP must include all required elements 3.0-3.6 of State Policy 1100.

Other

Fiscal

Wallowa County Health Department received Federal funds for several programs totaling \$108,386 including \$ 26,828 for the WIC Program for fiscal year 2012. The State General and Other Funds were a source of \$ 89,777 for that period as well. It appears that the County Health Department has sufficient internal controls to adequately safeguard assets, to detect and prevent errors in a timely manner. The operation is well organized and efficient with a commitment to quality, fairness, and accuracy.

Health Officer

Dr. Lawrence Woods, MD serves as the Health Officer for the LPHA. He acts as the laboratory director and provides direct services to family planning clients once a month. He is in process of reviewing all medical and lab protocols and policies. Dr. Woods meets the minimum qualifications for this position.

Laboratory

Wallowa County Health Department Laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as a Provider Performed Microscopy laboratory. The laboratory director listed for CLIA is Dr. Lawrence Woods, MD. The laboratory CLIA # is 38D0628576 and their certificate is valid through December 31, 2013. The CLIA certificate covers the location at 758 NW 1st in Enterprise. The following tests are being performed on site: Urine Preg Test, Hgb, Occult Blood and Vaginal Wet Preps. There have been no complaints or issues raised to the CLIA program about this laboratory in the past two years.

Summary

Overall, agency reviewers believe Wallowa County Health Department staff is composed of 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,



Tom Engle, Manager
Community Liaison

cc: Paul Castilleja, Wallowa County Commissioner
Laina Fisher, Public Health Administrator
Susan Roberts, Wallowa County Commissioner