



Polk County Public Health

Annual Plan

2013 – 2014

2013 – 2014 Annual Plan

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I. Executive Summary

The 2013 - 2014 fiscal year looks to be an interesting time for Polk County Public Health (PCPH). We have spent our recent efforts looking for ways to increase visibility in the community and to market our services in a more comprehensive manner. We expect these efforts to increase during the next fiscal year and will continue to build upon the foundation we have established through community outreach and developing new community partnerships.

We continue to strive to meet the needs of the community. We have identified areas throughout the county that are well-served by Polk County Public Health. We have also identified areas in which we can improve. One area we will be focusing efforts on is expanding services to the West Salem community. Our Mental Health sister department recently opened a clinic in West Salem. We currently offer an immunization clinic out of the West Salem office one time per month, but hope to expand this service with the ability to offer weekly clinics. We are also looking at other public health programs that we can deliver in West Salem. Possibilities include WIC and Family Planning. We have started to explore various grants and other opportunities to support expansion goals.

PCPH has taken an active role in the development of our local Coordinated Care Organization (CCO), Willamette Valley Community Health, LLC. We have representation on many of the CCO committees including the Consumer Advisory Council. Public Health is excited to serve as an expert in a medical model of prevention and will act in a technical assistance capacity to develop a Community Health Assessment, a Community Health Improvement Plan, and to define the benchmarks and measures for the CCO. We will continue to be engaged in this process to improve the health of Polk County residents.

We recently received notification that Polk County will be awarded funding for the Healthy Communities program. Due to the delay in funds this program will be on a 2 ½ year funding cycle. We expect chronic disease policy movement during the next fiscal year and hope to see collaboration within the CCO. In terms of health promotion and health improvement, 2014 will be a great year in the Polk County community.

PCPH continues to provide necessary programs to the community including Family Planning, Immunizations, WIC, Communicable Disease surveillance, Emergency Preparedness, Ryan White, and Maternal and Child Health.

Even though we continue to deal with funding uncertainties in the current economic climate, as well as possible programmatic restructuring, this is an exciting time for Polk County Public Health. We have a professional, dedicated team who is passionate and committed to the health and wellbeing of the Polk County community. We look towards the next year as an opportunity to better serve our clients using our limited resources with a focus on prevention and education. We will continue to strive for positive health outcomes and to expand community awareness and knowledge of our services to improve the health of Polk County citizens.

Randi Phillips, MS
Polk County Public Health Administrator
182 SW Academy St. Suite 302
Dallas, OR 97338

II. Assessment

Polk County Public Health's 2012 – 2013 comprehensive annual plan can be found at: <http://public.health.oregon.gov/ProviderPartnerResources/LocalHealthDepartmentResources/Pages/lhd-annual-plan.aspx>

This section will provide a brief update of last year's annual plan which will continue to be of significance for Polk County Public Health during the next fiscal year.

1. Family Planning services: Polk County Public Health has partnered with the Polk County Commission for Children and Families to address the high teen pregnancy rate in Polk County. Together these departments have developed a wide-reaching media campaign and have rebranded the Family Planning Clinic: *The Place for Teen Health* to appeal to teens in Polk County. A Teen Pregnancy Advisory Committee has been assembled to steer the direction of the teen pregnancy prevention efforts with representatives from school districts, local businesses, parents, faith-based organizations, Public Health and the Commission. Posters were created with a goal-oriented focus and have been placed in over 30 locations throughout Polk County including all of the high schools in the county. Taking a quality improvement approach, a Family Planning clinic room was dedicated to *The Place* complete with new, modern furniture and a teen-friendly feel. We have received nothing but positive feedback about our efforts and have seen an increase in clients since the media campaign went live. We have dedicated a Facebook page as well as a website to these efforts. More information can be found at: <http://www.co.polk.or.us/ph/place-teen-health>.

2. Coordinated Care Organizations (CCO): Stemming from the Governor's Healthcare Transformation goals, Polk County Public Health has been involved with local efforts to create a regionalized CCO for Marion and Polk Counties. With input and collaboration from many partners, Willamette Valley Community Health, LLC has been created and is now operational. Public Health representatives serve on the Community Health Assessment/Prevention subcommittee as well as the Consumer Advisory Council. Public Health has been instrumental to discussions regarding meeting the triple aim of: increasing the quality of care, improving the health of Oregonians, and decreasing health care costs. We've done this through consistent prevention messaging and communicating the importance of implementing a Public Health model of care within the CCO.

3. Adult Immunization Special Project: Polk County was awarded funds from the State of Oregon to increase adult immunization rates specifically for flu and Tdap through new, innovative outreach approaches. We currently have a new staff member working on this project and have been forging new relationships with local partners throughout Polk County. We are specifically targeting pharmacies, non-healthcare employers, community health centers, healthcare institutions, long term care facilities, and other community partners and organizations.

4. Healthy Communities: Polk County Public Health recently received notice of having been awarded funds for the Healthy Communities program. This funding will allow us to

coordinate the program for the next 2 ½ years. This program will greatly benefit the Polk County community and will allow us to continue efforts to reduce the burden of chronic disease through systems, environmental and policy change. We also hope to integrate chronic disease prevention efforts in conjunction with the standards and measures set by the CCO. We plan to work in close partnership with the CCO to reduce chronic disease prevalence in Polk County while assisting the CCO to meet the triple aim.

III. Action Plan

Information on the topics of Epidemiology, Environmental Health, Health Statistics, Information and Referral, Emergency Preparedness, and other public health related subjects can be found in the 2012-2013 Comprehensive Plan. No substantial changes are noted at this time.

<http://public.health.oregon.gov/ProviderPartnerResources/LocalHealthDepartmentResources/Pages/lhd-annual-plan.aspx>

WIC

FY 2013 - 2014 Oregon WIC Nutrition Education Plan Form

County/Agency: Polk County WIC program
Person Completing Form: Inge Daeschel/Randi Phillips
Date: 11/30/12
Phone Number: 503-623-8015
Email Address: inge.daeschel@oregonstate.edu

Return this form electronically (attached to email) to: sara.e.sloan@state.or.us
by December 1, 2012
Sara Sloan, 971-673-0043

Goal : Oregon WIC staff will continue to provide quality participant centered services as the state transitions to eWIC.

Objective 1: During planning period, WIC agencies will assure participants are offered and receive the appropriate nutrition education contacts with issuing eWIC benefits.

Activity 1: By December 1, 2013, each agency will develop and implement a procedure for offering and documenting nutrition education contacts for each participant based on category and risk level while issuing benefits in an eWIC environment.

Note: Information and guidance will be provided by the state office as local agencies prepare for the transition to eWIC.

Implementation Plan and Timeline:

A November 2013 in-service training will be established where a procedure for offering and documenting nutrition education contacts for participants based on category and risk level in an eWIC environment will be shared with staff. The state office will provide guidance as to the content of this training. The dietitian and WIC coordinator will develop a procedure prior to this training.

Objective 2: **During planning period, Oregon WIC Staff will increase their knowledge in the areas of breastfeeding, baby behavior and the interpretation of infant cues, in order to assist new mothers with infant feeding and breastfeeding support.**

Activity 1: By March 31, 2014, all WIC certifiers will complete the new Baby Behavior eLearning online course.

Note: Information about accessing the Baby Behavior eLearning Course will be shared once it becomes available on the DHS Learning Center.

Implementation Plan and Timeline:

An in-service training will be planned for March 2014. The dietitian will complete the online course in February, 2014. The certifiers and dietitian will go through the Baby Behavior course together in a group setting and then take the post test.

Activity 2: By March 31, 2014, all new WIC Staff will complete the Breastfeeding Level 1 eLearning Course.

Note: Information about accessing the Breastfeeding Level 1 eLearning Course will be shared once it becomes available on the DHS Learning Center.

Implementation Plan and Timeline:

An in-service training will be planned for March 2014. The dietitian will complete the online course in February, 2014. The certifiers and dietitian will go through the Breastfeeding Level 1 eLearning course together in a group setting and then take the post test.

Objective 3: During planning period, each agency will assure staff continue to receive appropriate training to provide quality nutrition and breastfeeding education.

Activity 1: Identify your agency training supervisor(s) and projected staff in-services dates and topics for FY 2013-2014. Complete and return Attachment A by December 1, 2012.

Implementation Plan and Timeline:

In-service trainings will take place quarterly according to Attachment A. Inge Daeschel, MS, RD, CSP, LD will organize and conduct trainings. (See attachment A). In addition, Randi Phillips will periodically observe nutrition education provided by staff to clients and acts as a mentor and facilitator for the certifiers.

**Attachment A
FY 2013-2014 WIC Nutrition Education Plan
WIC Staff Training Plan – 7/1/2013 through 6/30/2014**

Agency: Polk County Public Health

Training Supervisor(s) and Credentials: Inge Daeschel, MS, RD
Staff Development Planned

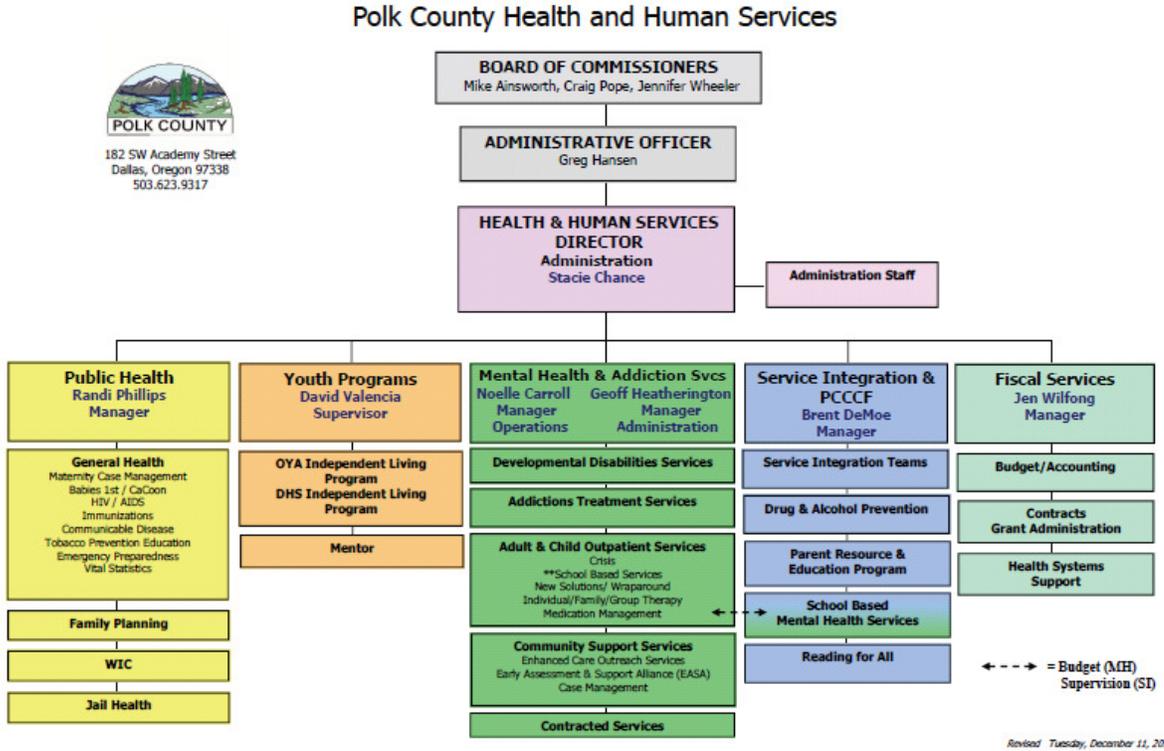
Based on planned program initiatives, your program goals, or identified staff needs, what quarterly in-services and or continuing education are planned for existing staff? List the in-service topic and an objective for quarterly in-services that you plan for July 1, 2013 – June 30, 2014. State provided in-services, trainings and meetings can be included as appropriate.

Quarter	Month	In-Service Topic	In-Service Objective
1	July 2013	1. eLearning Group Education Course for training supervisor, Inge Daeschel 2. eLearning Group Education Course for certifiers facilitated by Inge Daeschel.	Sustaining staff competencies with participant centered services with a specific focus on group education.
2	October 2013	Health Outcomes Training, Review section of the Introduction to WIC training module that relates to breastfeeding, nutrition education and referrals (Section 2-1, 2-2 and 2-3) and Civil Rights. Review of new client class.	Sustaining staff competencies related to sharing health outcomes with clients. Reviewing the importance of promoting breastfeeding, nutrition education and making referrals. Ensuring staff are sensitive to civil rights issues and are aware of Civil Rights procedures. Provide training on a new client education class.
3	January 2014	An in-service training will be established where a procedure for offering and documenting nutrition education contacts for participants based on category and risk level in an eWIC environment will be shared with staff.	Training staff on eWIC and procedures related to eWIC as established in our program.
4	March 2014	1. An in-service training will be planned for March 2014. The dietitian will complete the online the Baby Behavior course and the Breastfeeding Level 1 eLearning course in February, 2014. The certifiers and dietitian will go through both courses together in a group setting and then	Sustaining staff competencies in the feeding relations and breastfeeding.

	take the post tests.	
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IV. Additional Requirements

1. Organizational Chart



2. Local Oversight of Public Health

The Polk County Board of Commissioners (BOC) functions as the Local Public Health Authority for Polk County. Regular meetings of the Board of Commissioners are held on Tuesday and Wednesday each week. The Tuesday meeting is held in the Board of Commissioners’ Office Conference Room, 850 Main Street, Dallas, Oregon. The Wednesday meeting is held in the Courthouse Conference Room, 850 Main Street, Dallas, Oregon. Each meeting begins at 9:00 a.m. and is conducted according to a prepared agenda that lists the principal subjects anticipated to be considered. Pursuant to ORS 192.640, the Board may consider and take action on subjects that are not listed on the agenda. Public Health is required to provide a department update to the Board at least annually.

3. Polk County Health Advisory Board

In addition to the BOC, Polk County has a local Health Advisory Board (HAB) which meets quarterly. The mission of the Polk County Health Advisory Board is to assist the

Polk County Board of Commissioners in their efforts to administer the Mental and Public Health programs through Public/Mental Health activities and services to assure activities necessary for the preservation of behavioral and physical health, and prevention of disease and mental illness in Polk County as provided in both departments' annual plan. Members of the HAB are representative of the County's demographics and include organizations such as school district personnel, local hospital administrators, University staff, faith-based organizations, and community members.

V. Unmet needs

Polk County has a unique model called Service Integration. This allows active work and collaboration with community partners to reduce basic unmet needs in the community. This model has proven itself highly effective to assist families and has created a foundation of organizational collaboration. Although this model is highly successful, there are still many unmet needs in Polk County. Factors such as the increasing cost of living, high unemployment rates, and lack of employment opportunities in the county as well as the increasing incidence of chronic disease in the population further increase the need for services.

Some of the unmet Public Health needs in the community include:

- Primary medical care for those without insurance who are not eligible for the Oregon Health Plan. A free medical clinic has been established in Polk County to serve this population, but the clinic is only open two days per month and serves clients on a first come, first serve basis.
- Access to dental care and oral health services for those without insurance, especially children. We have recently partnered with Capital Dental to provide screenings and varnishes for WIC clients, but there is still much work that needs to be done to address this issue.
- Access to health and dental care for smaller rural communities.
- Bilingual and bicultural health professionals to serve the growing Hispanic population in the community.
- Community-wide approach of health education and promotion around lifestyle related health issues such as obesity and its negative effects on health. This would include community promotion of healthy choices including nutrition and exercise.
- Maternity case management for more than just the highest risk mothers, especially teen mothers with limited support and resources.
- Child care that provides a healthy environment that is affordable, safe and accessible.
- Transportation availability.
- Resources to work towards National Accreditation.
- School Based Health Center.
- Teen Pregnancy Prevention programs.

VI. Budget

Polk County Budget Information Contact:

Greg Hansen
Administrative Officer
Board of Commissioners Office
850 Main St.
Dallas, OR 97338

Phone: (503) 623-8173 FAX: (503) 623-0896

VII. LHD Survey and Indicators

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: __Randi Phillips__

Does the Administrator have a Bachelor degree? Yes _X_ No __

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

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

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

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

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

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

- a. Yes _X_ No __ **The local health department Health Administrator meets minimum qualifications:**

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

b. Yes ___ No X 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.

Polk County Public Health is currently recruiting for a Nurse Supervisor who will meet the minimum qualifications.

c. Yes X 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.

d. Yes X 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.

Local Public Health Authority

County

Date