

AGENCY REVIEW

GRANT COUNTY HEALTH DEPARTMENT

September 1- November 13, 2015

**Prepared by
Oregon Health Authority
Public Health Division**

**Ronit Zusman
Public Health Consultant**

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR PUBLIC HEALTH SYSTEMS INNOVATION AND PARTNERSHIP UNIT (PHSIP)</p> <p>ADMINISTRATION</p> <p>The LPHA is in compliance with all program requirements.</p> <p>For more detailed information, please see the completed program review tool in section 2.</p>	
REVIEWER: Ronit Zusman	RESPONDENTS: Kimberly Lindsay; Jessica Winegar

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 09/16/2015</p> <p>CENTER FOR HEALTH PROMOTION & PREVENTION</p> <p>MATERNAL CHILD HEALTH</p> <p>BABIES FIRST! PROGRAM</p> <p>Program meets compliance requirements.</p> <p>For more detailed information, please see the completed program review tool in section 3.</p>	NA
<p>REVIEWER: Francine Goodrich, State MCH Nurse Consultant</p>	<p>RESPONDENTS: Jessica Winegar, RN, Site Manager, Jennifer Workman, RN, MCH Nurse Home Visitor</p>

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR PUBLIC HEALTH SYSTEMS INNOVATION AND PARTNERSHIP UNIT (PHSIP) CIVIL RIGHTS The LPHA is in compliance with all program requirements. For more detailed information, please see the completed program review tool in section 4.	
REVIEWER: Ronit Zusman	RESPONDENT: Kimberly Lindsay

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 11/13/2015</p> <p>CENTER FOR PUBLIC HEALTH PRACTICE</p> <p>ACUTE AND COMMUNICABLE DISEASE PREVENTION PROGRAM</p> <p>The bloodborne pathogen protocol was not updated annually. Last update was >3 years ago.</p> <ul style="list-style-type: none"> • Review BBP protocol, update if needed, and create a log to track annual protocol review. <p>For more detailed information, please see the completed program review tool in section 5.</p>	<p>3/1/2016</p>
REVIEWER: Melissa Powell	RESPONDENTS: Kimberly Lindsay

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
DATE: 15, OCT 2015 CENTER FOR HEALTH PROTECTION DRINKING WATER SERVICES No compliance findings For more detailed information, please see the completed program review tool in section 6.	N/A
REVIEWER: Tia Skerbeck	RESPONDENT: John Combs

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 10/10/2015</p> <p>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR</p> <p>FISCAL- OFFICE OF FINANCIAL SERVICES</p> <p>The LPHA must allocate payroll cost in compliance with federal regulations consistent with 2CFR Part 22 Appendix B No 8 which requires sub recipient:</p> <ul style="list-style-type: none"> • Use of time sheet/activity reports, signed by the employees and approved by the supervisors/managers allocate payroll costs to various grants/program • Ensure employees sign time studies and same is approved by the managers or supervisors. <p>The LPHA must maintain internal controls consistent with 45CFR 74.21 Standard for Financial Management Systems, 45 CFR 92.20 HHS Standards of Financial Management Systems. This includes:</p> <ul style="list-style-type: none"> • Sub recipient complete and confirms medical supplies and medication inventory on regular basis. <p>The LPHA charges to federal awards must follow federal regulations in 2CFR Part 225 Appendix C for Cost allocation. The LPHA utilizes both cost allocation and indirect rates methods</p> <ul style="list-style-type: none"> • There is a signed Certification of Cost Allocation Plan, stating that all costs included are allowable. <p>The LPHA must maintain internal control consistent with 45 CFR 59.5 (a) (6-8) Public Health Fees and Title X – Family Planning Charges – Requirements for Family Planning Projects:</p> <ul style="list-style-type: none"> • There are written Policy and Procedures for fee assessment/Collection for Family Planning Services that will follow Title X regulations regarding fees/ collection for Family Planning Services. <p>The LPHA must comply with OMB-A133 Subpart C, 45CFR 74.21 Standard for Financial Management Systems, 45 CFR92.20 and Title X Family Planning Guidelines:</p> <ul style="list-style-type: none"> • There is a write-off policy and procedure for uncollectible accounts <p>For more detailed information, please see the completed program review tool in section 7.</p>	<p>01/10/2016</p> <p>01/10/2016</p> <p>01/10/2016</p> <p>01/10/2016</p> <p>01/10/2016</p>
REVIEWER: Joass Lyatuu	RESPONDENT: Shannon Boor

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 9/21/2015</p> <p>CENTER FOR HEALTH PROTECTION</p> <p>ENVIRONMENTAL PUBLIC HEALTH</p> <p>FOOD, POOL & LODGING</p> <p>The LPHA is in compliance with all program requirements.</p> <p>For more detailed information, please see the completed program review tool in section 8.</p>	
REVIEWER: Cindy Robinson	RESPONDENT: John Combs

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR PUBLIC HEALTH SYSTEMS INNOVATION AND PARTNERSHIP UNIT (PHSIP)</p> <p>HEALTH OFFICER</p> <p>The LPHA is in compliance with all program requirements.</p> <p>For more detailed information, please see the completed program review tool in section 9.</p>	
REVIEWER: Ronit Zusman	RESPONDENTS: Kimberly Lindsay; David Hall; Jessica Winegar

GRANT COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

IMMUNIZATIONS

LPHA is required to practice under current standing orders. Guidelines for Managing Adverse Events standing order should be downloaded at <http://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/Pages/stdgordr.aspx> and signed by the Grant County Health Officer as soon as possible.

September 30, 2015
(Met Oct. 2, 2015)

LPHA is required to provide technical assistance to hospitals when the rate of reported maternal HBsAg status falls below 95% and/or the administration rate of the birth dose of hepatitis B vaccine falls below 80%. In Grant County, the reported rate of HbsAg screening is 52.6% and newborn hepatitis B vaccine administration is 78.3%. LPHA will develop and implement an action plan to address these two issues with Blue Mountain Community Hospital.

October 30, 2015

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

REVIEWER: Amanda Timmons

RESPONDENT: Jessica Winegar, RN

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR PUBLIC HEALTH SYSTEMS INNOVATION AND PARTNERSHIP UNIT (PHSIP)</p> <p>LABORATORY</p> <p>The LPHA is in compliance with all program requirements.</p> <p>For more detailed information, please see the completed program review tool in section 12.</p>	
REVIEWER: Ronit Zusman	RESPONDENTS: Kimberly Lindsay; Karen Triplett; Jessica Winegar

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 09/16/2015</p> <p>CENTER FOR HEALTH PROMOTION & PREVENTION</p> <p>MATERNAL CHILD HEALTH</p> <p>PERINATAL PROGRAMS</p> <p>Programs meet compliance requirements.</p> <p>For more detailed information, please see the completed program review tool in section 13.</p>	NA
<p>REVIEWER: Francine Goodrich, State MCH Nurse Consultant</p>	<p>RESPONDENTS: Jessica Winegar, RN, Site Manager, Jennifer Workman, RN, MCH Nurse Home Visitor</p>

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>CENTER FOR PUBLIC HEALTH PRACTICE</p> <p>HEALTH SECURITY, PREPAREDNESS & RESPONSE</p> <p>LPHA is not staffed at a level to complete the approved work plan. PHEP Coordinator is funded at .46 FTE in FY 15 Budget and .35 FTE in FY16 PE-12 Budget, but position description indicates PHEP responsibilities are .1 FTE. PHEP Coordinator will submit staffing change recommendation to Administrator to bring into compliance.</p> <p>LPHA does not have evidence of Incident Command System organization charts with specific positions identified for a public health response. PHEP Coordinator will work with Administrator to develop ICS org charts by February 15, 2016.</p> <p>LPHA does not submit After Action Reports within 60 days of exercise or event completion. PHEP coordinator will work with HSPR liaison to conduct after action reviews of all incidents in past six months by June 30, 2016.</p> <p>For more detailed information, please see the completed program review tool in section 10.</p>	
<p>REVIEWER: Kattaryna Stiles</p>	<p>RESPONDENTS: John Combs, Jessica Winnegar</p>

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: SEPTEMBER 23, 2015</p> <p>CENTER FOR PREVENTION AND HEALTH PROMOTION</p> <p>AGRH</p> <p>REPRODUCTIVE HEALTH</p> <p>The LPHA shall comply with all Reproductive Health program requirements by adding the following components:</p>	
1. Ensure all contraceptive method protocols are citing and following US MEC and US SPR guidelines.	12/23/2015
2. Ensure all medical service protocols are citing and following a national standard of care.	12/23/2015
3. Ensure RNs are dispensing contraceptive methods under a current valid prescription.	10/23/2015
4. Ensure the prescribing provider is writing a valid prescription for contraceptives which are dispensed from Grant County Health Department	10/23/2015
5. Ensure family planning staff are provided annual training on counseling minors on how to resist being coerced in engaging in sexual activities.	12/23/2015
<p>For more detailed information, please see the completed program review tool in section 14.</p>	
REVIEWER: Linda McCaulley	RESPONDENTS: Jessica Winegar

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
DATE: 09/10/2015 CENTER FOR PUBLIC HEALTH PRACTICE HIV/STD/TB SECTION SEXUALLY TRANSMITTED INFECTIONS (STI) No compliance findings. For more detailed information, please see the completed program review tool in section 15.	N/A
REVIEWER: Josh Ferrer	RESPONDENTS: John Combs, Jessica Winegar

GRANT 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 16.**

REVIEWER: Sabrina Freewynn

RESPONDENT: Kimberly Lindsay,
Community Counseling Solutions
Executive Director

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
DATE: 9/22/2015 PUBLIC HEALTH DIVISION HIV, STD, TB SECTION TUBERCULOSIS PROGRAM The LPHA is in compliance with all program requirements For more detailed information, please see the completed program review tool in section 17.	N/A
REVIEWER: Heidi Behm	RESPONDENTS: John Combs

GRANT COUNTY HEALTH DEPARTMENT	
COMPLIANCE FINDINGS	TIME LINE FOR CHANGE
<p>DATE: 09/09/2015</p> <p>CENTER FOR PUBLIC HEALTH PRACTICE</p> <p>VITAL RECORDS</p> <p>The Vital Records department is in compliance with all program requirements.</p> <p>For more detailed information, please see the completed program review tool in section 18.</p>	
<p>REVIEWER: Judy A. Shiochi, MPA Vital Records Field Liaison</p>	<p>RESPONDENTS: Kimberly Lindsey, Administrator</p>

GRANT COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2015

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

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

- Assure that all staff have received Civil Rights training annually and that the training is documented (Policy 452). Resolved
November 6,
2015

- Assure that all staff who provide WIC services have completed the required training modules and that they are documented in TWIST (Policy 440 and 660). January 31,
2016

- Assure that there is documentation on file demonstrating that the LA has conducted a self-evaluation of their program operations at a minimum of every other year (Policy 215). Resolved
November 6,
2015

- Assure that ineligibility and graduation letters are issued within appropriate timelines (Policy 636). December 3,
2015

- Assure that a monthly physical inventory with the actual voucher stock is performed (Policy 500). December 3,
2015

- Assure that the local WIC coordinator reviews voucher security and audit trails quarterly (Policy 500). January 31,
2016

-
-
-

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

REVIEWER: Beth Lanham

RESPONDENT: Jessica Winegar

GRANT COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2015

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

WIC FARM DIRECT NUTRITION PROGRAM (FDNP)

- All program areas are in compliance.

-
-
-
-
-
-
-
-
-
-
-

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

REVIEWER: Beth Lanham

RESPONDENT: Jessica Winegar

800 NE Oregon Street, Suite 930
Portland, OR 97232
(971) 673-1222 Voice
(971) 673-1299 FAX
(971) 673-0372 TTY

December 4, 2015

The Honorable Scott W. Myers, Judge
Grant County Board of Commissioners
201 S. Humbolt Street, No. 280
Canyon City, OR 97820

Dear Judge Myers:

The triennial onsite agency review of Grant County Health Department was conducted between September 1 and November 13, 2015. The Oregon Health Authority Public Health Division evaluated county public health programs for compliance with state and federal public health laws and the Financial Assistance Agreement. The review included the appraisal of 18 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 Kimberly Lindsay, Administrator of the Grant County Public Health Department. Staff in the Public Health Systems Innovation and Partnerships Unit will work with her to document resolution of the findings.

We think the report will also be of assistance to your public health 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 compliance and close the file for this review.

Kimberly Lindsay and I have scheduled an in-person exit interview on December 9, 2015 with the Board of Commissioners.

Programs included in the compliance review:

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

Commendations

Administration

The guiding principle for the Grant County Health Department (GCHD) is “providing a quality service in Grant County that residents can be proud of.”

GCHD has enthusiastic and highly capable new leadership and staff that are working hard to create comprehensive policies and business processes that are easily accessible to the public and to the workforce. They are on-course of adopting new planning processes to articulate a vision of health for their community and to engage staff and the community in taking steps to improve the community’s health. This is particularly impressive given the challenges of staff turnover, limited staff FTE, and dealing with devastating wildfires this summer.

The Grant County Health Department Administrator, Kimberly Lindsay, is committed to developing a strong public health infrastructure in Grant County and Oregon. Kimberly, Jessica Winegar (Health Department Manager), and their staff demonstrate team leadership, organizational abilities, strong work ethics and a commitment to grow, rebuild and improve their department.

Grant County Health Department (GCHD) has long-lasting relationships with community members and partners. Among its many partners, GCHD has strong collaborations with Strawberry Wilderness Community Clinic, ROCCO Family Network, Families First, Court Appointed Special Advocates for Children (CASA), and Heart of Grant County to provide

necessary services to many children, adults and families across Eastern Oregon.

Since the last Triennial Review in 2012, Grant County Health Department has been in an on-going transformation process intended to rebuild the department and further develop innovative programs with other community partners in the county and region.

GCHD offers fully embedded primary care services through the health department. This visionary thinking for a rural health department which has been supported by the Grant County Board of Commissioners for the past ten years is applauded.

The opening of the School Based Health Center, made possible by Board of Commissioners support, is another testament to the hard work and the partnerships that GCHD has within the community.

GCHD is adopting an integrated public health model which strengthens connections across programs. This approach has been successful with the increase in nursing FTE for Babies First and Caccon. As a direct result, WIC referrals and immunization rates have increased and community partnerships strengthened.

Grant County has a comprehensive plan that includes a Community Health Assessment (CHA), the Community Advisory Council (CAC) Triangulation Assessment, and the CAC Needs Assessment. In April 2012, Blue Mountain Hospital, Strawberry Wilderness Community Clinic and the Oregon Office of Rural Health co-sponsored the Community Health Improvement Partnership (CHIP) of Grant County. The purpose of the CHIP was to conduct a community-driven health-needs assessment of the entire community. The process provided a structure for involving residents in determining how to organize the health care system according to the community resources, needs, and wants.

Babies First & Perinatal

The GCHD staff that implement the Perinatal and Babies First! programs is a dedicated duo of nurses. They provide crucial Maternal Child Health services to their community families, within an environment of limited resources where staff members work multiple programs with limited FTE

assignment. At time of this Triennial Review process, there have been recent staff changes in key positions. New staff are still orienting to their multiple roles and responsibilities.

Recent implementation (May 2015) of a School Based Health Center (SBHC) at Grant Union High means that GCHD nurses Jessica Winegar and Jenni Workman each devote work hours for coverage at the SBHC. GCHD Nurse Practitioner, Karen Triplett also provides clinic coverage at the SBHC. This is an excellent example of the addition of a vital health resource that will serve community families with a focus on the adolescent population.

Immunization

GCHD staff are dedicated to creating a solid immunization program. The Health Department has recently acquired a new immunization coordinator. Jessica Winegar is enthusiastic and is eager to learn how to maintain a solid immunization program. Jessica seems to be a significant asset to the LPHA. During GCHD's last Vaccines for Children compliance visit in October 2014, there were several compliance issues that have since been corrected.

Sexually Transmitted Infections

GCHD offers STD screening, treatment, and case investigation services out of its clinic location in John Day. The staff do an excellent job of following up on positive chlamydia case reports to ensure individuals are treated for their infections and given the opportunity to have their partners tested and treated. Effective outreach into STD clinical services is also conducted through presentations and dissemination of educational materials throughout the county.

Drinking Water

The Drinking Water report covers services provided from Grant County through the periods of 10/1/2012 – 9/29/15. Grant County's Drinking Water Program is in the hands of very competent and professional environmental health specialists. It is well organized and operated, and works cooperatively with state Drinking Water Program staff to help assure safe drinking water for the 21 water systems it supervises. As of October 1st, 2015, the drinking water program has been returned to the State Drinking Water Program for services provided to public water systems in Grant County.

Food, Pool and Lodging

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

The Environmental Health Specialist responsible for conducting food facility inspections has completed the state standardization certification process. Satisfactory completion of this process complies with the field review portion of the triennial review.

Tobacco Prevention & Education Program (TPEP)

Over the last three years, the Grant County Tobacco Prevention and Education Program (TPEP) has promoted tobacco-free environments in a variety of settings, including, but not limited to, parks, public school districts, hospitals, and health clinics. Additionally GCHD has promoted systems that help people receive appropriate support to quit.

Major accomplishments include passage and strengthening of Grant County Fair's Smoke Free policy and the adoption of the John Day City Park and Gleason Pool Tobacco Free policy.

Grant County TPEP's successes can be attributed to Health Department leadership that understands and supports tobacco prevention work, strong community partnerships, and the knowledge base and experience of the TPEP Coordinator.

Health Security, Preparedness and Response

GCHD Public Health Emergency Preparedness (PHEP) program is led by John Combs and supported by administrator Kimberly Lindsey. With the recent hiring of an interim county emergency manager, the PHEP program has been able to gain some traction on community preparedness activities through the establishment of a local emergency preparedness planning group.

Compliance Findings Summary

Administration

The LPHA is in compliance with all program requirements.

Babies First!

The LPHA is in compliance with all program requirements.

Civil Rights

The LPHA must assure civil rights compliance responsibilities are met by providing documentation that the Civil Rights Self-Assessment (CRSA) has been reviewed by the LPHA.

Communicable Disease

The bloodborne pathogen protocol (BBP) was not updated annually. Last update was more than three years ago.

- Review BBP protocol, update if needed, and create a log to track annual protocol review.

Drinking Water

The LPHA is in compliance with all program requirements.

Fiscal

The LPHA must comply with the following by 1/10/2016:

1. The LPHA must allocate payroll cost in compliance with federal regulations consistent with 2CFR Part 22 Appendix B No. 8 which requires sub-recipient:
 - Use of time sheet/activity reports, signed by the employees and approved by the supervisors/managers to allocate payroll costs to various grants/programs.
 - Ensure employees sign time studies and same is approved by the manager/supervisor.
2. The LPHA must maintain internal controls consistent with 45CFR 74.21 Standard for Financial Management Systems, 45 CFR 92.20 HHS Standards of Financial Management Systems.
 - Sub-recipient must complete and confirm medical supplies and medication inventory on regular basis.
3. The LPHA charges to Federal Awards must follow Federal regulations in 2CFR Part 225 Appendix C for Cost Allocation. GCHD utilizes both cost allocation and indirect rates methods.

- There must be a signed Certification of Cost Allocation Plan, stating that all costs included are allowable.
4. The LPHA must maintain internal control consistent with 45 CFR 59.5 (a) (6-8) Public Health Fees and Title X – Family Planning Charges – Requirements for Family Planning Projects:
 - There must be written Policy and Procedures for fee assessment/collection for Family Planning Services that follow Title X regulations regarding fees/collection for Family Planning Services.
 5. The LPHA must comply with OMB-A133 Subpart C, 45CFR 74.21 Standard for Financial Management Systems, 45 CFR 92.20 and Title X Family Planning Guidelines:
 - There must be a write-off policy and procedure for uncollectible accounts.

Food, Pool and Lodging Health & Safety

The LPHA is in compliance with all program requirements.

HIV Care & Treatment

The LPHA is in compliance with all program requirements.

Immunizations

The LPHA must comply with the following:

1. LPHA is required to practice under current standing orders. Guidelines for Managing Adverse Events standing order should be downloaded at <http://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/ImmunizationProviderResources/Pages/stdgordr.aspx> and signed by the Health Officer by September 30, 2015. **Finding Resolved: 9/2/2015.**
2. LPHA is required to provide technical assistance to hospitals when the rate of reported maternal HBsAg status falls below 95% and/or the administration rate of the birth dose of hepatitis B vaccine falls below 80%. In Grant County, the reported rate of HbsAg screening is 52.6% and newborn hepatitis B vaccine administration is 78.3%. LPHA will develop and implement an action plan to address these two issues with Blue Mountain Community Hospital by October 30, 2015. **Finding Resolved: 9/2/2015.**

Laboratory

The LPHA is in compliance with all program requirements.

Perinatal

The LPHA is in compliance with all program requirements.

Public Health Emergency Preparedness

The LPHA must comply with the following:

1. LPHA is not staffed at a level to complete the approved work plan. PHEP Coordinator is funded at .46 FTE in FY 15 Budget and .35 FTE in FY16 PE-12 Budget, but position description indicates PHEP responsibilities are .1 FTE. PHEP Coordinator will submit staffing change recommendation to Administrator to bring into compliance by June 30, 2016.
2. LPHA does not have evidence of Incident Command System organization charts with specific positions identified for a public health response. PHEP Coordinator will work with Administrator to develop ICS org charts by February 15, 2016.
3. LPHA does not submit After Action Reports within 60 days of exercise or event completion. PHEP coordinator will work with state Health Security Preparedness and Response liaison to conduct after action reviews of all incidents in past six months by June 30, 2016.

Reproductive Health

The LPHA shall comply with all Reproductive Health program requirements by adding the following components:

1. By 12/23/2015: Ensure all contraceptive method protocols are citing and following US MEC and US SPR guidelines.
2. By 12/23/2015: Ensure all medical service protocols are citing and following a national standard of care.
3. By 10/23/2015: Ensure RNs are dispensing contraceptive methods under a current valid prescription. **Finding Resolved: 10/26/2015.**
4. By 10/23/2015: Ensure the prescribing provider is writing a valid prescription for contraceptives which are dispensed from Grant County Health Department. **Finding Resolved: 10/26/2015.**

5. By 12/23/2015: Ensure family planning staff are provided annual training on counseling minors on how to resist being coerced in engaging in sexual activities. **Finding Resolved: 10/26/2015.**

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.

WIC

The LPHA must assure the following:

1. By 11/23/2015: Assure that all staff have received Civil Rights training annually and that the training is documented (Policy 452). **Resolved: November 6, 2015**
2. By 01/31/2016: Assure that all staff who provide WIC services have completed the required training modules and that they are documented in TWIST (Policy 440 and 660).
3. By 11/23/2015: Assure that there is documentation on file demonstrating that the LA has conducted a self-evaluation of their program operations at a minimum of every other year (Policy 215). **Resolved: November 6, 2015**
4. By 12/3/2015: Assure that ineligibility and graduation letters are issued within appropriate timelines (Policy 636).
5. By 12/3/2015: Assure that a monthly physical inventory with the actual voucher stock is performed (Policy 500).
6. By 1/31/2016: Assure that the local WIC coordinator reviews voucher security and audit trails quarterly (Policy 500).

WIC Farm Direct Nutrition Program (FDNP)

The LPHA is in compliance with all program requirements.

Quality Assurance Recommendations

Babies First & Perinatal

1. Recommend consistent use, across programs, of development and use of a Nursing Care Plan that contains all essential components which includes subjective, objective, assessment, plan of intervention/activities and follow-up. Update Care Plan chronologically and cross reference in Nurse Progress notes with a goal of providing clarity and consistency in client record.
2. Recommend that all client records are compiled with same physical structure and format for ease in recording client information.
3. Recommend that client record has designated tabbed sections for ease in locating client information. (e.g. In Babies First! chart, add a "Developmental Screenings" tab for grouping screenings. In a MCM client record, tab could be titled Screenings (depression, IPV).
4. Recommend that both MCH Nurses, (Jessica Winegar and Jenni Workman will attend the MCH 200 Nurse Skills training in Portland when next offered.
5. Develop Policies and Protocols for OMC, MCM and Babies First! program activities.
6. Recommend site visit in September 2016 with State MCH Nurse Consultant to review for above recommendations progress.

Communicable Disease

1. Recommend posting CD data summary reports on the website so the public can access the data.
2. Recommend entering case completion dates in Orpheus database once the case investigations are complete.

3. Recommend interviewing cases per the investigative guidelines.
4. Recommend collecting occupation information for all restrictable diseases.
5. Recommend completing all risk factor questions for all interviewed cases.
6. Recommend completing hospitalization and outcome status.
7. Recommend assessing vaccination status of vaccine preventable disease cases.
8. Recommend interviewing contacts of pertussis cases.
9. Recommend completing outbreak reports within 30 business days from the end of the outbreak.

Health Security, Preparedness and Response

LPHA needs to regularly participate in the newly established Grant County Emergency Planning group currently led by the interim Grant County Emergency Manager.

1. LPHA should work with the interim Emergency Manager to update the ESF-8 / Public Health Response base plan update.
2. LPHA should work with HSPR liaison to review and catalogue all PHEP plans, policies, and procedures in FY16 per work plan.
3. As identified in compliance findings, LPHA should work with HSPR liaison to catch up on after action reviews of 2015 incidents and incorporate the after action process into its regular activities. Additionally, plans should be updated following incidents or exercises per specific recommendations identified in the after action/ improvement plan process.
4. LPHA needs to annually develop and update its three-year progressive exercise and training strategy.

5. LPHA would benefit from regularly participating in monthly HSPR calls hosted for the benefit of LPHAs and bi-monthly regional health care coalition meetings.

Immunization

1. LPHA is encouraged to conduct reminder/recall activities in addition to the monthly, statewide 22-month-old recall.

Reproductive Health

1. Include the statement "no family planning client is denied services because of inability to pay" on the general consent form.
2. Development of medical emergencies protocols for syncope, vaso-vagal reaction, shock and hemorrhage.
3. Performing chart reviews monthly for completeness -- should include an assessment and follow-up plan.
4. GCHD policies are distinct for primary care and family planning services to ensure Title X requirements are followed.

Women, Infants and Children

1. Consider updating Next Step status when appropriate.
2. Recommend WIC coordinator establish a regular monitoring system or schedule to ensure that routine WIC administrative tasks found out of compliance are completed according to requirements.

Other Notes

Fiscal

Grant County Health Department received Federal funds for several programs totaling \$112,731 including \$30,600 for the WIC Program for fiscal year 2014. It appears that the Community Counseling Solution has sufficient internal controls to adequately safeguard assets, to detect and prevent errors in a timely manner. The operation is fairly organized and efficient with commitment to quality, fairness and accuracy.

Health Officer

Dr. David Hall is GCHD's new Health Officer. Dr. Hall is a licensed primary care physician and is in the process of acquiring a knowledge-base in public health. Dr. Hall is responsible for the medical supervision of the health programs.

Laboratory Director

Karen Triplett NP is the new GCHD Laboratory Director. Ms. Triplett provides overall management and administration of the lab. The GCHD lab is in the process of developing comprehensive policies and business processes under the supervision of its staff.

Laboratory Statement of Compliance

Grant County Health Department Laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as a Certificate of Waiver. The laboratory director listed for CLIA is Karen Triplett, FNP. The laboratory CLIA # is 3800667981 and their certificate is valid through October 4, 2016. The CLIA certificate covers the location at 528 E Main Street Suite E, John Day, Oregon 97845. The following tests are being performed on site: UA Dipstick, Urine Pregnancy Test, Hemoglobin, Fecal Occult Blood & Whole Blood Glucose, Rapid HIV, Influenza A&B, Strep A test. There have been no complaints or issues raised to the CLIA program about this laboratory in the past two years. (November 13, 2015)

Overall, Grant County Health Department is composed of a committed team of public health professionals who deliver quality services to the community.

We thank you for your attention to correcting these compliance findings and for the strong public health work you do for the community.

Sincerely,



Danna Drum, Manager
Public Health Systems Innovation and Partnerships

cc: Chris B. Labhart, Commissioner
Boyd Britton, Commissioner
Kimberly Lindsay, Grant County Health Department Administrator