

AGENCY REVIEW

JOSEPHINE COUNTY PUBLIC HEALTH

September 3-12, 2013

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

**Laurie Smith, RN and MaiKia Moua, RN
Public Health Nursing Consultants**

JOSEPHINE COUNTY PUBLIC HEALTH	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR	
COMMUNITY LIAISON	
ADMINISTRATION	
<p>The LPHA must assure fees for public health services are reasonably calculated not to exceed the cost of services performed and charge fees to this schedule.</p> <ul style="list-style-type: none"> • Complete and approve the cost analysis. <p><i>This is a repeat finding from 2010.</i></p>	12/1/2013
<p>The LPHA has nursing staff who are licensed by the Oregon State Board of Nursing.</p>	Immediately. Resolved 10/18/13
<p>The LPHA must assure written policies and procedures exist to guide staff in maintaining appropriate confidentiality standards. This includes:</p> <ul style="list-style-type: none"> • Confidentiality of HIV records. 	12/1/2013
<p>For more detailed information, please see the completed program review tool in section 2.</p>	
REVIEWER: Laurie Smith, MaiKia Moua	RESPONDENT: Linda Stohlman

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

BABIES FIRST!

The LPHA must assure all Targeted Case Management (TCM) case managers are licensed registered nurses with one year of experience in community health, public health, or child health nursing. All community health workers, family advocates, or promotoras will work under the direction of the RN, as defined above.

[OAR 410-138-0060 \(11\)\(b\)](#)

09/09/2013 - A lapse of RN license renewal for the maternal child health staff was discovered during the Administrative Review. A process was started to immediately renew the lapsed Oregon Nursing license. During the interim period of license renewal, this staff person is on administrative leave. Clients have been appropriately notified of staff's out of office status and are under the management of a licensed registered nurse.

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

Immediately.
Resolved
10/18/13

REVIEWER: Fran Goodrich

RESPONDENT: Linda Stohlman,
Ruth Converse

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR

COMMUNITY LIAISON

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: Laurie Smith,
MaiKia Moua

RESPONDENT: Rebecca Robinson

JOSEPHINE COUNTY HEALTH	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p>CENTER FOR PUBLIC HEALTH PRACTICE</p> <p>ACUTE AND COMMUNICABLE DISEASE PROGRAM</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 5.</p>	
REVIEWER: Melissa Powell	RESPONDENT: Diane Hoover

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR HEALTH PROTECTION

DRINKING WATER

The LPHA shall review system scores at least monthly for priority non-complying (PNC) systems and contact the water system operators of PNC systems to discuss any unaddressed violations and ways to correct the non-compliance, including carrying out public notifications (PN) as required.

- Assure there is consistent monthly reviews and monitoring for resolution of PNC systems. Consider developing a written procedure.

9/30/13

The LPHA shall review all persistent PNCs five months after being designated a PNC to determine if the water system can be returned to compliance within the next three months.

- Assure there is consistent review of PNC systems with a five month non-compliant status. Consider developing a written procedure and include references to the DWS PNC procedures.
- If the water system can return to compliance within three months, the LPHA shall send written notice to the owner or operator (copy to DWS) with a compliance schedule listing corrective actions required and a deadline for each action. The LPHA shall follow up to ensure corrective actions are implemented.
 - Assure written notice is sent to the owner or operator and consistently submitted to DWS.
 - Provide follow-ups on water system to ensure deficiencies have been corrected.

9/30/13

9/30/13

- If the water system cannot return to compliance within three months, LPHA shall prepare and submit to DWS a written report for a formal enforcement action. The report needs to

9/30/13

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

include the LPHA's evaluation of the reasons for non-compliance by the water supplier.

- Assure reports are consistently being submitted. Consider developing a written procedure.

The LPHA shall follow-up on water system surveys to verify that any significant deficiencies have been corrected. If all deficiencies are not corrected, place the systems on corrective action plans. To achieve compliance with this program element:

- Contact the following high-priority systems with potential water quality deficiencies and verify all deficiencies are corrected, or place the systems on corrective action plans (copy to DWS).
 - Josephine Co Fairgrounds (94224)
 - Shady Acres RV Park (93797)
 - Wilderville Community Church (05095)

11/30/13

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

REVIEWER: Tom Mitchell

RESPONDENT: Brad Carlson

JOSEPHINE COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR

FISCAL

The LPHA must assure assets purchased with federal funds follow federal regulations in 45 CFR 92.32. This includes at a minimum:

- Physical inventory of capital outlay at least once every two years.

12/31/2013
Resolved
09/17/2013

The LPHA must identify in its accounts all Federal awards received and expended and the Federal programs under which they were received consistent with OMB A-102 Subpart C §.20; OMB A-133, Subpart C §. 300 and 45 CFR 92.20_Standards For Financial Management Systems. This includes at a minimum:

- Accounting records maintained which identify the sources and applications of the funds for each grant particularly the Emergency Preparedness Grant.

12/31/2013

The LPHA must maintain internal controls consistent with OMB A-133 §_300. This includes at a minimum:

- Written fiscal policies and procedures for the Health Department must be signed and approved by Administrator.

12/31/2013
Resolved
10/17/2013

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.

This is a repeat finding from 2010.

12/31/2013
Resolved
09/23/2013

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

JOSEPHINE COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

REVIEWER: Marivic Tupaz

RESPONDENT: Joanne Jett,
Dianne Hoover

JOSEPHINE COUNTY PUBLIC HEALTH	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
CENTER FOR HEALTH PROTECTION	
FOOD, POOL, AND LODGING HEALTH & SAFETY	
The LPHA must conduct a complete inspection to assign public notice of sanitation within 45 days after a food facility opens. OAR 333-012-0055(3)(c)	12/15/13
The LPHA must assure inspection reports are filled out completely and must include all the required information. <ul style="list-style-type: none"> Handwritten inspection reports must have complete information, including the header information (such as the date, license facility number, address, etc.) Inspection dates in the Phoenix computer program must match the written inspection reports. OAR 333-012-0055(3)(d)(A-D) 	12/15/13
During inspection, the LPHA must determine if timely corrective action has been taken on priority (P) and priority foundation (Pf) violations or public health hazards. <ul style="list-style-type: none"> Clearly state on the food inspection report if a P or Pf violation has been resolved at the time of the semi-annual inspection and document specifically how the P or Pf violation was corrected. OAR 333-012-0055(3)(d)(A-D) 	12/15/13
The LPHA must conduct a recheck inspection within 14 days for priority/priority foundation violation that were not corrected during the inspection. OAR 333-012-0055(3)(e)	12/15/31
For more detailed information, please see the completed program review tool in section 8.	
REVIEWERS: Erica Van Ess, Cindy Robinson	RESPONDENT: Justin Fimbres

JOSEPHINE COUNTY PUBLIC HEALTH	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p>CENTER FOR PREVENTION AND HEALTH PROMOTION</p> <p>HEALTHY COMMUNITIES</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 10.</p>	
REVIEWER: Sabrina Freewynn	RESPONDENT: Diane Hoover

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

IMMUNIZATIONS

The LPHA must either document the date the Vaccine Information Statement (VIS) was provided to the patient or guardian on the Vaccine Administration Record (VAR), or modify the VAR to include a statement that the VIS is provided on the date of service, unless otherwise noted.

**Completed
9/11/13**

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

REVIEWER: Sara Beaudrault, Mimi Luther, Lee Schrauben

RESPONDENT: Ruth McBride, Linda Stohlman, Diane Hoover

JOSEPHINE COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR

COMMUNITY LIAISON

LABORATORY

The LPHA is in compliance with all program requirements.

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

REVIEWER: Laurie Smith,
MaiKia Moua

RESPONDENT: Linda Stohlman,
Ruth McBride

JOSEPHINE COUNTY PUBLIC HEALTH		
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE	
<p style="text-align: center;">CENTER FOR PREVENTION AND HEALTH PROMOTION</p> <p>PERINATAL PROGRAM</p> <p>The LPHA shall assure maternity case managers are currently licensed as a Registered Nurse. Maternity Case Management OARs, 410-130-0595, (6), (a), (G)</p> <p>09/09/2013 - A lapse of RN license renewal for the maternal child health staff was discovered during the Administrative Review. A process was started to immediately renew the lapsed Oregon Nursing license. During the interim period of license renewal, this staff person is on administrative leave. Clients have been appropriately notified of staff's out of office status and are under the management of a licensed registered nurse.</p> <p>For more detailed information, please see the completed program review tool in section 13.</p>		<p>Immediately. Resolved 10/18/13</p>
<p>REVIEWER: Fran Goodrich</p>	<p>RESPONDENT: Linda Stohlman, Ruth Converse</p>	

JOSPEHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

REPRODUCTIVE HEALTH

- Add the US MEC risk categories and cite this as the national standard followed for the Nuvaring protocol.
- Develop written client education plans for the counseling and education that is routinely provided at reproductive health visits.

10/15/13
Resolved
9/25/13

10/15/13

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

REVIEWER: Connie Clark

RESPONDENT: Linda Stohlman

JOSEPHINE COUNTY PUBLIC HEALTH

COMPLIANCE FINDINGS

**TIMELINE
FOR
CHANGE**

CENTER FOR PUBLIC HEALTH PRACTICE

SEXUALLY TRANSMITTED INFECTIONS (STI)

The LPHA is in compliance with all program requirements.

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

REVIEWER: Doug Harger

RESPONDENT: Cat Metz, Linda Stohlman, Ruth McBride

JOSEPHINE COUNTY PUBLIC HEALTH

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: Diane Hoover

JOSEPHINE 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 17.

REVIEWER: Lindsey Lane

RESPONDENT: Cat Metz

JOSEPHINE 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 18.

REVIEWER: Judy Shioishi

RESPONDENT: Joanne Jett

JOSEPHINE 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)**

- Processing standards must be met or a temporary extension approved by the State. (Policy 605) RESOLVED
November 2012

- If ANSWR is unable to reach a pregnant woman for her first appointment, assure another attempt is made to reschedule the appointment. (Policy 605) RESOLVED
October 2012

- The proper equipment must be used to take height measurements and measurements must be taken and documented correctly. (Policy Policy 625) RESOLVED
March 2013

- CPAs must change the participant’s risk level from medium to high when required. (Policy 661) *This is a repeat finding from 2010.* RESOLVED
November 2012

- During an infant mid-cert health assessment, assure the diet questionnaire is completed and nutrition education is documented. (Policy 646) RESOLVED
March 2013

- Participants must be offered second nutrition education. (Policy 820) RESOLVED
November 2012

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

REVIEWER: Karen Bettin

RESPONDENT: Tanya Wilkerson

JOSEPHINE COUNTY HEALTH DEPARTMENT

COMPLIANCE FINDINGS – 2012

**TIMELINE
FOR
CHANGE**

CENTER FOR PREVENTION AND HEALTH PROMOTION

**WIC BREASTFEEDING PEER COUNSELING (BFPC)
PROGRAM**

- In compliance with all program requirements.

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

REVIEWERS:

Kelly Sibley and Karen Bettin

RESPONDENT:

Tanya Wilkerson

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

November 5, 2013

The Honorable Simon Hare, Chair
Josephine County Board of Commissioners
Josephine County Courthouse
500 NW 6th Street
Grants Pass, OR 97526

Dear Commissioner Hare:

The triennial onsite agency review of Josephine County Public Health Division was conducted between September 3 and 12, 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 1,014 separate items in 19 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 Diane Hoover, Public Health Administrator. Community Liaison staff 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 Diane 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 and Lodging Health and Safety	Vital Records
Health Officer	WIC
Healthy Communities	WIC Farm Direct Nutrition Program
Immunizations	WIC Breastfeeding Peer Counseling

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 and charge fees to this schedule.

- Complete and approve the cost analysis. *This is a repeat finding from 2010.*

The LPHA has nursing staff who are licensed by the Oregon State Board of Nursing.

The LPHA must assure written policies and procedures exist to guide staff in maintaining appropriate confidentiality standards. This includes:

- Confidentiality of HIV records.

Acute and Communicable Disease

The LPHA is in compliance with all program requirements.

Babies First!

The LPHA must assure all Targeted Case Management (TCM) case managers are licensed registered nurses with one year of experience in community health, public health, or child health nursing. All community health workers, family advocates, or promotoras will work under the direction of the RN, as defined above. OAR 410-138-0060 (11)(b)

Civil Rights

The LPHA must assure civil rights compliance responsibilities are met.

Drinking Water

The LPHA shall review system scores at least monthly for priority non-complying (PNC) systems and contact the water system operators or PNC systems to discuss any unaddressed violations and ways to correct the non-compliance, including carrying out public notifications (PN) as required.

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 - Provide follow-ups on water system to ensure deficiencies have been corrected.
- If the water system cannot return to compliance within three months, LPHA shall prepare and submit to DWS a written report for a formal enforcement action. The report needs to include the LPHA's evaluation of the reasons for non-compliance by the water supplier.
 - Assure reports are consistently being submitted. Consider developing a written procedure.

The LPHA shall follow-up on water system surveys to verify that any significant deficiencies have been corrected. If all deficiencies are not corrected, place the systems on corrective action plans. To achieve compliance with this program element:

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The LPHA must maintain internal controls consistent with OMB A-133 §_300. This includes at a minimum:

- Written fiscal policies and procedures for the Health Department must be signed and approved by Administrator.

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. *This is a repeat finding from 2010.*

Food, Pool and Lodging Health & Safety

The LPHA must conduct a complete inspection to assign public notice of sanitation within 45 days after a food facility opens. OAR 333-012-0055(3)(c)

The LPHA must assure inspection reports are filled out completely and must include all the required information.

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During inspection, the LPHA must determine if timely corrective action has been taken on priority (P) and priority foundation (Pf) violations or public health hazards.

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

Healthy Communities

The LPHA is in compliance with all program requirements.

Immunizations

The LPHA must either document the date the Vaccine Information Statement (VIS) was provided to the patient or guardian on the Vaccine Administration Record (VAR), or modify the VAR to include a statement that the VIS is provided on the date of service, unless otherwise noted.

Perinatal

The LPHA shall assure maternity case managers are currently licensed as Registered Nurses. Maternity Case Management OARs, 410-130-0595, (6), (a), (G)

Reproductive Health

- Add the US MEC risk categories and cite this as the national standard followed for the Nuvaring protocol.
- Develop written client education plans for the counseling and education that is routinely provided at reproductive health visits.

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 is in compliance with all program requirements.

WIC Breastfeeding Peer Counseling (BFPC) Program

The LPHA is in compliance with all program requirements.

WIC Farm Direct Nutrition Program (FDNP)

The LPHA is in compliance with all program requirements.

Other

Fiscal

Josephine County Public Health received Federal Funds for several programs totaling \$684,227, including \$456,159 for the WIC Program for fiscal year 2013. The State General and Other Funds were a source of \$345,465 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

Jim Shames, MD is contracted through Jackson County for the health officer role in Josephine County Public Health. Heather Kahn, MD is transitioning in as the new health officer. She has started to review and sign policies and procedures for the health department.

Laboratory

Josephine County Public Health laboratory is certified under the Clinical Laboratory Improvement Amendments (CLIA) as a Provider Performed Microscopy laboratory. The laboratory director listed for CLIA is Dr. James Shames. The laboratory CLIA # is 38D0662876 and their laboratory certificate is valid until December 31, 2013. The lab is certified at the address of 715 NW Dimmick Street, Grants Pass, Oregon. The following tests are being performed on site: Wet prep/KOH, Urine Preg Test, Hgb, Whole blood Glucose, UA Dipstick, Group A Strep, Occult Blood & HIV Rapid testing. There have been no complaints or issues about this laboratory for the past three years.

School Based Health Centers (SBHC)

Josephine County has three SBHCs sponsored by Siskiyou Community Health Center, Evergreen Elementary, Lorna Byrne Middle School and Illinois Valley

High School. The SBHCs are certified through June 30th, 2015. The Josephine County SBHC system will have a site visit in November 2013.

Summary

Overall, agency reviewers believe Josephine County Public Health 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,



Jan Kaplan, MSW, Manager
Community Liaison

cc: Keith Heck, Josephine County Commissioner
Diane Hoover, Public Health Administrator
Cherryl Walker, Josephine County Commissioner