

**AGENCY REVIEW**

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**October 8 – December 19, 2014**

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

**Jan Kaplan, MSW  
Manager, Office of Community Liaison**

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**COMMUNITY LIAISON**

**ADMINISTRATION**

- Assure that all medical procedures; nurse standing orders and protocols; and communicable disease protocols/orders are reviewed and signed every two years (county policy) by the Medical Director or the Health Officer as appropriate.
- Assure that policies, standing orders and protocols approved by previous Health Officer are signed by current Health Officer.

2/1/2015

12/15/2014

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

**REVIEWER:** Jan Kaplan

**RESPONDENT:** Robert Johnson

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**BABIES FIRST!**

The LPHA is in compliance with all program requirements.

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

**REVIEWERS:** Cynthia Ikata, Anna Stiefvater

**RESPONDENTS:** Jessica Guernsey, Hattie Larrouy, Lauren Fries-Brundidge, Robin Nelson

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**COMMUNITY LIAISON**

**CIVIL RIGHTS**

The LPHA must assure civil rights compliance responsibilities are met.

- Provide documentation that the Civil Rights Self Assessment has been reviewed by the LPHA.

2/15/2015

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

**REVIEWER:** Jan Kaplan

**RESPONDENTS:** Kathleen Fuller-Poe; Larry Brown; Robert Johnson

**MULTNOMAH 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.**

**REVIEWERS:** Melissa Powell, Tasha Poissant

**RESPONDENT:** Loreen Nichols

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIME  
LINE FOR  
CHANGE**

**CENTER FOR HEALTH PROTECTION**

**DRINKING WATER**

The LPHA is in compliance with all program requirements.

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

**REVIEWERS:** Tony Fields, Tia Skerbeck

**RESPONDENT:** Gerald Barnes

**Multnomah County Health Department**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR**

**FISCAL - OFFICE OF FINANCIAL SERVICES**

The LPHA is in compliance with all fiscal and WIC fiscal program requirements.

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

**REVIEWER:** David Coleman

**RESPONDENT:** William Bours

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR HEALTH PROTECTION**

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

The LPHA field staff needs to focus more on the following elements during food facility inspections:

- Ask the PIC if they know how to calibrate probe thermometers and how they clean the probe in-between uses
- Check the temperature of foods that are being reheated for hot holding; if facilities are not reheating foods during the inspection, ask the PIC how they reheat foods and to what temperature
- Ask if the facility is using separate wiping cloth solutions for use with raw meat vs. RTE food contact areas

**Resolved  
12/2014**

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

**REVIEWER:** Dave Martin

**RESPONDENT:** Christie Sweitz

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**HEALTH SECURITY PREPAREDNESS AND RESPONSE**

The LPHA is in compliance with all program requirements.

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

**REVIEWER:** Kris Hansen

**RESPONDENTS:** Dr. Paul Lewis, Uei Lei, Robin Holm, Philip Mason

**MULTNOMAH 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 11.**

**REVIEWER:** Sabrina Freewynn

**RESPONDENT:** Loreen Nichols

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIME LINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**HIV PREVENTION PROGRAM**

The LPHA is in compliance with all program requirements.

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

**REVIEWERS:** Larry Hill, Josh Ferrer

**RESPONDENTS:** Kim Toevs, Shireen Khormooji, Carol Casciato, Robert Johnson

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE -  
IMMUNIZATIONS**

LPHA shall participate in annual AFIX quality improvement activities, and use these rate data to direct immunization activities.

OIP is consulting re: possible adolescent AFIX project. Plan due by 1/31/15

LPHA shall, in accordance with a schedule determined by the Oregon Health Authority in consultation with LPHA, develop and implement an action plan to work with hospitals identified by Oregon Health Authority or LPHA to improve HBsAg screening for pregnant women.

OIP will convene a workgroup with other LHDs to address issue across all major health systems (e.g. Providence, Legacy). Commitment to participate due by 1/31/15

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

**REVIEWER:** Mimi Luther

**RESPONDENT:** Amy Sullivan

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**NURSE FAMILY PARTNERSHIP (NFP)**

The LPHA is in compliance with 17 of the rigorous evidence based practice NFP Mode Elements. There is only one standard that has not been met, Model Element 18: agency convenes a long-term Community Advisory Board that meets at least quarterly to promote a community support system for the program and to promote program quality and sustainability. The agency has completed foundational work towards compliance and is ready to comply with this standard. Their target implementation for their first CAB, is January 2015.

2/15/2015

To demonstrate compliance, please provide meeting minutes and roster of attendance for the initial CAB meeting planned for January. For the January and all subsequent meetings, assure that all meetings are entered into Efforts to Outcomes Database within one week of the meeting.

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

**REVIEWERS:** Cynthia Ikata, Anna Stiefvater

**RESPONDENTS:** Jessica Guernsey, Hattie Larrouy, Lauren Fries-Brundidge, Robin Nelson

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**PERINATAL**

The LPHA is in compliance with all program requirements.

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

**REVIEWERS:** Cynthia Ikata, Anna Stiefvater

**RESPONDENTS:** Jessica Guernsey, Hattie Larrouy, Lauren Fries-Brundidge, Robin Nelson

**MULTHOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

**REPRODUCTIVE HEALTH**

**1. Protocols must be revised**

- All contraceptive method protocols need to cite the US MEC risk conditions for use
- Fee protocol must remove language about charging full fee if a Family Planning client refuses to provide income verification
- STI protocols must cite the national standard being followed
- Abnormal Cervical Cytology protocol must cite the most recent ASCCP recommendations

90 days

**2. Obtain OHA approval of revised protocols**

90 days

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

**REVIEWER:** Connie Clark

**RESPONDENT:** Debbie Powers

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**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 17.**

**REVIEWERS:** Larry Hill, Josh Ferrer

**RESPONDENTS:** Kim Toevs, Shireen Khormooji, Carol Casciato, Robert Johnson

**MULTNOMAH 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 19.**

**REVIEWER:** Sabrina Freewynn

**RESPONDENT:** Loreen Nichols

**MULTNOMAH 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 18.**

**REVIEWERS:** Heidi Behm, Lindsey Lane

**RESPONDENTS:** Laura Reynolds  
Amy Sullivan

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS**

**TIME  
LINE FOR  
CHANGE**

**CENTER FOR PUBLIC HEALTH PRACTICE**

**CENTER FOR HEALTH STATISTICS**

**VITAL RECORDS**

The LPHA is in compliance with all program requirements.

**For more detailed information, please see the completed program review tool in section 20.**

**REVIEWERS:** Judy A. Shioishi, JoAnn Jackson

**RESPONDENTS:** Jade Dodge, Bonnie Moakhamphiou, Ann McGolrick, Louray Barham, Marcela Larenas

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS – 2014**

**TIMELINE FOR CHANGE**

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

- Assure that all staff who provide WIC services have completed all required training modules and they are documented in TWIST. (Policy 440)
- Assure that timeframes for blood work are met. (Policy 625)
- Assure that a full diet assessment is completed. (Policy 625)
- Assure that a connection is made between the participant's program eligibility and desired health outcomes. (Policy 820)

**Resolved  
October 16, 2014**

December 1, 2014

December 1, 2014

December 1, 2014

**For more detailed information, please see the completed program review tool in section 21.**

**REVIEWER:** Beth Lanham

**RESPONDENT:** David Brown

**MULTNOMAH COUNTY HEALTH DEPARTMENT**

**COMPLIANCE FINDINGS – 2014**

**TIMELINE  
FOR  
CHANGE**

**CENTER FOR PREVENTION AND HEALTH PROMOTION**

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

- All program areas are in compliance.

**For more detailed information, please see the completed program review tool in section 21.**

**REVIEWER:** Kelly Sibley

**RESPONDENT:** David Brown

January 20, 2015

The Honorable Deborah Kafoury, Chair  
Multnomah County Board of Commissioners  
501 SE Hawthorne, Suite 600  
Portland, OR 97214

Dear Commissioner Kafoury:

The triennial onsite agency review of Multnomah County Health Department was conducted between October 8 and December 19, 2014. The Oregon Health Authority Public Health Division evaluated county public health programs for compliance with state and federal public health laws and compliance with the Financial Assistance Agreement. The review included the appraisal of approximately 593 separate items in 20 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 Joanne Fuller, 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 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 that and close the file for this review.

Our office will contact Joanne Fuller 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	HIV Prevention
Babies First!	Immunizations
Civil Rights	Nurse Family Partnership
Communicable Disease	Perinatal
Drinking Water	Reproductive Health
Fiscal	Sexually Transmitted Infections
Food, Pool and Lodging	Tobacco Prevention and Education
Health and Safety	Tuberculosis
Health Officer	Vital Records
Health Security, Preparedness and Response	WIC
Healthy Communities	WIC Breastfeeding Peer Counseling

### **Commendations**

#### **Administration**

- The Multnomah County Health Department (MCHD) does an excellent job of providing ongoing briefings to the Board of County Commissioners (Local Public Health Authority) on significant public health issues including health disparities.
- The Local Public Health Plan is comprehensive and reflects significant commitment to ongoing community engagement.
- MCHD provides all of the legislatively required services. It is well organized and provides leadership in health promotion and health education within the community.
- Public health services are well integrated with the primary care services provided by the department.
- Health Department policies and procedures are well organized and available to all staff on-line through the Greenbook.
- All members of the workforce have ongoing training in HIPAA requirements through well documented on-line training.

#### **Early Childhood Services/Healthy Birth Initiative**

The implementation of connecting internal nurse consultants to the Maternal Child Health (MCH) nurse home visiting teams to support the work force and promote skill development is an example of nursing practice excellence not seen in other MCH public health programs throughout Oregon. In addition, the agency's planned pursuit of mental health consultation demonstrates their commitment to providing tools and resources to

nurse home visitors that align with best practices. These investments will promote the continuation of excellent staff retention and strong family outcomes.

The county provides culturally specific services and efforts to improve cultural competence among staff. Upcoming trainings on trauma-informed care are available for staff.

Multnomah County Health Department is streamlining business practices by standardizing encounters, billing and scheduling with policies in place to support these efforts.

The agency has recently invested in Nurse Family Partnership (NFP) client video development. These videos will serve as outreach materials for potential NFP clients. In addition, they have the potential to provide positive feedback and support to the nurses in Multnomah County as well as NFP nurses throughout the state and country.

Multnomah County NFP outcomes are equal to the national 75<sup>th</sup> percentile in the following areas:

- Children that were screened with ASQ in at least one subscale at each interval 96% - 100% (depending on interval)
- Breastfeeding initiation at birth 98%, 63% breastfeeding at six months
- Actual graduation rate 36.7%.

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

Multnomah County is doing an excellent job of providing environmental health services to the community. The overall inspection rate for licensed facilities is excellent with all programs in compliance.

Field staff exhibited good communication skills with operators and employees of the food service facilities during the field review process. In general, staff is focusing on critical risk factors that are most associated with foodborne illness.

### **Drinking Water**

- The emergency plan is easily accessible to those who would need it during emergencies, as both hard copies and electronic versions are in use.
- The LPHA responds appropriately to requests from water systems on interpretation of regulations and routine requests for information.
- The LPHA is consistent and timely in responding to water quality alerts. Average response time is between 0-1 days.

## **Healthy Communities**

- Multnomah County Health Department displays continued dedication to internal worksite wellness, evident by the county's investment in human resources to implement a robust wellness program, tobacco free county campuses and healthy onsite vending guidelines.
- Department shows commitment to serving the community by providing partners with the support and resources necessary to develop and maintain impactful worksite wellness policies.
- Department continues to illustrate a focus on addressing health disparities, evident by efforts to partner with worksites that have limited resources, serve individuals experiencing disparities or employ staff who are at greater risk of experiencing disparities.
- Department continues to be on the forefront of health policy development and implementation, evident by efforts to approach contract procurement with a public health mindset.
- Department continues to address public health in a comprehensive manner, evident by collaborative work with County Clinical Health Services to implement patient self-management services in the clinical setting. Health service staff has been trained in *Living Well* and *Tomando Control de su Salud*, and participate in the Oregon Quit Line fax referral system.

## **Immunization**

The Multnomah County Immunization Program is a very well-oiled, LEAN machine. The oversight to all immunization related services by Ginni Schmitz and Liem Hoang is a tremendous help to us and to all at the county who participate in getting people immunized.

We appreciate the consistent messaging from county leadership around declining resources and increasing demands. The issues weigh heavily on our minds as we make plans for the future.

## **Tobacco Prevention and Education Program (TPEP)**

- Multnomah County Health Department has shown exceptional internal capacity to work on addressing all health issues, including tobacco prevention and education. TPEP staff has built robust partnerships beyond community wellness and prevention to effectively address tobacco use and chronic disease. Staff continues to seek opportunities to coordinate efforts throughout the department.

- Multnomah County has taken an innovative approach to evaluating the quality of county health system's delivery by assessing tobacco use among clients across the county as a health department quality improvement indicator.
- Multnomah County continues to be an exemplary model in pursuing policy intended to improve the health and well being of its employees by the adoption of and implementation of comprehensive tobacco free campus policies.
- Multnomah County Board of Commissioners continues to prioritize health promotion and chronic disease prevention by contributing General Fund to tobacco prevention and education.
- TPEP staff displays exceptional dedication to tobacco prevention work and capacity building by reporting assessment data from 91% of tobacco retailers in the region. This outcome will be an essential foundation for critical tobacco prevention work moving forward.
- TPEP staff has shown commitment to accurate and comprehensive Oregon ICAA enforcement, smoke shop and hookah lounge certification. Staff consistently support efforts state-wide.
- Multnomah County Health Department demonstrates an ongoing commitment to addressing tobacco use disparities. This is demonstrated by a focus on cessation and prevention efforts in the LGBTQ and African American communities as well as with pregnant Native Americans.

## **WIC**

The Multnomah County WIC program clearly excels at collaboration with its community partners. Two excellent examples include a pilot program with Legacy Health and a partnership with Care Oregon. With Legacy, WIC is notified when their participants are being discharged after giving birth. This has the potential to facilitate early breastfeeding support and helps participant retention in WIC. Care Oregon generates a list of all new prenatal patients for the WIC program on a monthly basis. WIC then contacts those women and encourages them to participate in WIC if they are not already.

## **Breastfeeding Peer Counseling (BFPC)**

Multnomah County WIC provides outstanding BFPC services. All of the BFPC records reviewed met or exceeded the minimum requirements for frequency of contact. Participants appear actively engaged in services as demonstrated by a high show rate in group sessions and by the many successful contacts made through calls initiated by peer counselors and mothers. The program appears to be well supported by the agency on many levels including leadership from the WIC Coordinator, David Brown, and excellent

program coordination by the BFPC Coordinator, Mary Wachsmuth. Mary is an IBCLC with several years of experience as a WIC certifier, and she works full-time in the BFPC program. This results in an ideal combination of WIC experience, lactation expertise, and availability and attention to BFPC services and mentoring of peers. The program is well staffed with competent peer counseling staff that is well trained and skilled.

### **Sexually Transmitted Infection (STI)**

The county has an excellent system in place for ensuring persons most at risk are prioritized for STI clinical services.

### **Tuberculosis**

The TB program at Multnomah County is well organized and capable of responding quickly and effectively to new challenges. The TB nurse case managers, health officer and program staff work hard to help patients overcome challenges and obtain the best care possible. The TB program is also very well organized; utilizing forms and work flows that ensure quality and patient safety are maintained.

Multnomah County provides TB services above those required by program element which includes targeted TB testing in homeless shelters and among refugees. These programs have likely contributed to the drop in TB cases seen over the last few years. Overall, an excellent TB program.

## **Compliance Findings Summary**

### **Administration**

- Assure that all medical procedures, nurse standing orders and protocols, and communicable disease protocols and orders are reviewed and signed every two years (county policy) by the Medical Director or Health Officer as appropriate.
- Assure that policies, standing orders and protocols approved by the previous Health Officer are signed by the current Health Officer.

### **Babies First!**

The LPHA is in compliance with all program requirements.

### **Civil Rights**

The LPHA must assure civil rights compliance responsibilities are met.

- Provide documentation that the Civil Rights Self Assessment has been reviewed by the LPHA.

### **Communicable Disease**

The LPHA is in compliance with all program requirements.

### **Drinking Water**

The LPHA is in compliance with all program requirements.

### **Fiscal**

The LPHA is in compliance with all program requirements.

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

The LPHA field staff needs to focus more on the following elements during food facility inspections:

- Ask PIC if they know how to calibrate probe thermometers and how they clean the probe in between uses.
- Check the temperature of foods that are being reheated for hot holding. If facilities are not reheating foods during the inspection, ask the PIC how they reheat foods and to what temperature.
- Ask if the facility is using separate wiping cloth solutions for use with raw meat vs. RTE food contact areas.

### **Health Security Preparedness and Response**

The LPHA is in compliance with all program requirements.

### **Healthy Communities**

The LPHA is in compliance with all program requirements.

### **HIV Prevention**

The LPHA is in compliance with all program requirements.

### **Immunizations**

The LPHA shall participate in annual AFIX quality improvement activities and use these rate data to direct immunization activities.

The LPHA shall, in accordance with a schedule determined by the Oregon Health Authority in consultation with the LPHA, develop and implement an action plan to work with hospitals identified by Oregon Health Authority or LPHA to improve HBsAg screening for pregnant women.

### **Nurse Family Partnership**

The LPHA is in compliance with 17 of the rigorous evidence based practice NFP Model Elements. There is only one standard that has not been met, Model Element 18; agency convenes a long-term Community Advisory Board (CAB) that meets at least quarterly to promote a community support system for the program and to promote program quality and sustainability. The agency has completed foundational work towards compliance and is ready to comply with this standard. Their target implementation for their first CAB is January 2015.

To demonstrate compliance, please provide meeting minutes and roster of attendance for the initial CAB meeting planned for January. For the January and all subsequent meetings, assure that all meetings are entered into Efforts to Outcomes Database within one week of the meeting.

### **Perinatal**

The LPHA is in compliance with all program requirements.

### **Reproductive Health**

#### **1. Protocols must be revised**

- All contraceptive method protocols need to cite the US MFC risk conditions for use.
- Fee protocol must remove language about charging full fee if a Family Planning client refuses to provide income verification.
- STI protocols must cite the national standard being followed.
- Abnormal Cervical Cytology protocol must cite the most recent ASCCP recommendations.

#### **2. Obtain OHA approval of revised protocols.**

### **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**

- Assure that all staff that provides WIC services has completed all required training modules and they are documented in TWIST. (Policy 440)
- Assure that timeframes for blood work are met. (Policy 625)
- Assure that a full diet assessment is completed. (Policy 625)
- Assure that a connection is made between the participant's program eligibility and desired health outcomes. (Policy 820)

### **WIC Breastfeeding Peer Counseling**

The LPHA is in compliance with all program requirements.

### **Other**

#### **Health Officer**

Dr. Paul Lewis is the Health officer for Multnomah County.

### **Fiscal**

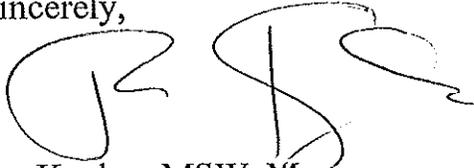
Multnomah County Health Department received Federal Funds for several programs totaling over \$6 million, including \$2,978,292 for the WIC Program and \$221,700 for the WIC Breastfeeding Peer Counseling Program for fiscal year 2014. It appears that the county health department has sufficient internal controls to adequately safeguard assets and to detect and prevent errors in a timely manner. The review indicated a well-run fiscal operation with satisfactory accounting controls, purchasing procedures and attention to detail. The operation is well organized and efficient with a commitment to quality, fairness and accuracy.

### **Summary**

Overall, agency reviewers believe Multnomah County Health Department is composed of a committed team of health care professionals who deliver quality public health services

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

Sincerely,

A handwritten signature in black ink, appearing to be 'JK', written in a cursive style.

Jan Kaplan, MSW, Manager  
Office of Community Liaison

cc: Jules Bailey, Multnomah County Commissioner  
Joanne Fuller, Public Health Administrator  
Diane McKeel, Multnomah County Commissioner  
Loreen Nichols, Community Health Service Director  
Judy Shiprack, Multnomah County Commissioner  
Loretta Smith, Multnomah County Commissioner