

AGENCY REVIEW

NORTHEAST WHEELER COUNTY HEALTH DISTRICT

October 1-30, 2013

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

**Laurie Smith, RN, MPH
Public Health Nursing Consultant**

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR	
COMMUNITY LIAISON	
ADMINISTRATION	
<p>Fees for public health services must be reasonably calculated not to exceed the cost of the services performed. ORS 431.415(3) Submit a schedule of fees that has been approved by the governing board, including statement that the fee does not exceed the calculated cost of the service.</p>	3/31/14
<p>The LPHA must conduct written performance evaluations annually or according to policy. Include review, and updating if needed, for job descriptions. CLHO Minimum Standards</p>	3/31/14
<p>The LPHA must meet HIPAA and state confidentiality requirements, including the following:</p> <ul style="list-style-type: none"> • Assure there is a written policy and procedure for HIPAA training. • Provide documentation that all members of staff are trained in HIPAA requirements. • Assure confidentiality of HIV records are in accordance with current state laws. • Add to Asher CHC HIPAA policy manual: release of immunization records and situations where these may be released without authorization. • Asher CHC HIPAA policy manual states release of protected health information without authorization [is allowed] “to a family member, relative, close personal friend, or other persons”. Obtain consultation with legal counsel to assure compliance of this wording with HIPAA regulations. 	3/31/14

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<ul style="list-style-type: none"> • Include a written policy addressing all rights of minors. • A policy and procedure for mandatory reporting is needed. <p>The LPHA must assure there are written policies and procedures for drug dispensing, storage, security, and accountability, signed by the health officer. OAR 855-043-0130</p> <p>For more detailed information, please see the completed program review tool in section <u>2</u>.</p>	3/3/1/14
REVIEWER: Laurie Smith	RESPONDENTS: Robert Boss, Karen Woods, Susan Moore, Dan Allen

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p>OFFICE OF THE STATE PUBLIC HEALTH DIRECTOR</p> <p>COMMUNITY LIAISON</p> <p>CIVIL RIGHTS</p> <p>The LPHA must assure civil rights compliance responsibilities are met.</p> <ul style="list-style-type: none"> • Provide documentation that the Civil Rights Self Assessment has been reviewed by the LPHA. • Provide documentation that there is a plan to improve any deficient areas identified by the Civil Rights Self Assessment. <p>For more detailed information, please see the completed program review tool in section <u>4</u>.</p>	<p>2/15/14</p>
REVIEWER: Laurie Smith	RESPONDENT: Karen Woods

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p data-bbox="191 436 954 470">CENTER FOR PUBLIC HEALTH PRACTICE</p> <p data-bbox="191 520 1117 554">ACUTE AND COMMUNICABLE DISEASE PROGRAM</p> <p data-bbox="191 604 1075 638">The LPHA is in compliance with all program requirements.</p> <p data-bbox="191 1033 1075 1108">For more detailed information, please see the completed program review tool in section 5.</p>	
REVIEWER: Tasha Poissant	RESPONDENT: Robert Boss

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p>OFFICE OF THE PUBLIC HEALTH DIRECTOR</p> <p>COMMUNITY LIAISON</p> <p>LABORATORY</p> <p>The LPHA must comply with 42 CFR part 493 the Clinical Laboratory Improvement Amendments (CLIA). Assure that:</p> <ul style="list-style-type: none"> • Annual personnel competency testing is documented for all individuals performing laboratory tests, including physicians and mid-level practitioners. 42CFR493.1235 • A system is in place to identify and track all laboratory tests, including pap tests and those sent to a reference laboratory. 42CFR493.1242 and 42CFR493.1291(a) Add lot number of lab test to your existing tracking system. <p>For more detailed information, please see the completed program review tool in section <u>10</u>.</p>	<p>3/31/14</p>
REVIEWER: Laurie Smith	RESPONDENT: Susan Moore

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
CENTER FOR PREVENTION AND HEALTH PROMOTION	
REPRODUCTIVE HEALTH (RH)	
<ul style="list-style-type: none"> • LPHA must ensure that all RH clients voluntarily consent for care 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that there are protocols in place for all services provided within the RH program and that these protocols follow national standards of care 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that the clinical care provided follows the established protocol and the national standard identified within the protocol 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that clients have a choice of birth control options that meets minimum state requirements 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that personal STD risk is assessed and that testing is offered based on client risk and per national standard 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that all Title X elements of a health history are obtained at initial visit and updated yearly 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that a system is in place to evaluate quality assurance for all Title X requirements 	2/21/14
<ul style="list-style-type: none"> • LPHA must ensure that the all required Title X components of setting fees, billing, and fee collection are met 	2/21/14
For more detailed information, please see the completed program review tool in section 12.	
REVIEWER: Connie Clark	RESPONDENTS: Karen Woods, Dr. Boss, Susan Moore

NORTHEAST WHEELER COUNTY HEALTH DISTRICT	
COMPLIANCE FINDINGS	TIMELINE FOR CHANGE
<p>CENTER FOR PREVENTION AND HEALTH PROMOTION</p> <p>TOBACCO PREVENTION AND EDUCATION 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 <u>14</u>.</p>	
REVIEWER: Sabrina Freewyn	RESPONDENT: Dr. Boss

<p align="center">NORTHEAST WHEELER COUNTY HEALTH DISTRICT</p>	
<p align="center">COMPLIANCE FINDINGS</p>	<p align="center">TIMELINE FOR CHANGE</p>
<p>CENTER FOR PUBLIC HEALTH PRACTICE</p> <p>TUBERCULOSIS</p> <p>Locate and make available to staff the TB Exposure & Control Plan. Submit the plan when completed to TB Control, OHA for review.</p> <p>For more detailed information, please see the completed program review tool in section <u>15</u>.</p>	<p align="center">Resolved 11/13</p>
<p>REVIEWER: Lindsey Lane</p>	<p>RESPONDENT: Daniel Allen</p>

December 9, 2013

Ms. Shelly Hankins, Chair
Board of Directors
Northeast Wheeler County Health District
PO Box 312
Fossil, OR 97830

Dear Ms. Hankins:

The triennial onsite agency review of Wheeler County Public Health was conducted between October 1 and 30, 2013. The Oregon Health Authority Public Health Division evaluated local 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 769 separate items in 14 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 Robert J. Boss, MD, Public Health Administrator. Community Liaison staff will work with him 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 has arranged an exit interview on December 16 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	Immunizations
Babies First!	Laboratory
Civil Rights	Perinatal
Communicable Disease	Reproductive Health
Fiscal	Sexually Transmitted Infections
Food, Pool, and Lodging	Tobacco Prevention & Education
Health and Safety	Program
Health Officer	Tuberculosis

Compliance Findings Summary

Administration

Fees for public health services must be reasonably calculated not to exceed the cost of the services performed. ORS 431.415(3) Submit a schedule of fees that has been approved by the governing board, including statement that the fee does not exceed the calculated cost of the service.

The LPHA must conduct written performance evaluations annually or according to policy. Include review, and updating if needed, for job descriptions. CLHO Minimum Standards

The LPHA must meet HIPAA and state confidentiality requirements, including the following:

- Assure there is a written policy and procedure for HIPAA training.
- Provide documentation that all members of staff are trained in HIPAA requirements.
- Assure confidentiality of HIV records are in accordance with current state laws.
- Add to Asher Community Health Center (CHC) HIPAA policy manual: release of immunization records and situations where these may be released without authorization.
- Asher CHC HIPAA policy manual state release of protected health information without authorization [is allowed] “to a family member, relative, close personal friend, or other person”. Obtain consultation with legal counsel to assure compliance of the wording with HIPAA regulations.
- Include a written policy addressing all rights of minors.
- A policy and procedure for mandatory reporting is needed.

The LPHA must assure there are written policies and procedures for drug dispensing, storage, security and accountability, signed by the health officer. OAR 855-043-0130

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.
- Provide documentation that there is a plan to improve deficient areas identified by the Civil Rights Self Assessment.

Communicable Disease

The LPHA is in compliance with all program requirements.

Fiscal

The LPHA is in compliance with all program requirements.

Immunizations

LPHA must operate under current standing orders signed by their health officer.

- Updated standing orders for DT, hepatitis A, hepatitis A IG, meningococcal, MMR, rotavirus, varicella, and zoster must be signed by the health district health officer, Dr. Robert J. Boss.

LPHA must provide patients with current Vaccine Information Sheets (VIS) every time a vaccination is given.

- VIS's for human papilloma virus, rotavirus, and Tdap must be downloaded every time a vaccination is given.

Laboratory

The LPHA must comply with 42 CFR part 493 the Clinical Laboratory Improvement Amendments (CLIA). Assure that:

- Annual personnel competency testing is documented for all individuals performing laboratory tests, including physicians and mid-level practitioners. 42 CFR 493.1235
- A system is in place to identify and track all laboratory tests, including pap tests and those sent to a reference laboratory. 42 CFR 493.1242 and 42 CFR 493.1291(a)
Add lot number or lab test to your existing tracking system.

Perinatal

The LPHA is in compliance with all program requirements.

Reproductive Health (RH)

- LPHA must ensure that all RH clients voluntarily consent for care.
- LPHA must ensure that there are protocols in place for all services provided within the RH program and that these protocols follow national standards of care.
- LPHA must ensure that the clinical care provided follows the established protocol and the national standard identified within the protocol.
- LPHA must ensure that clients have a choice of birth control options that meets minimum state requirements.
- LPHA must ensure that personal STD risk is assessed and that testing is offered based on client risk and per national standard.
- LPHA must ensure that all Title X elements of a health history are obtained at initial visit and updated yearly.
- LPHA must ensure that a system is in place to evaluate quality assurance for all Title X requirements.
- LPHA must ensure that all required Title X components of setting fees, billing, and fee collection are met.

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

Locate and make available to staff the TB Exposure and Control Plan. Submit the plan, when completed, to TB Control, OHA for review.

Other

Fiscal

Northeast Wheeler County Health District received Federal Funds for several programs totaling \$86,245 for fiscal year 2013. The State General and Other Funds were a source of \$88,025 for that period, as well. It appears that the Health District 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.

Food, Pool and Lodging Health & Safety

This program is contracted by Wheeler County with Grant County. There were no compliance findings during this triennial review.

Health Officer

Robert J. Boss, MD serves as both the health officer and the medical director for the Asher Community Health Center.

Laboratory

Asher Clinic Community Health Center laboratory, representing Wheeler County Public Health Department Laboratory, is certified under the Clinical Laboratory Improvement Amendments (CLIA) as a Provider Performed Microscopy laboratory. The laboratory director identified for CLIA is Robert J. Boss, MD. The laboratory CLIA # is 38D0666366 and the certificate is valid through January 21, 2014. The laboratory CLIA certificate covers the location at 712 Jay Street in Fossil, a K-12 school in Mitchell and testing in Sprague. The following tests are being performed: Urine Pregnancy Test, Urine dipstick (for pH, specific gravity, protein, bacteria, nitrite, bilirubin, glucose, red cells, etc), Hematocrit, Group A Streptococcus, Fecal Occult Blood, Whole Blood Glucose, and Prothrombin Time/ INR, Flu test for type A and B, and a sedimentation rate. Wet mounts have not been performed for the past year. There have been no complaints or issues reported to the CLIA program about this laboratory in the past two years.

Public Health Emergency Preparedness

This program is not included as part of the triennial review. A separate annual review process is conducted through the state Health Security, Preparedness, and Response program.

School Based Health Centers (SBHC)

Wheeler County has one SBHC in Mitchell, serving all 68 K-12 students and the community. Mitchell SBHC has a dental operatory and provides dental care for the entire county. This is the only dental service available in Wheeler County. Mitchell SBHC recently went through the process of recertification for the 2015-2017 biennium.

Vital Records

This public health function is accomplished through Wheeler County Court. There were no compliance findings during this triennial review.

Summary

Overall, agency reviewers believe Northeast Wheeler County Health District 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,

A handwritten signature in black ink, appearing to read 'Jan Kaplan', with a large, stylized flourish extending to the right.

Jan Kaplan, MSW, Manager
Community Liaison

cc: Robert J. Boss, MD, Public Health Administrator
Edna Dunn, NEWCHD Board of Directors
Christopher Humphreys, NEWCHD Board of Directors
Sandra Spear, NEWCHD Board of Directors