



Public Health
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North Central Public Health District

North Central Public Health District Full Board of Health Meeting

Date: Tuesday, August 10th, 2021

Time: 4:00 p.m. to 6:00 p.m.

To Be Held Electronically:

To Join Zoom Meeting please use link below:

<https://wascocounty-org.zoom.us/j/87925563279>

Meeting ID: 879 2556 3279

AGENDA

1. **Call to Order**

- Introductions
- Establish a Quorum
- Requests to add items to the Agenda
- Requests for Public Comments

2. **Action Items**

- 7/13/2021 Board of Health Meeting Minutes
- A/P Check Reports – July 2021

3. **Non-Action Items**

- COVID-19 Update
 - Current COVID Funding Update
- Fiscal Report FY 2020-21
- Board members roles and responsibilities.
- Triennial Review Update
- Environmental Health Update
- Contracts Summary
- Administrator Report
 - August 2021

Note: This agenda is subject to last minute changes.

Meetings are ADA accessible. If special accommodations are needed please contact NCPHD in advance at (541) 506-2626. TDD 1-800-735-2900. NCPHD does not discriminate against individuals with disabilities.

If necessary, an Executive Session may be held in accordance with: ORS 192.660(2) (a) to consider the employment of a public officer, employee, staff member or individual agent; ORS 192.660 (2) (d) Labor Negotiations; ORS 192.660 (2) (h) Legal Rights; ORS 192.660 (2) (e) Property; ORS 192.660 (2) (i) Personnel



Public Health
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NORTH CENTRAL PUBLIC HEALTH DISTRICT

419 East Seventh Street
The Dalles, OR 97058-2676
541-506-2600
www.ncphd.org

**North Central Public Health District
Board of Health Meeting Minutes
July 13th, 2021**

Board Members In Attendance: Commissioner Joan Bird – Sherman County; Roger Whitley – Sherman County;); Commissioner Pat Shannon – Gilliam County; Dani Sperry – Gilliam County; David Anderson – Gilliam County; Commissioner Kathy Schwartz – Wasco County

Board Members Absent: Jayme Mason – Sherman County; Taylor Steen – Wasco County

Staff Present: Shellie Campbell – Interim Director NCPHD; Cynthia Rojas – Program Secretary NCPHD; Nicole Bailey – EH Supervisor NCPHD; Lucy Mondragon – Fiscal Manager NCPHD; Dr. Miriam McDonell – Medical Officer NCPHD; Bevan Schroeder – NCPHD; Maria Pena – Community Health Worker NCPHD; Paula Grendel – EH Trainee NCPHD; Eric Grendel – EH Trainee NCPHD; Martha McInnes – Nurse NCPHD; Brita Meyer – Accounting Clerk NCPHD; Lori Treichel – Nurse NCPHD; Neita Cecil – TPEP Coordinator NCPHD; Janelle Sandoz – Nurse NCPHD; Kathi Hall - NCPHD

Guests Present: Members of the Public: Jodi Ketchum; Amy

Minutes by: Laurie Jupe

SUMMARY OF ACTIONS TAKEN

MOTION by David Anderson, and seconded by Commissioner Pat Shannon, to accept the June 8th, 2021 Board of Health meeting minutes as presented.

Vote: 6-0
Yes: Commissioner Joan Bird – Sherman County; Roger Whitley – Sherman County;); Commissioner Pat Shannon – Gilliam County; Dani Sperry – Gilliam County; David Anderson – Gilliam County; Commissioner Kathy Schwartz – Wasco County
No: 0
Abstain: 0
Motion: Carried

MOTION by Commissioner Joan Bird, and seconded by David Anderson, to accept the A/P Checks Issued reports for March, April, and May 2021 as presented.

Vote: 6-0
Yes: Commissioner Joan Bird – Sherman County; Roger Whitley – Sherman County;); Commissioner Pat Shannon – Gilliam County; Dani Sperry – Gilliam County; David Anderson – Gilliam County; Commissioner Kathy Schwartz – Wasco County
No: 0
Abstain: 0
Motion: Carried

MOTION by Commissioner Pat Shannon, and seconded by Dani Sperry, to accept the A/P Checks Issued report for June 2021 as presented.

Vote: 6-0

Yes: Commissioner Joan Bird – Sherman County; Roger Whitley – Sherman County;);
Commissioner Pat Shannon – Gilliam County; Dani Sperry – Gilliam County; David
Anderson – Gilliam County; Commissioner Kathy Schwartz – Wasco County

No: 0

Abstain: 0

Motion: Carried

MOTION by Commissioner Joan Bird, and seconded by Commissioner Pat Shannon, to appoint Shellie Campbell as the new Director of North Central Public Health District.

Vote: 5-0

Yes: Commissioner Joan Bird – Sherman County; Roger Whitley – Sherman County;
Commissioner Pat Shannon – Gilliam County; Dani Sperry – Gilliam County;
Commissioner Kathy Schwartz – Wasco County

No: 0

Abstain: 0

Motion: Carried

CALL TO ORDER: Commissioner Kathy Schwartz called the Public Board of Health meeting to order at 4:01 p.m.

Introductions:

1. None

Establish a Quorum

1. A quorum of the board members present was established.

Requests for Additions to the Agenda

1. None

Request for Public Comment

1. None

ACTION ITEMS

1. Approval of past meeting minutes.
 - 1 A motion was made, and approved, to accept the June 8th, 2021 Board of Health meeting minutes as presented.
2. Approval of A/P Check reports for March, April, and May 2021.
 - 1 A motion was made, and approved, to accept the March, April and May 2021 A/P Check reports as presented.
3. Approval of A/P Check reports for June 2021.
 - 1 A motion was made, and approved, to accept the June 2021 A/P Check reports as presented.
4. Appointment of North Central Public Health District Director.
 - 1 A motion was made, and approved, to accept the appointment of Shellie Campbell as the new Director for North Central Public Health District.

NON-ACTION ITEMS

1. COVID-19 Update
 1. Dr. Miriam McDonnell updated the board on the current COVID-19 status.
 2. Review included information on: County case counts, hospitalizations, vaccination status, deaths associated with COVID, Variants, County vaccination rates (Wasco – 60%; Sherman – 52.8%; Gilliam – 41.8%), and school planning.
 3. Road Map for COVID-19 Vaccination presentation by Martha McInnes
 - a. Objectives for moving forward include:
 1. Outreach strategies to improve vaccine confidence.
 2. Communication to aid in increasing vaccination rates.
 3. Plan for next EUA approval of children 6 months – 11 years.
 - b. Main areas of intervention will include: Community Assessment/Evaluation; Education/Marketing Campaign; Vaccine Delivery.
 4. Martha requested the Board of Health members to:
 - a. Assist NCPHD to partner with each of the counties local medical clinics to ensure there are places where the vaccine can be offered in each county.
 - b. Assist NCPHD to figure out how best to advertise and get the message out in each of their counties.
 5. Discussion, questions, and feedback were requested.
2. Financial Report
 1. Lucy Mondragon reviewed the COVID current funding streams with the Board.
 2. Discussion, questions, and feedback were requested.
3. Staff Retirement Recognition of Kathi Hall
 1. Commissioner Schwartz, and the board members, recognized and thanked Kathi Hall for all of her work over her many years with NCPHD.
4. Contracts Summary
 1. **SECOND AMENDMENT TO BANKMAN AGREEMENT 6_11_21** between Judy Bankman (CONTRACTOR) and North Central Public Health District (NCPHD) for Professional Services.
 - a. *Fiscal Impact:* Estimated cost to NCPHD is not to exceed the amount of \$26,000.
 2. **OHSU COVID-19 LAB TEST Clinical Research Study** at North Central Public Health District.
 - a. *Fiscal Impact:* A \$5,000 stipend to NCPHD for participating in the COVID-19 Lab Test Study.
 3. **ONE TREE HILL AMENDMENT # 1 TO AGREEMENT** between One Tree Hill (CONTRACTOR) and North Central Public Health District (NCPHD) for Professional Services.
 - a. *Fiscal Impact:* Revised estimated “not to exceed amount” of \$22,000.
 4. **PASHEK AGREEMENT** between Robin Pashek (CONTRACTOR) and North Central Public Health District (NCPHD). This agreement outlines the description of services the contractor will provide.
 - a. *Fiscal Impact:* Estimated cost to NCPHD not to exceed \$10,000.
 5. **UMATILLA CONTRACT FIRST AMENDMENT** between Umatilla County and North Central Public Health District for PE 51-02 PH Regional Modernization work in Region 9.
 - a. *Fiscal Impact:* Revised estimated “not to exceed cost” of \$34,000.
 6. **MEMORANDUM OF UNDERSTANDING UTOPIA PDX** between UTOPIA PDX, a Community Based Organization (CBO) and North Central Public Health District (NCPHD). The MOU describes the responsibilities for coordinated engagement, education and outreach activities, contact tracing and social services to support local communities.

a. *Fiscal Impact:* No fiscal impact

7. **WASCO COUNTY VACCINE EFFORTS CONTRACT** between Wasco County and North Central Public Health District (NCPHD) for Gift Cards.

a. *Fiscal Impact:* No fiscal impact

5. Directors Report

1. Shellie Campbell presented the Interim Directors report to the Board.
2. Discussion, questions, and feedback were requested.

Commissioner Schwartz closed the Public Board of Health Regular Meeting at 5:21 p.m.

Commissioner Schwartz opened the Board of Health Executive Session at 5:23 p.m.

1. **Executive Session**

- Executive Session pursuant to ORS 192.660 (2) (a) to consider the employment of a public officer.

Commissioner Schwartz Closed the Board of Health Executive Session at 5:55 p.m.

Commissioner Schwartz opened the Public Board of Health Regular Meeting at 5:59 p.m.

6. NCPHD Administrator Hire

1. Appointment of North Central Public Health District Director.
 - a. A motion was made, and approved, to accept the appointment of Shellie Campbell as the new North Central Public Health District.
2. Discussion, questions, and feedback were requested.

Being no further business to be conducted at this time, Commissioner Kathy Schwartz adjourned the Board of Health meeting at 6:05 p.m.

Signature

Date

Printed Name

NCPHD Recap Report
7/1/20 to 6/30/21

Account Number		Budgeted	YTD REV	YTD EXP	Balance	Pct	
201 PUBLIC HEALTH FUND							
201.00.1201 NON-DEPARTMENTAL	REV	8,000	10,536	0.00	10,535.57	131.69	
(Interest and SAIF Dividend)							
201.23.7141 PUBLIC HEALTH	REV	828,831.00	830,594.32			100.21	Co. GF to local match & program support
General Fund; Septic; Vital Records	EXP	627,110.00		400,290.07	430,304.25	63.83	
201.23.7142 WIC	REV	164,370.00	152,780.49			92.95	
Nutrition for Women & Children	EXP	205,857.00		185,819.87	-33,039.38	90.27	
201.23.7143 IMM. & NURSING SERVICES	REV	36,193.00	28,390.53			78.44	
Child & Adolescent Health	EXP	53,573.00		34,084.85	-5,694.32	63.62	
201.23.7144 REPROD HEALTH	REV	267,510.00	197,585.77			73.86	
Exams & Ed. for Reproductive Health	EXP	337,865.00		210,288.21	-12,702.44	62.24	
201.23.7145 STATE SUPPORT	REV	837,069.00	2,697,467.47			322.25	COVID OHA funding
Exams, treat. & invest. for Com. Disease	EXP	1,019,697.00		1,202,970.81	1,494,496.66	117.97	
201.23.7146 ENVIRON. HEALTH	REV	113,000.00	123,753.28			109.52	
Facility inspections & Education	EXP	163,410.00		100,512.96	23,240.32	61.51	
201.23.7148 PERINATAL HEALTH	REV	124,900.00	222,122.55			177.84	Supports other prog.
Home visiting program	EXP	131,287.00		112,979.79	109,142.76	86.06	
201.23.7149 PH EMERGENCY PREPAREDNESS	REV	265,139.00	140,140.05			52.86	
Emergency preparedness	EXP	279,235.00		185,883.12	-45,743.07	66.57	C/O COVID OHA
201.23.7151 PH MODERNIZATION	REV	336,719.00	324,805.73			96.46	
Public Health Modernization	EXP	346,936.00		260,458.51	64,347.22	75.07	
201.23.7152 HEALTH PROMOTION	REV	174,810.00	237,067.59			135.61	CCO Grants: QIM,
Grants promoting health	EXP	142,237.00		149,436.60	87,630.99	105.06	Mejour Juntos; LCAC
201.23.7153 PH PRACTICE - IMM SERVICES	REV	18,346.00	55,993.12			305.21	
Vaccine inventory; monitoring vaccinations	EXP	27,798.00		24,125.03	31,868.09	86.79	COVID Flu
201.23.7154 CACoon & SYSTEMS OF CARE	REV	55,958.00	50,121.16			89.57	
Home visiting program	EXP	48,246.00		30,380.66	19,740.50	62.97	
201.23.7155 TOBACCO PREV & ED	REV	208,980.00	-3,389.84			-1.62	
Prevention of tobacco use	EXP	208,980.00		44,324.32	-47,714.16	21.21	
201.23.7156 WATER	REV	50,621.00	49,246.48			97.28	
Monitoring of public water systems	EXP	56,627.00		52,274.10	-3,027.62	92.31	
201.23.7158 BABIES FIRST	REV	215,662.00	99,459.04			46.12	
Home visiting program	EXP	278,731.00		212,972.08	-113,513.04	76.41	incl local match for TCM
201.23.7159 OREGON MOTHERS CARE	REV	4,744.00	5,095.00			107.40	
OHP application assistance	EXP	17,706.00		13,821.75	-8,726.75	78.06	Supported by Med. Match
201.23.7500 PASS THROUGH	REV	12,000.00	13,600.00			113.33	
DEQ fees	EXP	12,000.00		11,600.00	2,000.00	96.67	
201.23.7999 NON-DEPARTMENTAL	REV	0.00	0.00			0.00	
(Conting. Unapprop. & Reserves)	EXP	229,752.00		0.00		0.00	
PUBLIC HEALTH FUND	REV	3,599,509.00	5,235,368.31			145.45	
	EXP	4,187,047.00		3,232,222.73		77.20	
BEGINNING FUND BALANCE		579,538.00					
ENDING BALANCE YTD		2,582,683.58			2,003,145.58		Diff. btw total rev. & total exp.



PUBLIC HEALTH DIVISION
Office of the State Public Health Director

Kate Brown, Governor

Oregon
Health
Authority

800 NE Oregon Street, Suite 930
Portland, OR 97232
Voice: 971-673-1222
FAX: 971-673-1299
TTY: 711

July 30, 2021

The Honorable Kathy Schwartz
Wasco County Commissioner
Chair, North Central Public Health District Board of Health
511 Washington St, Ste 302
The Dalles, OR 97058

Dear Commissioner Schwartz:

The triennial onsite agency review of North Central Public Health District (NCPHD) was conducted between February 13, 2020 and December 16, 2020. (Completion of reviews and review reports was delayed due to the focus on the COVID-19 response.) The Oregon Health Authority Public Health Division reviewed NCPHD's public health programs for compliance with state and federal public health laws and compliance with the Intergovernmental Agreement for the Financing of Public Health Services and the Intergovernmental Agreement for Environmental Health Services.

The triennial review included the appraisal of items in 15 program areas, listed below. Program areas with compliance findings are indicated with an asterisk.

Administration	Public Health Emergency Preparedness
Babies First! and Perinatal	Reproductive Health Community
Civil Rights	Participation & Assurance of Access
Communicable Disease*	Sexually Transmitted Diseases
Drinking Water Services*	Tobacco Prevention and Education
Fiscal	Tuberculosis
Food, Pool and Lodging Health & Safety*	Vital Records
Health Officer	
Immunizations*	

An overview report is enclosed, which includes a list of specific compliance findings, descriptions of programs, and areas of strength identified throughout the review. We urge you to review the report as it contains important information about your public health programs and their requirements.

Please note that the results of this triennial review are very good. Our team worked closely with Shellie Campbell, Local Public Health Administrator, to resolve all findings.

A full report with all documentation from the review will be sent to Shellie Campbell. We think the report will be of assistance to your public health staff in their continuing efforts to provide quality public health services to your community.

Overall, reviewers find NCPHD to be composed of a committed team of professionals who deliver quality public health services to your community. The citizens of Gilliam, Sherman and Wasco Counties are very fortunate to have this agency providing comprehensive public health services.

At this time, all findings noted in the report have been resolved. Thank you for your support for the strong public health work NCPHD is providing.

Sincerely,



Andrew Epstein
Public Health Systems Consultant

Enclosure

cc: David Anderson, NCPHD Board
Joan Bird, Sherman County Commissioner, NCPHD Vice-Chair
Jayme Mason, NCPHD Board
Pat Shannon, Gilliam County Commissioner, NCPHD Board
Dani Sperry, NCPHD Board
Taylor Steen, NCPHD Board
Roger J. Whitley, NCPHD Board
Shellie Campbell, Public Health Director and Local Public Health Administrator



July 30, 2021

North Central Public Health District Triennial Review Report

This is an overview report of the triennial review of North Central Public Health District (NCPHD), which was conducted between February 13, 2020 and December 16, 2020. This report is a summary of individual reports from participating programs compiled by the Oregon Health Authority (OHA) Office of the State Public Health Director. Detailed individual reports will be sent to Shellie Campbell, Public Health Director and Local Public Health Administrator. We urge you to review this document as it contains important information about your public health programs and their requirements.

NCPHD received from OHA Public Health Division \$486,605 in Federal Funds for the fiscal year 2019. The LPHA also received \$449,151 from State General Fund Support and \$129,822 Other Funds for the same period.

Report Prepared by: Andrew Epstein, Public Health Systems Consultant, Office of the State Public Health Director

COMPLIANCE FINDINGS SUMMARY

Administration

The Local Public Health Authority (LPHA) is in compliance with all program requirements.

Babies First! And Perinatal

The LPHA is in compliance with all program requirements.

Civil Rights

The LPHA is in compliance with all program requirements.

Communicable Disease

The LPHA must do the following to comply with program requirements:

1. Review the LPHA's Bloodborne Pathogen Protocol annually. **Resolved: 7/29/2021**

2. Complete case investigations within required timeframe and enter dates completed. For cases that are unable to be interviewed, update the date of completion to the date of first interview attempt. **Resolved: 7/29/2021**

Drinking Water Services

The LPHA must do the following to comply with program requirements:

1. Immediately following acute Maximum Contaminant Level (MCL) alerts (E.coli, Nitrate, and Arsenic), consult with and provide advice to the water system operator on appropriate actions to ensure that follow-up sampling is completed, applicable public notices are distributed, and that appropriate corrective actions are initiated. **Resolved: 11/20/2020**
2. Submit level two coliform investigation forms to OHA within 30 days of triggered investigation date. **Resolved: 11/20/2020**
3. Follow up with a failure to take corrective action letter if deficiencies from water system surveys are not corrected by the specified timeframe. **Resolved: 11/20/2020**

Fiscal

The LPHA is in compliance with all program requirements.

Food, Pool and Lodging Health & Safety

The LPHA must do the following to comply with program requirements:

1. Provide justification as to why inspection rates were low in 2019. Submit an implementation plan explaining how licensed facility workload will be prioritized when staff return to conducting field work. **Resolved: 12/11/2020**
2. Completely fill out Inspection reports and obtain signatures on the inspection report that is given to the operator. Completely fill out handwritten temporary restaurant inspection reports and licenses. **Resolved: 12/11/2020**
3. Complete inspections within 45 days of opening for a restaurant or bed and breakfast facility. **Resolved: 12/11/2020**

Health Officer

The LPHA is in compliance with all program requirements.

Immunizations

The LPHA must do the following to comply with program requirements:

1. Have the current influenza standing order and the Guidelines for Managing Adverse Events standing order signed by Health Officer Mimi McDonell.

Resolved: 3/2/2020

Public Health Emergency Preparedness (PHEP)

The LPHA is in compliance with all program requirements.

Reproductive Health Community Participation & Assurance of Access

The LPHA is in compliance with all program requirements.

Sexually Transmitted Diseases

The LPHA is in compliance with all program requirements.

Tobacco Prevention and 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.

PROGRAM OVERVIEW AND STRENGTHS

Administration, Civil Rights and Health Officer

North Central Public Health District (NCPHD) provides an array of public health services within the foundational program areas of communicable disease control, environmental public health, prevention of injury and disease and health promotion, and access to clinical preventive services. The NCPHD Board of Health, which includes commissioners from Wasco, Sherman and Gilliam Counties, is the Local Public Health Authority (LPHA) governing body. Shellie Campbell is interim Local Public Health Administrator and Dr. Mimi McDonell is the Health Officer. An internal leadership team consisting of the Public Health Director, Fiscal Manager, Officer Manager, Clinical Programs Manager, Environmental Health Manager, and Health Officer meets regularly to guide NCPHD's work.

Program strengths:

- NCPHD has a strong leadership team and staff that go above and beyond for the public. The Public Health Director shared as an example that while environmental health staff understand the need to ensure local establishments comply with health

and safety regulations, they provide as much education and mentoring as possible to ensure that businesses can continue to operate if they can do so safely. They balance community safety with empathy for people's livelihood.

- In an environment where LPHAs have limited resources to meet public health needs, NCPHD has successfully leveraged funding opportunities to fill gaps. NCPHD has established itself as a leader through efforts including the Eastern Oregon Modernization Collaborative, which includes 11 LPHAs, the Eastern Oregon Coordinated Care Organization (CCO), and Mid-Columbia Health Advocates. As the lead on this project, NCPHD uses public health modernization funds to employ a regional epidemiology team and has engaged organizations to decrease rates of sexually transmitted infections education and targeted interventions.
- NCPHD received health department accreditation from the Public Health Accreditation Board in 2017 by demonstrating its use of modern standards for public health practice and a commitment to accountability and quality improvement.
- NCPHD maintains strong relationships with both of the CCOs serving community members within its jurisdiction and has worked with the CCOs to elevate the importance of population health approaches, particularly regarding maternal and child health.
- Relationships have been built between NCPHD and law enforcement and corrections, resulting in greater access to reproductive health services and education for those at highest risk, as well as efforts to provide the overdose reversal drug naloxone to people with a history of drug use upon release.

Babies First! And Perinatal

OHA's Maternal and Child Health (MCH) section works to address health promotion issues across the lifespan of individuals and families. The MCH Section provides support to LPHAs to implement Title V activities, the Babies First! Home Visiting Program and the Oregon Mothers Care Program.

NCPHD has prioritized Title V funding to support access to well-woman care through Family Planning Clinics and increase understanding of NEAR science (Neuroscience, Epigenetics, ACES and Resilience), and the impact of childhood adversity on lifelong health. Between 7/1/2019 and 6/30/2020, the Babies First! Public Health Nurse Home Visiting Program served a total of 96 clients (75 infants/children and 21 perinatal/caregivers). Pregnant women are provided with assistance to access health insurance and other services through the Oregon Mothers Care Program.

Program strengths:

- NCPHD has been able to maintain support for families through the Babies First! program despite many shifts to staffing and the need to provide services by telehealth during the pandemic.
- Interim program supervisor is supporting new home visitor by providing orientation and regular reflective supervision.
- Regular Babies First! team meetings are being held and team describes supportive team culture.
- Successful implementation of electronic medical records for home visiting services that provides appropriate documentation of home visiting and targeted case managements services.
- Building partnerships with rural clinics in Sherman and Gilliam Counties to address education, outreach and access to clinical services for adolescents
- Training WIC and Home Visiting staff in food insecurity questions and referral options. Participation in Gorge Grown Food Coalition.
- Support to the COVID-19 response work starting in March 2020.

Communicable Disease

NCPHD's Communicable Disease (CD) program is extremely committed to CD control and prevention with Jeremy Hawkins at the helm. Grace Anderson also does some case investigation, and they had assistance from Callie Lamendola-Gilliam, the Eastern Oregon Modernization Epidemiologist. They have eight active Orpheus (state CD data system) users, though Jeremy does most of CD investigations for the health district. During the review period, Feb 2017-Jan 2020, NCPHD received 193 disease reports, 46 of which required case interviews.

Jeremy Hawkins is extremely knowledgeable about CD prevention and control and answers questions in a timely manner. Jeremy is experienced and reliable, asks questions of state epidemiologist staff as needed, and is a strong partner in Oregon's public health infrastructure. Jeremy is very engaged in protecting public health and has a very collaborative spirit. NCPHD participates leads the Eastern Oregon Public Health Modernization Collaborative and understands the importance of community collaboration including efforts to maintain relationships with providers and local area hospitals.

Drinking Water Services

The drinking water program provides technical services and support to public water systems. These services include responding to water quality alerts, requests from water system operators, drinking water contamination events, responding to spills, emergencies,

and inspection of water system facilities. The drinking water services provided to water systems result in reduced health risk and increased compliance with drinking water standards. The drinking water program reports data to OHA Drinking Water Services (DWS) as necessary for program management and to meet federal Environmental Protection Agency (EPA) Safe Drinking Water Act program requirements.

NCPHD's Drinking Water Program is in the hands of professional and hardworking Environmental Health Specialists. The program works cooperatively with state Drinking Water Services staff to help assure safe drinking water for the 61 active public water systems it supervises.

Fiscal

The finance division of NCPHD is charged with all fiscal matters, including developing, maintaining, and monitoring the NCPHD budget; monthly revenue and expenditure reporting and reconciliations to managers/supervisors; and managing federal and state grants and awards. The finance division is also responsible for contract development, monitoring/oversight and implementation; human and administration resources services; and contractually-required fiscal and data collection, analysis and reporting.

NCPHD has sufficient internal controls to adequately safeguard assets, and to detect and prevent errors in a timely manner. The operation is well organized, monitored and efficient with a commitment to quality, fairness and accuracy

Food, Pool and Lodging Health and Safety

NCPHD's Environmental Health Program works in partnership with OHA and the industry to protect public health by licensing, inspecting and enforcing health and safety regulations in food, pool and lodging facilities. These facilities include restaurants, mobile food units, temporary food booths at events, public pools and spas, hotels and motels, bed and breakfasts and organizational camps.

North Central Public Health District (NCPHD) Environmental Health staff are doing a good job of providing environmental health services to the community. Due to several staff changes/retirements in 2019, the overall average inspection rates for the 2017-2019 review period dropped in some licensing categories. As of the time the review was conducted, NCPHD was fully staffed, which will enhance the LPHA's ability to achieve required inspection frequencies going forward.

OHA understands the need for flexibility during the COVID-19 pandemic and does not expect LPHAs to meet inspection quotas during this time. After the pandemic and/or the Governor's Emergency orders have ended, a timeline will be established by OHA to determine when LPHAs should be back in compliance for inspection rates in all licensed facility programs.

Immunizations

North Central Public Health District's immunization program has been implemented by a long-term Immunization Coordinator, Dianne Kerr, who is now considering retirement. Rebecca Swora, the new coordinator, has been with the district for a couple of years but is new to the position. Having an experienced mentor to assist with the transition is a significant benefit. The LPHA should consider encouraging cross-training to develop additional depth to the program.

North Central PHD is committed to improving immunization access in their community. They have recently taken on additional delegate agencies in Maupin and Moro. They have worked with CareOregon to assure patients are assigned to primary care providers that provide vaccines and they encourage patients to be vaccinated in their medical homes.

Public Health Emergency Preparedness

NCPHD's Public Health Emergency Preparedness (PHEP) Program is currently coordinated at 1.0 FTE, by Tanya Wray, who serves as PHEP Coordinator among other duties, including coordinating the Wasco County Medical Reserve Corps. The Emergency Preparedness Program – Program Element 12 contract also funds the following positions/FTE: CD Control Investigator (.40 FTE) and Health Officer (.02 FTE). The PHEP program receives the following in-kind support from NCPHD: Environmental Health Supervisor (.10 FTE), RN's (.05 FTE), Admin/Admin Support Staff (included in indirect charges).

NCPHD's Emergency Preparedness program demonstrated many notable strengths, including the following examples:

- NCPHD maintains a robust All-Hazards base plan and supporting planning documentation.
- NCPHD's PHEP Program develops a comprehensive Annual Work Plan and Multi-Year Training and Exercise Plan, which contribute to program success.
- All NCPHD staff receive emergency preparedness training, including FEMA's IS 100 & 700 courses at a minimum.
- NCPHD regularly conducts routine and emergency communications with the community at large.
- NCPHD has demonstrated aptitude in responding to emergencies such as the COVID-19 Pandemic response (2020-present), and numerous large-scale wildfire responses including White River Wildfire (2020) and Substation, Long Hollow, and South Valley Fires (2018). Wildfire response has involved supporting widespread evacuations, addressing impacts to a long-term care facility and other

vulnerable populations within the community, support to Fire IMT for COVID-19 response in camp, public information and warning, etc.

- NCPHD supported enhanced community readiness by participating in the Statewide Operation OX Medical Countermeasures exercise.
- Participation in efforts such as the Region 6 Health Care Coalition (HCC) supports working relationships with local Emergency Management and the larger response community. These relationships leverage enhanced opportunities for coordination in planning, training, exercise and response activities.
 - NCPHD is recognized for outstanding effort in hosting of the Regional ESF-8 quarterly meetings and facilitating subcommittees.
- NCPHD is commended for leading or participating in a variety of special projects, including:
 - Facilitation of Wasco County Medical Reserve Corps (MRC), including organization of the annual Wasco Co. MRC Blanket Drive (8th annual) to benefit local homeless shelter.
 - “Step It Up Students”, a special grant funded project, which partners schools and MRC.
 - 2018 State Homeland Security Grant: First aid training for Wasco County MRC members and citizens.
 - Active member of “Get Ready The Dalles” planning committee.
 - Participation in Wasco County Crisis Response Committee and School Reunification Committee.
 - COVID response: NCPHD has worked to coordinate with partners throughout the duration of the COVID-19 response.

Reproductive Health Community Participation and Assurance of Access

NCPHD provides clinical services within their community and works with at least six local partners to improve access to reproductive health services. They have created and implemented a local program plan to help ensure access to reproductive health services.

NCPHD is doing a good job meeting across their three-county region to ensure community members and organizations understand how to access reproductive health services within their community. For example, NCPHD conducted focus groups with young people to better understand how to incorporate social media into reproductive health outreach. As a result, they have created several social media tools and campaigns to increase their online presence.

In addition to the relationships with community members, NCPHD developed several relationships with local organizations to expand access to reproductive health services. For example, they developed a relationship with the local corrections agency, NORCOR,

and was able to leverage grant funds to begin providing reproductive health services in the correctional facility.

NCPHD has done a great job developing and nurturing partnerships with community-based organizations across the region. One relationship that stands out is with The Next Door, a social services organization that provides a multitude of services including foster-care, OHP enrollment assistance, and economic development trainings. OHP Enrollment Assistants at The Next Door were interested in conducting outreach and education to the LatinX community about reproductive health services available within their community. Together, NCPHD and The Next Door developed messaging for radio and social media. They also organized efforts to conduct outreach at community meetings and events.

Another partnership that stands out is with the Gorge Urology clinic. NCPHD did a great job developing this relationship, finalizing the MOU, and working to provide referrals for vasectomy services within their community. There is a lot of enthusiasm among providers and community members around these expanded services. This community partnership is a great example of improving access to reproductive health services.

Sexually Transmitted Diseases (STD)

NCPHD provides STD testing, treatment, and partner services for Wasco, Sherman, and Gilliam Counties out of its location in The Dalles. The district's STD morbidity is concentrated in Wasco County. The county's chlamydia rate in 2019 was 463 per 100,000 people, slightly higher than the statewide chlamydia rate of 451.9/100,000. The county's gonorrhea rate in 2019 was 84 per 100,000 people, much lower than the statewide rate of 144.1/100,000. The early (i.e., infectious) syphilis rate in 2019 was 7 per 100,000 people, lower than the statewide rate of 11.4/100,000. By comparison, the 2017 rates for chlamydia, gonorrhea, and early syphilis were 284.1, 51.7, and 3.7 per 100,000, respectively. Across the district, there were just seven early syphilis cases and four late syphilis cases in the review period. The district's gonorrhea case count rose from 15 in 2017 to 26 in 2019.

Program strengths:

- The NCPHD team consists of extremely dedicated staff working on STD case investigations and in STD clinical services. Orpheus documentation is excellent.
- The NCPHD's informative website includes helpful information related to STD services, including what happens during an STD visit, what to do in case of adverse effects to STD medications, and how to inquire about costs of care.
- NCPHD conducts educational outreach about STD prevention through presentations in schools and community outreach through fliers and social media posts.

Tobacco Prevention and Education Program

NCPHD's Tobacco Prevention and Education Program (TPEP) takes a comprehensive approach to tobacco prevention. The program facilitates community partnerships, creates tobacco-free environments, promotes quitting among adults and youth, and works to reduce the burden of tobacco-related chronic diseases. NCPHD has fulfilled all local duties and activities related to enforcing the Oregon Indoor Clean Air Act.

NCPHD's TPEP works with community partners and decision-makers to protect people from secondhand smoke by promoting local expansion of the Indoor Clean Air Act (ICAA) and establishment of tobacco-free spaces. The program works with decision-makers across three counties through regular presentations and engagement efforts, and has cultivated strong partnerships with other tobacco, alcohol and other drug prevention staff to create a regional prevention approach. NCPHD's TPEP promoted the Oregon Tobacco Quit Line by integrating information into presentations with community members, decision-makers, medical offices, and through their regional work to create and improve closed loop referral systems for tobacco cessation.

Tuberculosis (TB)

NCPHD is low incidence for TB. There were no cases of TB disease since the last review period. There were B waiver immigrant TB referrals and probable TB cases during the review period.

NCPHD tests for and treats latent TB infection (LTBI). This exceeds expectations as described in the TB program element. Testing and treating LTBI provides staff with valuable experience managing TB when there are no cases of TB disease. NCPHD allows staff time to attend training about TB and staff are knowledgeable about TB. NCPHD has all the needed lab services available to care for TB patients.

Vital Records

A total of 336 deaths and 237 births occurred in Sherman and Wasco Counties between November 3rd 2019 and November 3rd 2020. (Gilliam County provides its own vital records services separately from NCPHD.) The office of vital records serves their community by offering a local office where certified copies of birth and death records are available to order by authorized individuals. The district is limited to providing this service for the first six months after the event, whether birth or death. Orders placed in this office are completed within one day.

NCPHD's Office of Vital Records consistently provides excellent customer service to their customers and partners in the community. Productivity reports show strong marks, and customer orders are properly entered and processed per statute. Staff members in the

state office who work with the county staff report a similar high regard for the work of this office.

QUALITY ASSURANCE RECOMMENDATIONS

Administrative

1. Continue the excellent work of building foundational capabilities including epidemiology, health equity and leadership for NCPHD and Eastern Oregon through ongoing participation in the Eastern Oregon Modernization Collaborative.

Babies First! And Perinatal

1. Work with MCH Nurse Consultant to regularly review ORCHIDS program data to improve quality of data.
2. Consider changes to EMR that prompt all areas of nursing assessment to be documented.
3. Use of prenatal weight gain grid is recommended. Use validated screening tools for substance use disorder, IPV and mood disorders (see Babies First! clinical guidelines) required. Recommend standardizing parent-child interaction assessment and intervention (see Babies First! clinical guidelines).
4. Support supervision for all home visitors that includes two hours of reflective supervision per month, four charts reviewed per nurse per year, and one observed home visits per year.
5. Develop and implement a procedure to ensure regular review of program policies (at least every three years).

Communicable Disease

1. Create and post online an annual report of communicable disease reports for counties within NCPHD that is posted online. Link to the state's communicable disease monthly reports posted on OHA's website.
2. Check vaccine status on all cases of chronic hepatitis B cases. This can be done by the internal button to query alert.
3. Create cases from ELRs and eCRs within one working day of being reported.



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NORTH CENTRAL PUBLIC HEALTH DISTRICT

“Caring For Our Communities”

419 East Seventh Street, The Dalles, OR 97058

Phone: 541-506-2600 Fax: 541-506-2601

Website: www.ncphd.org

August 4, 2021

To: NCPHD Board of Health

From: Nicole Bailey, REHS Supervisor

Subject: Environmental Health Work Update

The Environmental Health (EH) section of NCPHD provides a wide array of public health services for our three counties enforcing state and federal regulations with an educational, collaborative attitude to provide our community with safe food, water, air, and an environment that inhibits the spread of disease or preventable accidents.

During COVID our work processes changed as we were brought into the the branch of the local emergency response that took on informing ourselves on the new OSHA regulations as well as the OHA and Governors executive orders. From there we were in a whirlwind, conveying this information to the mass of businesses that were struggling to sift through the information and misinformation. As of July 1 when the governor effectively opened up Oregon, the Environmental Health office has been slowly starting to shift back to more of our regular work duties. I wish to share a small update of those priorities going forward:

Food Pool and Lodging Program

As of July 23, 2021, I received information from our environmental health OHA partners on the future work plans and ways to prioritize health inspections of our local licensed businesses. This list is meant to help guide efforts, but is not mandatory. The OHA has firmly stated several times that they will not be requiring LPHA to inspect facilities until January 1, 2022. This is as a courtesy to the fact that many REHS have been pulled into work focused on COVID and low inspection rates will not be noted as a finding on future triennial review. This date may be reevaluated as the pandemic persists. Our inspectors have completed around 20 inspections in July, albeit including re-inspections and pre-openings for new businesses. As a very rough estimate, normal

August 2021

inspection rates would be around 30 per month to hit 95-100% completion. The availability to do inspections rises after the summer ends, with the winter being the best for inspecting businesses for several reasons.

The state has suggested that we could prioritize first:

- Organizational Camps- congregate settings
- Food Service Facilities with a history of struggling with priority violations or complex menus.
- Food Service Facilities that serve a vulnerable population such as the hospital or community meal sites.
- Pool or Spas that may have been closed a long time or have historical operational problems.

After the priority facilities these could be addressed workload permitting:

- Hotels and Motels, Bed and Breakfasts
- Lower risk food facilities: Class 1 Mobile units, Coffee stands
- Remainder of pools if open
- RV Parks

The EH team has recently implemented weekly meetings to get into the rhythm of looking at the metrics as a team, and in the future will bring these updates to the BOH. We anticipate unfortunately more re-inspections, as some of our facilities will have lost that education factor that they normally get twice a year.

Onsite Wastewater Program

The EH department is the regulatory authority for the permitting of altering, installing, or repairing onsite septic system for wastewater disposal. This is a very rule and time intensive program that also is balanced by working with homeowners and septic businesses. Due to dual factors of the pause or lull in construction over the past year due to COVID ending, combined with the recent low interest rates causing a boom in housing developments, there has been a large boost in work for our department.

We have been implementing a more modernized approach to our permitting and evaluating processes, and we have plans to create more formalized procedures for this program in the coming year. The formalized procedures will help create a more standard approach to how we implement this program, as well as giving us the flexibility to provide more quality services and potentially creating pathways to having a closer relationship with our local planning departments and partners in compliance.

August 2021

For example,

- Establishing more realistic set timelines for the community of when to potentially have their work approved will give us the ability and flexibility to create better reports and note issues with the work proposed.
- Requiring better quality plans and communication upfront with our septic installers has recently been catching the need for major repairs (drain field replacement) done on properties that may have at first applied for a minor repair.
- Better note taking, copying of emails or printing emails to share between REHS staff members, more photo taking, and further documentation has been implemented.

We have onsite meetings with the DEQ planned to assist in an overview our program to give us an idea of how other counties put on this work. There has a consideration to plan a potential time study to evaluate and provide the board to venture if we could in the future hire more staff to work in the EH program.

Safe Drinking Water Program (DWP)

The EH departments implements a third program (DWP), as we oversee public water systems chemical monitoring and help them protect their drinking water sources. This is a program that we frequently need to be immediately available for, as the roughly 70 water systems we regulate are constantly sampling for contaminants. When a sample that a water system has taken gets an alert for a contaminant that may be harmful, we are required to reach out to the operator and provide assistance and verify action taken to mitigate hazards. This can trigger required site visits, public notices written, and lots of phone calls with either the state, the water system operators, and concerned citizens.

Due to COVID-19, our surveys (which is the term for the in-depth inspections that we perform on the water systems operations and physical locations) were suspended but not cancelled. This suspension was at the recommendation of the state. This means we currently have around double the surveys on our list from the previous year. As we

move forward with catching up on our surveys there are a couple factors that will be kept in mind:

- Our REHS trainees Eric and Paula received limited training on performing water system surveys due to one of their two years with NCPHD being focused around COVID. They are self-motivated, intelligent, and excellent inspectors, but due to the fact that we haven't been able to perform these surveys in 2020 they will take more time to complete as a whole since comfort with the program comes over time.
- Some of our water systems close for either wildfire risk, winter weather, or they may be a campground that has closed for COVID. All water systems may not be running and be able to be surveyed this year.
- A frequent bout of several alerts has us working closely with a few operators on site visits to various locations that may take precedence over normal survey planning.

I anticipate now that we have passed by the bulk of the summer, that we can take some time to schedule a few surveys every month work permitting.

Thank you for listening to my update on our three programs, as well as the other environmental factors that we are asked about and learn about every day.

On a final note, I mentioned that our REHS inspectors are currently trainees. They are anticipated to take the REHS exam this fall to get the credential required to be licensed as a full REHS. Their work duties are not planned to change, but the distinction is an accomplishment that can tend to feel like a looming hurdle for trainees and they will have earned a title change.



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NORTH CENTRAL PUBLIC HEALTH DISTRICT

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The Dalles, OR 97058-2676
541-506-2600

NORTH CENTRAL PUBLIC HEALTH DISTRICT BOARD BY-LAWS

SECTION 1. General Powers and Duties

- (a) The North Central Public Health District (District) is formed and operates under an Intergovernmental Agreement between Wasco, Sherman and Gilliam Counties (Party or Parties). Continuation of the District and its Board is subject to continuation of the Intergovernmental Agreement.
- (b) The Board has the powers and exercises the duties and functions conferred upon it by state law. The Board serves as the public health authority for public health services in Wasco, Sherman and Gilliam Counties. ORS chapter 431, including revisions and amendments, is incorporated into these by-laws.
- (c) The Executive Committee consists of the three Board members who are members of the party governing bodies. The Executive Committee may convene at the Board's direction. Decisions made by the Executive Committee are deemed decisions of the Board unless the Board, at its next meeting, modifies or reverses any decision of the Executive Committee.

SECTION 2. Membership

- (a) The Board is composed of nine members:
 - 1) One member appointed by each Party governing body; and
 - 2) Two residents of each party county.
- (b) Members of the Board are appointed by the governing body of each county.
- (c) Initial members of the board will be appointed to one year, two year and three-year terms from each county. Thereafter, all Board terms will be for three-years.

SECTION 3. Election of Officers

- (a) The Board will elect a Chair who presides at all meetings of the Board.
- (b) The Board will elect a Vice-Chair who presides at all meetings of the Board in the absence of the Chair.
- (c) Board officers will be elected at the first regular meeting of each fiscal year and serve for one year, commencing immediately upon election.
- (d) Election of officers will be in accordance with Section 8 of these by-laws.

SECTION 4. Regular Meetings

- (a) The Board will hold regular meetings on a monthly basis and more frequently as needed.

Time, date and place will be determined annually at an organizational meeting. Public notice is required for all meetings.

- (b) All Board meetings are open to the public and will be conducted in accordance with the Oregon Public Meetings Law.
 - 1) Executive meetings will be conducted in accordance with the Oregon Public Meetings Law.

SECTION 5. Special Meetings

- (a) Special meetings may be called for any purpose as necessary by or at the request of the chair, or two members of the Board. Meetings may be held at any place within the District as designated in the public notice.
- (b) Notice of special meetings must be given to all Board members as provided in Section 6 of these by-laws. No special meeting may be held without such notice.

SECTION 6. Notice of Meetings

- (a) The Administrator will provide for and give public notice of the time and place for meetings and of the principal subjects to be considered. If only an executive session will be held, the notice will state the specific provisions of law authorizing the executive session.
- (b) No special meeting will be held without at least 24-hours' notice to the Board members and the general public except in the case of emergency. In the case of emergency, a meeting may be held upon such notice as is appropriate under the circumstances but minutes will identify the emergency situation.

SECTION 7. Quorum

- (a) Five Board members including at least two county governing body members is required for a quorum for a meeting.
- (b) Board members may establish a quorum and participate in meetings in compliance with the Oregon Public Meetings Law.

SECTION 8. Board Decisions

- (a) An affirmative vote of a majority of the Board members participating in a meeting is the act of the Board.
- (b) There will be no voting by proxy. However, another member of a county governing body may participate and vote at a Board meeting in the absence of the appointed Board member from that county.

SECTION 9. Minutes

- (a) Minutes for all meetings will be kept by the Administrator and signed by the chair or vice chair. Minutes will be available for public inspection.

- (b) The signed minutes of all meetings will be stored in a secure, locked, fire proof cabinet. An electronic copy is stored in the NCPHD shared drive.
- (c) District resolutions and rules adopted by the Board will be stored in a secure, locked, fire proof cabinet.
- (d) Original records of Board actions will be archived by the District in a suitable location.

SECTION 10. Resolution and Rules

- (a) The Board may adopt resolutions and rules on various subjects. Such resolutions adopted under Section 8 are binding upon and within the District.
- (b) The Board will not adopt any resolution or rule that is inconsistent with or less strict than any public health law or rule of the Oregon Health Authority.
- (c) The Board may create an advisory board under the provisions of ORS 431.414.

SECTION 11. Fiscal Year and Budget

- (a) The fiscal year of the Board begins on the first day of July.
- (b) The Board may review and discuss a preliminary budget for each fiscal year on or before the first day of April of the preceding year or at such time as specified by the Parties. A District annual budget is not binding on all Parties unless it is approved by each Party governing body.
- (c) Annually and before April 1 of each year, the NCPHD Board of Directors shall appoint a Budget Officer who shall prepare and recommend to the Budget Committee an administrative budget, per Oregon Budget Law, for NCPHD for the ensuing year which will be adopted by resolution at the June Board meeting. The Budget Committee members shall consist of one (1) Board Member from each Party governing body, who is an elected official of that County's legislative body, and one (1) lay person appointed by the legislative body of each participating County. Pursuant to ORS 294.414, appointive members of the Budget Committee may not be officers, agents, or employees of the municipal and county corporation. The term of the Budget Committee members shall be for one (1) year.
- (d) Prior to April 1 of each year, the Budget Committee shall determine the financial contributions from NCPHD Party governing bodies that will be necessary for the ensuing year. If it is determined that contributions from Party governing bodies will be necessary to operate programs for the ensuing year, the Board of Directors will set the assessment amount and immediately inform the Party governing bodies of their share.
- (e) Following formal notifications and approval of assessment, Party governing bodies shall be billed either on a monthly or quarterly basis by NCPHD Finance.

SECTION 12. Health Officer

- (a) If the Administrator is not a physician licensed by the Oregon Board of Medical Examiners, the Administrator will employ or contract for services of a health officer who is a licensed physician to perform medical responsibilities that must be provided by a physician.
- (b) The physician health officer is responsible to the Administrator for the medical and paramedical aspects of District programs

SECTION 13. By-Law Amendment

Amendments to these by-laws may be made at any meeting of NCPHD provided the following procedure has been followed:

- (a) The prepared amendments together with the section to be amended and the reasons for the amendment shall be presented to the Board Chairman in sufficient time to provide each Board member with a copy no less than 15 days prior to the meeting at which the amendments are to be adopted.
- (b) The finance manager provides a statement as to fiscal impact of proposed amendments.
- (c) A vote to amend these by-laws shall require approval by a majority of the Board members provided that a majority of the participating county governments cast an affirmative vote.

SECTION 14. Parliamentary Procedure

The Board will use Roberts Rules of Order, latest edition, to guide its meetings. **APPROVED AND SIGNED** by the appropriate officer authorized to execute these By Laws on behalf of the governing body of each Party.

WASCO COUNTY COMMISSION

Date: _____

Approved as to Form:

Commissioner Kathy Schwartz, Wasco County
Board of Health Chair

GILLIAM COUNTY COURT

Date: _____

Approved as to Form:

Commissioner Pat Shannon
Board of Health

SHERMAN COUNTY COURT

Date: _____

Approved as to Form:

Commissioner Joan Bird, Sherman County
Board of Health Vice-Chair



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NCPHD Contracts Summary for Board of Health Meeting of August 10th, 2021

Submitted By: Shellie Campbell, Director

1. **AGREEMENT between Multnomah Education Service District ("MESD") and North Central Public Health District** for the collection of MAC surveys and data.
 - a. *Fiscal Impact:* No fiscal impact

2. **AGREEMENT between The Next Door Inc. and North Central Public Health District** with regard to the performance by TNDI for consulting services.
 - a. *Fiscal Impact:* Cost of \$5,952 to NCPHD

3. **OHA 159826-20 FY21 exe**, Twentieth Amendment to Oregon Health Authority 2019-2021 Intergovernmental Agreement for the financing of Public Health Services.
 - a. *Fiscal Impact:* Additional \$5,863.29 for COVID local active monitoring.

4. **OHA 159826-21 FY21 exe**, Twenty-first Amendment to Oregon Health Authority 2019-2021 Intergovernmental Agreement for the financing of Public Health Services.
 - a. *Fiscal Impact:* Additional \$1421496 for COVID monitoring and CARES funding.

5. **OHA 159826-22 FY21 exe**, Twenty-second Amendment to Oregon Health Authority 2019-2021 Intergovernmental Agreement for the financing of Public Health Services.
 - a. *Fiscal Impact:* Not known.

6. **ENGAGEMENT LETTER between Pauly, Rogers & Co., P.C. and North Central Public Health District** for an audit of basic financial statements and annual reporting to State of Oregon.
 - a. *Fiscal Impact:* Not to exceed \$21,000.

7. **MEMORANDUM OF AGREEMENT between Once Community Health and North Central Public Health District** for COVID 19 vaccine administration fees.
 - a. *Fiscal Impact:* Not known.



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NCPHD Directors Report for Board of Health Meeting of August 10th, 2021
Presented by Shellie Campbell, Director

It is hard to believe that we are meeting with the school districts regarding the 2021-2022 school year and in person learning. We have formed strong relationships with our local school districts during the pandemic and we look forward to the partnership continuing. There is a great deal of concern around the guidance and responsibility given to the decisions on masks, social distancing, isolation, quarantine and testing when it comes to schools. We know the month of August will be filled with planning meetings and communication with the school, parents, students and community members.

At the end of July we saw an increase in COVID outbreaks and cases. We are also experiencing an increase in COVID testing at NCPHD. This, of course, is concerning. The COVID virus is unpredictable and it seems with every turn we have new guidance, recommendations and concerns. The staff at NCPHD continues to work very hard to meet people where they are at, provide education, outreach and compassion. We are seeing a shift in some of the public interactions our COVID Team is experiencing; some people are taking their frustrations, disbeliefs, negativity out on our staff that is contact tracing or testing. It is unfortunate fallout from the pandemic and we are working in house to support our staff and keep them safe. My ask for the BOH is to provide updated, informed feedback to your community when you hear negative or misinformation not only about the virus or the vaccine, but also about the role of public health.

Our clinic team has developed a plan to open up walk-in clinic to three days a week (pre-COVID) that will also include COVID vaccines. It really takes a village to make sure all the t's are crossed and l's are dotted. We are currently providing vaccines and walk-in clinic, but the plan will be to increase the times provided along with outreach, communication, incentives, and child immunizations and staffing. This is also in conjunction with the COVID Team Plan for listening sessions in all three counties and working with providers to support vaccines in the local clinics.

We are continuing to recruit, hire and train NCPHD staff. We have recently interviewed for two positions for communicable disease, one for the Regional CD Specialist position (will work for Wasco, Sherman, Gilliam and Hood River under the Modernization Grant) and another CD Specialist for NCPHD (currently Jeremy Hawkins position). We have also reposted our Finance Manager position. Lucy Mondragon was offered a position with PUD that unfortunately we were not able to compete with. We are also interviewing for the Clinical Program Supervisor position and a new position, Health Promotion Supervisor. We are excited with the prospects and energy that new staff and positions bring.

Fall is right around the corner, hard to believe. The staff here at NCPHD continues to go above and beyond in their work to combat COVID and get as many people vaccinated as possible. Please continue to advocate in the community to do so, also. Thank you.