“Healthy People Living, Working and
Playing In Healthy Communities”
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Marion County Health Department
Public Health Annual Report – CY2016

Executive Summary

Our Mission as a local public health department is to provide leadership to improve and protect the health of our communities.

Our Vision for Marion County is healthy people living, working and playing in healthy communities.

This report highlights our work to implement our mission and achieve our vision in 2016. The health department continues to maintain its accredited status and build on the core processes that enable our continued delivery of quality services to the community.

Five core processes or systems help to guide us in our work.

- Community Health Assessment
- Strategic Plan for Public Health Services
- Performance Management System / Quality Improvement
- Workforce Development
- Collaborative Community Health Improvement Planning

The Marion County Community Health Assessment contains information about the health of Marion County residents. It is updated annually and posted on the Marion County Health Department webpage for public viewing.

The Strategic Plan for Public Health Services aligns with and supports the Marion County Strategic Plan strategic goal #6: Health and Community Services, Promote the overall health of people in Marion County by improving the delivery of quality health services and supporting community-based prevention efforts. In 2014, Marion County Health Department Public Health Division engaged in a planning process to identify strategic priorities and objectives for the period January 2015-December 2019. The planning process was informed by local community
health data, and planning participants included the Marion County Board of Commissioners, representation from the Health Advisory Board, and community members. The four strategic priorities developed through this process include:

- Provide the Five Basic Health Services mandated by Oregon law (ORS 431.416).
- Maintain a well-trained and competent public health workforce
- Establish and enhance internal and external partnerships through collaboration
- Assure health promotion and disease prevention

In 2016, Marion County Health Department Public Health Division updated the 2015-2019 Strategic Plan to replace goals that had been completed in 2015. A Strengths, Weaknesses, Opportunities, and Threats analysis was conducted with each program team and two new goals were prioritized for Public Health Division. These goals are tailoring services to clients and public health communication and branding. Throughout 2017, each program team will implement strategies to achieve these goals. Strategic Plan targets reached in 2016 include: completion of an internal STI program evaluation that informed program changes and improvements; development of mission statements by most coalitions convened by Public Health Division; updating and posting the community health assessment on the internet; and development and distribution of the Community Health Improvement Plan.

The Strategic Plan, 2015-2019 is posted on the Marion County Health Department webpage.

Performance Management and Quality Improvement

**Quality improvement** “in public health is the use of a deliberate and defined process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health. It refers to a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality services or processes which achieve equity and improve the health of the community.”

(Source: Riley et al, “Defining Quality Improvement in Public Health”, JPHMP, 2010, 16(10), 5-7.)

**Performance management** “is a systematic process aimed at helping achieve an organization’s mission and strategic goals by improving effectiveness, empowering employees, and streamlining the decision-making process.”

(Source: Public Health Foundation, http://www.phf.org/focusareas/PMQI/Pages/default.aspx)
Public Health Division implemented the current Performance Management Plan in January 2015. The plan identifies performance measures and targets that we hope to achieve. Performance measures for the 2015-2019 plan align with the Public Health Division’s mission, strategic priorities, workforce development plan, community health improvement plan, and program-specific work plans. Where possible, the measures are paired with community level health indicators to make a clear connection between how specific efforts by Health Department staff may improve the health of Marion County’s general population. Each measure is tracked to determine progress on achieving performance targets. The Performance Management and Quality Improvement plans are strongly linked as measures that underperform significantly will likely lead to a quality improvement project and successful quality improvement projects lead to the development of a measure to assure we “maintain the gain”.

In 2016, we added about 10 program measures to our performance management system. These measures originated from successful quality improvement projects. However, no quality improvement projects were implemented in 2016 as a result of a performance measure not achieving a target.

Public Health Division has engaged in formal quality improvement efforts since 2013. Utilizing the Plan-Do-Check-Act framework we have continued to conduct various quality improvement projects throughout programs, the division, and the department. In 2016 we added quality planning to our toolbox allowing us to thoughtfully use data and quality improvement concepts to plan and implement processes that do not already exist. A special effort was made in 2016 to promote improvements that required programs to work together to achieve a common goal. Examples of 2016 quality planning and quality improvement projects are included later in this document. Going forward, quality improvement projects will continue to be used to address performance measures not consistently meeting defined targets and systems problems identified through daily operations. A planned focus for 2017 is to increase our efforts to prioritize quality planning or improvement processes that aim to improve population health.

Workforce Development

Maintaining a well-trained and competent public health workforce is a Marion County Health Department Public Health Division strategic priority. Training and development of our workforce is also one part of a comprehensive strategy toward agency continuous quality improvement. Through the implementation of our Workforce Development Plan for Public Health we promote both organizational and individual training. Since 2012, professional public health staff has used the public health core competency self-assessment from the Public Health Foundation to prioritize their own annual professional development goal. In 2016, we developed and implemented a
modified self-assessment tool for public health peer and support staff. We now have our entire Public Health Workforce engaged in assessing and seeking ways to improve their knowledge, understanding and application of the public health core competencies. The combined data will provide a more complete picture to inform public health division group training efforts.

**Community Health Improvement Plan (CHIP)**

Marion County Health Department convenes a collaborative partnership to improve the health of the community. A new improvement plan launched January 2016. To develop the plan, CHIP partners participated in the 2015 county-wide community health assessment, and selected priority health issues for 2016-2019. Priorities for the new plan are **obesity**, **access to prenatal care**, **tobacco prevention** and **depression**. These priorities are identical to those for the CHIPs in neighboring Polk County and for Willamette Valley Community Health, the local coordinated care organization serving individuals on Medicaid. Partners contributing to the Marion County effort through leadership and/or collaboration include the three local hospital systems, primary care providers, community based organizations, local government and higher education.
The mission of Marion County Health Department’s communicable disease programs is to protect the community’s health by preventing and controlling the spread of infectious diseases. These goals are accomplished in two ways:

**Investigate** cases of reportable communicable disease to prevent the spread of diseases in the community. The Health Department (MCHD) receives reports for over 60 communicable diseases and conditions from local healthcare providers, labs and hospitals. Staff investigates cases to identify the source of the infection, make sure the patient and exposed persons receive treatment, and put in place needed measures to protect the general public.

**Provide specialized public health services to individuals** to diagnose, treat or prevent communicable diseases that are reportable under Oregon law. Provision of these direct services by the local health department varies by county. In Marion services include:

- Sexually Transmitted Infections Clinic
- HIV Counseling & Testing
- Immunizations for adults and children
- Tuberculosis Treatment and Case Management Program
Highlights for Communicable Disease Services:

- **Communicable Disease Investigation (CDI)** – In 2016, CDI responded to 29 community outbreaks. About half of the outbreaks occurred in care facilities. Of individuals affected by outbreaks in 2016 46.2% were infected with Norovirus. Staff also responded to 689 cases of reportable diseases. The [2016 Reportable Diseases and Conditions Summary](#) provides rates and information about diseases occurring in Marion County.

- **Sexually Transmitted Infections (STI)** – In 2016, rates of reportable sexually transmitted infections (Syphilis, gonorrhea, Chlamydia) continued to rise. The Health Department implemented measures to decrease gonorrhea by ensuring the public received the right treatment from their provider. Efforts such as monitoring treatments, and feedback and outreach to providers reduced the rate of inadequate treatments by 65%.

- **HIV Counseling and Testing** -
  From 2012-2015, Marion County averaged 16.8 new HIV Cases per year. The program’s mission is to promote healthy behaviors among population groups at high-risk for HIV, including regular testing to ensure early diagnosis and treatment of people with HIV. In 2016, the health department provided 459 HIV Tests and education to 256 individuals through classes and outreach activities. Among Oregon counties, Marion has the third highest rate of people living with HIV (estimated 444.5 per 100,000).

- **HIV Medical Case Management** – A certified HIV Nurse Case Manager provides medical case management to about 175 individuals living with HIV/AIDS in Marion County. In July 2016 provision of this service transitioned to a community-based partner organization, HIV Alliance. As HIV Alliance already provided other care, including coordination of dental and pharmaceutical support services, it was felt that clients would benefit from receiving all case management services through one organization.

- **Immunizations** – In 2016, MCHD administered fewer overall vaccine doses, but also saw an increase in unduplicated clients. There has also been an increase in the number of refugee families seeking immunizations at MCHD, especially those with children who need vaccines for school entry. In 2016, 5626 Immunizations were given including 240 in Stayton and 228 in Woodburn. Staff also coordinates the state school immunization law process for Marion County. The percentage of students who received an exclusion order in 2016 was 5.5%. This is slightly higher than normal due to additional immunization requirements for students that were implemented beginning with the 2015-16 school year.

- **Tuberculosis (TB) Investigation and Management** – In 2016 there were 4 new cases reported. The TB Program takes the lead on treatment and contact evaluation of all cases occurring in Marion County, coordinating care with the primary care provider. The majority of cases require 6-9 months of treatment including frequent home visits to provide the TB medications.
Environmental Health

The mission of the Environmental Health program is to promote healthy communities through inspection and licensing of public venues including, but not limited to restaurants, mobile food units, pools and hotels. Staff works with state agencies to inspect the National School Lunch Program and childcare facilities. They also monitor public drinking water systems; respond to animal bites from rabies susceptible animals; and work with communicable disease investigation staff to investigate and contain food borne outbreaks.

Highlights for Environmental Health:

Marion County continues to be the leader among county health departments in certifying food service managers. The ServSafe class helps to ensure that each food service’s designated Person in Charge will have a good understanding of the principles and practice of safe food operating procedures. The latest data available from Oregon Health Authority shows that Marion County participants accounted for over 50% of those completing the manager test post training in Oregon in 2015. In 2016 MCHD trained an additional 94 managers.

The program also issued 471 food handler cards and conducted over 3800 environmental health inspections.

Early Childhood Nursing

The mission of the Early Childhood Nursing Team is to assure that women have healthy pregnancies and good birth outcomes and that every child has an opportunity to grow and develop to his or her fullest potential. This is accomplished through the provision of no cost public health nurse services in the home setting to pregnant and parenting women and their infants and children. The CaCoon program serves children with special medical issues and the nurse works with the family and providers to facilitate coordination of care. Maternity case management services engage women before delivery.

Highlights for Early Childhood Nursing:

An unfilled nursing position led to reduced client and home visit numbers. Recruitment of nurses who are bilingual in Spanish-English continues to be a challenge for all nursing programs. The team added a focus on evidence based practices to address State and National Title V Priorities for maternal, child and adolescent public health services.

<table>
<thead>
<tr>
<th>YEAR</th>
<th># HOME VISITS</th>
<th>#UNDUPLICATED CLIENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>3,379</td>
<td>727</td>
</tr>
<tr>
<td>2016</td>
<td>2,635</td>
<td>625</td>
</tr>
<tr>
<td>DECREASE</td>
<td>744</td>
<td>102</td>
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Prevention Programs

The mission of the Prevention Team is to promote healthy communities through a variety of strategies that prevent health problems before they occur, or before they become serious.

- **Tobacco Prevention and Education Program (TPEP)** - Works with community partners, local organizations, local decision makers, and jurisdictions to create and adopt policies that decrease tobacco use and exposure to second hand smoke by creating smokefree places and decreasing the influence of the tobacco industry; responds to complaints and educates about the Indoor Clean Air Act (ICAA), also known as Oregon’s Smokefree Workplace Law, on behalf of the Oregon Health Authority, the enforcement agency for the ICAA; and promotes tobacco cessation by offering resources for the Oregon Tobacco Quit Line. The Marion County Community Health Improvement Partnership is the advisory committee to the program.

- **Teen Pregnancy Prevention** – Works with local school districts and community partners to implement “Cuidate”, an evidence-based curriculum for prevention of teen pregnancy, and provides culturally appropriate teen pregnancy education to youth. Effective July 2017, Marion County no longer receives support for this work.

- **Alcohol & Drug Prevention** – Utilizes the science of prevention to reduce alcohol and drug abuse in our communities and prevent associated problems such as addiction, injuries and chronic illness. Using best practices, the program analyses trend data, makes program recommendations, disseminates information, provide technical assistance in delivering research based prevention programs, collaborates with community partners, engages law enforcement, supports youth development opportunities, and assists Oregon Together coalitions and other community stakeholders in mobilizing our communities towards positive outcomes.

- **Problem Gambling Prevention** – Works with community partners to increase awareness of the risks associated with gambling behavior, and to decrease rates of problem gambling among residents of Marion County. Provides information, training and assistance in workplace policy development, delivers classroom presentations and promotes positive youth activities that increase awareness of youth gambling, participates in state-level prevention efforts, provides community based education for all ages, and develop resources for the public.

- **Obesity Prevention in Youth** – Uses evidence based strategies to increase protective factors of obesity and reduce the risk factors that contribute to chronic disease. As a key priority identified by both partners and residents, this program develops strategic partnerships to increase physical activity, access to healthy foods and promote safe, intuitive and fun ways to increase active transportation and decrease sedentary behaviors. This program mobilized community partners to gain funding support for activity trackers for 5th grade students.
Prevention Programs continued

- **Woodburn Community Health Initiative (WCHI)** - is a Healthy Eating Active Living Community Project that aims to reduce or improve obesity-related chronic disease outcomes in the Legion Park neighborhood in Woodburn. WCHI implements healthy strategies that increase protective factors and reduces the risk of developing chronic diseases. WCHI strategies are a prescription exercise program, Zumba classes, Woodburn's Walking group, nutrition and physical activity classes, and installed exercise equipment at Legion Park. Such strategies are possible thanks to the collaboration of our key partners and funders.

Public Health Emergency Preparedness (PHEP)

The mission of the Public Health Emergency Preparedness program is to ensure the Health Department has developed and exercised plans, and trained staff to ensure effective provision of four primary Health Department emergency response functions related to: Outbreak response, Environmental Health, Risk Communications and Mass Medication. The program also participates in collaborative efforts with the local health care, emergency management, public information officer systems, and provides training opportunities for community partners.

**Highlights for Public Health Emergency Preparedness:**

In 2016 program staff helped design the Marion County Cascadia Rising earthquake exercise. MCHD employees were trained and helped staff the County Emergency Operations Center, during the exercise, coordinated health system support, participated in message development and communications, and other support roles. In coordination with the Health Department Environmental Health program, PHEP convened a seminar on Rabies and Zika Virus response for local veterinarians.

MCHD is pleased to announce that one of the PHEP staff was selected to participate in the National Association of City & County Health Official Roadmap to Ready course. This nationwide program trains new preparedness coordinators in best practices for preparing the community response to public health disasters. As an early outcome of this training, MCHD will conduct a Community Assessment for Public Health Emergency Response (CASPER) in 2017.
Reproductive Health Services

The mission of Reproductive Health Services is to ensure individuals of all income levels have access to effective methods of preventing unintended pregnancy. Services provided include information and exams for birth control methods, as well as exams and treatment for sexually transmitted infections. The program also provides Oregon Mothers Care (OMC) services which include pregnancy testing, assistance with Oregon Health Plan (OHP) application, scheduling a first prenatal care appointment, and referral to community resources.

Highlights for Reproductive Health Services:

2016 saw an approximate 30% decrease in the number of clients seen for Reproductive Health services, compared with numbers seen in 2015. Despite the decrease in client numbers, there was a 10% increase in the placement of 3-10 year Long Acting Reproductive Contraceptives. The program continues to serve a high number of low-income and uninsured individuals. Approximately 80% of clients seen had incomes 100% below the federal poverty level, and 77% were uninsured. Through the provision of birth control to prevent unintended pregnancies, an estimated 3.5 million in taxpayer dollars were saved in fiscal year 2016.

Women Infant Children (WIC)

The mission of the WIC program is to provide public health leadership in promoting the health and improved nutritional status of Oregon’s families by offering nutrition assistance to women, infants and children ensuring they receive adequate nourishment, education and assistance during critical growth & development time periods.

Highlights for WIC:

Marion County’s WIC program received recognition as one of 55 agencies nationwide to receive a WIC Loving Support Award of Excellence from the United States Department of Agriculture (USDA). The program was recognized for its successful peer counseling program and community partnerships and was the only Breast Feeding Peer Counseling program in Oregon to receive this award.

In 2016, the program participated in the WIC Farm Direct Nutrition Program (FDNP), issuing 100% of available coupon to clients between June and September. The program encourages families to purchase locally grown produce, which supports local agriculture and benefits our local economy.
Health Profile:

Mobile Food Units (Food Trucks) in Marion County

Marion County Environmental Health Staff must inspect each mobile food unit twice per year. This report will highlight the licensing process, differences in costs between restaurants and mobile food units, important information about Marion County licensed mobile food units and what Marion County Environmental Health has done to comply with state regulations for mobile food unit inspections.

Helpful Inspection Definitions:

“Priority item” means a provision in this code whose application contributes directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury and there is no other provision that more directly controls the hazard.

“Priority foundation item” means a provision in this code whose application supports, facilitates or enables one or more priority items. It includes an item that requires the purposeful incorporation of specific actions, equipment or procedures by industry management to attain control of risk factors that contribute to foodborne illness or injury such as personnel training, infrastructure or necessary equipment, HACCP plans, documentation or record keeping, and labeling.

"Core Item” includes an item that usually relates to general sanitation, operational controls, sanitation standard operating procedures (SSOPs), facilities or structures, equipment design, or general maintenance.

“Close” means to summarily stop the operation of a food establishment pursuant to ORS 624.073 and ORS 624.370

“Mobile Food Unit” means any vehicle that is self-propelled or that can be pulled or pushed down a sidewalk, street, highway or waterway, on which food is prepared, processed or converted or which is used in selling and dispensing food to the ultimate consumer.

“Commissary” means a commissary catering establishment, restaurant, or any other place in which, food, beverage, ingredients, containers, or supplies are kept, handled, packaged, prepared or stored, and from which vending machines or mobile units are serviced

“Restaurant,” means an establishment:
(a) Where food or drink is prepared for consumption by the public;
(b) Where the public obtains food or drink so prepared in form or quantity consumable then and there, whether or not it is consumed within the confines of the premises where prepared; or
(c) That prepares food or drink in consumable form for service outside the premises where prepared. “Restaurant” does not mean a railroad dining car, bed and breakfast facility, intermittent temporary restaurant, seasonal temporary restaurant or single-event temporary restaurant.

“Temporary restaurant” means an establishment: (a) That operates in connection with a public gathering, entertainment event, food product promotion or other event; and (b) Where food is prepared or served for consumption by the public.

Definitions from OAR 333-150-0000

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**Licensing and Fees**

**Licensing Process**

1. Operator submits plans
2. Environmental Health reviews plans
3. Environmental Health approves plans & mails approval letter
4. Facility passes pre-opening inspection
5. License issued
6. First unannounced inspection-compliance sticker posted if facility passes inspection
7. Inspections occur twice per year and if needed based on a complaint

**Restaurants and mobile food units undergo the same licensing process but have different fees.**

<table>
<thead>
<tr>
<th>Service</th>
<th>Mobile Fee</th>
<th>Restaurant Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plan Review (1 time)</td>
<td>$298</td>
<td>$529 (new) $331 (remodel)</td>
</tr>
<tr>
<td>License (annual)</td>
<td>$208</td>
<td>$441-$631 (based on # of seats)</td>
</tr>
<tr>
<td>Commissary Plan Review (1 time)</td>
<td>$396</td>
<td>N/A</td>
</tr>
<tr>
<td>Commissary License (annual)</td>
<td>$347</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**There are 4 classes of mobile food units. Each class has different requirements.**

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Class 1</th>
<th>Class 2</th>
<th>Class 3</th>
<th>Class 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water supply</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td>√</td>
</tr>
<tr>
<td>Plumbed hand washing</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Dishwashing sinks</td>
<td></td>
<td>√</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Food prep allowed</td>
<td></td>
<td></td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Cooking allowed</td>
<td></td>
<td></td>
<td>√ no raw meat</td>
<td>√ raw meat allowed</td>
</tr>
<tr>
<td>Commissary required</td>
<td>√</td>
<td>√</td>
<td>√</td>
<td></td>
</tr>
</tbody>
</table>
Where are stationary food trucks located in Marion County? (2015 data)

In 2015, approximately 60% of mobile food units moved around the county from day to day and 40% set up in one location only. Those in one location may look like buildings due to skirting or decks, but are still mobile with wheels. Since 2010 there has been an increase from 94 to 155 mobiles in the county.

Top Recorded Violations, 2015

<table>
<thead>
<tr>
<th>Restaurant</th>
<th>Mobile Food Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Not frequent enough cleaning of food-contact-non potentially hazardous foods</td>
<td>1. Hot and cold holding temperatures</td>
</tr>
<tr>
<td>2. Unclean food-contact surfaces</td>
<td>2. Unclean food-contact surfaces</td>
</tr>
<tr>
<td>3. Hot and cold holding temperatures</td>
<td>3. Handwashing sink accessible</td>
</tr>
</tbody>
</table>

Closures

<table>
<thead>
<tr>
<th>Year</th>
<th>Restaurant</th>
<th>Mobile Food Unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>3 Voluntary</td>
<td>1 Health Department</td>
</tr>
<tr>
<td>2013</td>
<td>2 Voluntary</td>
<td>1 Voluntary</td>
</tr>
<tr>
<td>2014</td>
<td>1 Voluntary</td>
<td>0</td>
</tr>
<tr>
<td>2015</td>
<td>2 Voluntary</td>
<td>0</td>
</tr>
</tbody>
</table>

Closure can be voluntary or involuntary. Closures are made based on risk or the likelihood that an adverse health effect will occur within a population as a result of a hazard in a food and ability to mitigate risk.

**Voluntary**-the operator locks the doors and puts up their own closed sign.

**Involuntary**-the health department posts a notice of closure, suspends and/or revokes license. This requires a meeting with the environmental health supervisor to re-open within 24 hours.

Unlike restaurants, mobile food units are not scored. They either comply or are closed.

Most closures are voluntary
Marion County Environmental Health Mobile Food Unit Quality Improvement Project

The project stemmed from an issue with inspectors taking too much time to find mobile units to inspect. We found that this vague problem was actually several problems. Specifically inspectors were not all doing the same thing and were not documenting properly. These two issues combined made it appear as though we weren’t inspecting as required. This was addressed through creation of policies, definitions and templates to be used by everyone, and we achieved our goal of 100% of inspections documented in 2015.

Emerging Concerns

• New rule taking effect in 2018 requiring plumbed hot and cold hand wash sinks for all mobile units
• Managerial Control. Inspectors only are present for a couple hours a year in an establishment. It is up to the management to observe rules the rest of the time.
• Department of Agriculture regulates grocery stores, meat markets and food processing plants. Although their recently adopted rules match ours, enforcement, interpretations of rules, and priorities are different. This means some food carts, like things that appear outside of grocery shops may be inspected by a different agency and may be regulated differently than Marion County Environmental Health regulated facilities.

Special Considerations

• There are additional rules (division 162) regarding mobility, base of operation, transport temperature of food, gas bottles and overhead protection
• Jurisdictions (i.e., cities) have their own rules regarding mobiles. Some ban them, some restrict where they can set up, or for how long. The health department cannot enforce these rules.
Gonorrhea

Background Information:
Gonorrhea is a Sexually Transmitted Infection (STI) caused by a bacteria. It can cause infections in the genitals, rectum, and throat.

Gonorrhea Symptoms:
In men: A burning sensation when urinating; white, yellow, or green discharge from the penis; painful or swollen testicles.
In women: Painful or burning sensation when urinating; increased vaginal discharge; vaginal bleeding between periods

Treatment:
Gonorrhea is treated using two separate antibiotics.

Who is at risk?:
• Anyone engaging in any kind of sexual intercourse including oral or anal sex
• Men who have sex with men (MSM)
• People with multiple sex partners
• People who do not use protection (condoms) during sex
• People who exchange sex for drugs or money
• HIV positive individuals
• IV drug users
• Pregnant women
• People under the age of 25

Recommendations:
Individuals Can- Limit your risks: use condoms every time you have sex, limit your number of sex partners, abstain from sex. Getting tested: once a year is recommended, if you are in a high risk group it might be necessary to get tested more often.

Providers Can- Offer your patients gonorrhea screenings if they are in high risk groups.

Parents Can- Discuss safe sexual practices with their children.

Definitions:

Complications:

Pelvic Inflammatory Disease (PID):
Can cause permanent damage to your reproductive system and lead to long-term pelvic pain.

Ectopic Pregnancy:
Pregnancy outside of the uterus. This is a serious complication for pregnancy.

Epididymitis:
In men untreated gonorrhea infection can cause pain or swelling in the testicles, accompanied by a fever.

Infertility:
Although uncommon untreated infection can prevent men and women from having children in the future.

Other:
In rare cases infection may spread to the blood or joints which can be life-threatening.
Gonorrhea in Marion County:
Marion County has experienced 186.7% increase in the incidence of gonorrhea in the last 5 years. Most Marion County gonorrhea cases occur in individuals under the age of 25.

Resources/Contact Info:
If you would like further information about the Marion County Public Health Division STI services please visit our website: http://www.co.mari on.or.us/HLT/PH/Pages/sti.aspx

If you would like to reach the Marion County Public Health Department during office hours, please call: 503-588-5342

If you need to report a communicable disease or public health emergency please call: 503-588-5621

Please like us on Facebook and follow us on Twitter for the most updated information about important events in our county.

What is Marion County Public Health Doing?:
Each time a medical provider suspects or confirms that an individual has gonorrhea, the case must be reported to the Marion County Public Health Division communicable disease (CD) team within one business day. The CD team follows up with the individual to ensure he/she receives treatment and finds, tests, and treats (or refers for testing or treatment) all of the people who may have had sexual contact with that individual. To make sure the providers in our county know the reporting requirements, our public health division staff are available to meet with community partners and healthcare providers.
### Quality Improvement

**Success Stories 2014-2016**

<table>
<thead>
<tr>
<th>Before QI project</th>
<th>After QI project</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Increased rates of same day Hep A and/or B vaccine given to eligible Sexually Transmitted Infection clients</strong></td>
<td>6 %</td>
</tr>
<tr>
<td><strong>Increased staff satisfaction rates with scheduling STI clients referred from Communicable Disease Team</strong></td>
<td>0 %</td>
</tr>
<tr>
<td><strong>Increased Chlamydia screening rates for women at risk</strong></td>
<td>75.8 %</td>
</tr>
<tr>
<td><strong>Increased rates of staff that are up-to-date on required training</strong></td>
<td>76 %</td>
</tr>
<tr>
<td><strong>Decreased rates of inadequately treated Gonorrhea cases in the community</strong></td>
<td>18.7 %</td>
</tr>
<tr>
<td><strong>Increased rates of properly documented food service facility pre-opening inspections</strong></td>
<td>78 %</td>
</tr>
<tr>
<td><strong>Decreased the time it takes to prepare nurse home visiting educational materials</strong></td>
<td>15 mins or longer</td>
</tr>
</tbody>
</table>

06/02/2017
Quality Improvement Project Highlights: Two 2016 projects worked to improve workforce training and clinic services.
STI/Immunizations Hep A & B vaccine given

Our problem:
- Missed opportunities to vaccinate high risk STI clients.
- Inconsistent Immunization screening practices.
- Only 6% of Hep A &/or B vaccine eligible STI clients received vaccine the same day.

GOAL
1) Standardize a process for STI Immunizations screening.
2) Increase the percent of Hepatitis A &/or B vaccine eligible STI clients that receive an immunization the same day.

Act
- 58% of Hep A &/or B vaccine eligible STI clients received vaccine the same day.
- 73% of STI clients were either up-to-date or received vaccine during their STI appointment.

Plan
- Adopt the new process as standard operation.
- To maintain gain audit at 6 mos and 12 mos.

Check
- Review current state process.
- Brainstorming & solution prioritization.
- Root cause: outdated process/lack of a standard.

Do
- Appointment scheduling script
- Streamline Imms Vaccine Admin Record (VAR)
- STI nurses give Hep A & B vaccine
- Develop & pilot standard process

Outcome
Goal achieved! Went from 6% to 58% of Hepatitis A &/or B vaccine eligible STI clients who received vaccine the same day. This is a 52% increase!

Produced by Marion County Health Department 2016, images by flaticon.com, concept idea by ABMPR
Performance Measures

What is a Performance Measure?
Anything we can reliably measure that can be used to tell a story of where we were, where we are, and ultimately where we want to go.

How are Performance Measures Selected and/or Prioritized?
Answer: Based on the following Four Criteria

1. Measurability: Performance measures are evaluated based on their ability to be measured. If a measure is difficult to track, then the return must exceed the investment.

2. Usefulness: A performance measure is judged based on how helpful it is to know about and track as an organization. The best measures will serve as an indicator of the effectiveness of a department, division, or program at achieving its objectives.

3. Actionability: A performance measure is scored based on its ability to be influenced, or the level of which it can be controlled by an organization. If a measure is consistently not meeting set targets, then it may become a Quality Improvement (QI) project.

4. Linkage to other plans: Whenever possible, a performance measure should connect to other plans or state requirements. This connectivity assures that the measures are informing plans and are in alignment with the organization's objectives.

- Community Health Improvement Plan (CHIP)
- Strategic Plan (SP)
- Quality Improvement Plan (QIP)
- Workforce Development Plan (WFD)
- Community Health Assessment (CHA)

Produced by Marion County Health Department 2017, Images by flaticon.com, concept idea by ABMPR
Performance Measures in Action: 
Big Win in Communicable Disease Control!

Performance Measure: Increase adequate treatment for gonorrhea infections in Marion County to at least 95%.

1. **Measurability:** This is a measure that the Communicable Disease program can readily measure and track.

2. **Usefulness:** Improvement on this measure will decrease spread of antibiotic resistant bacteria in Marion County.

3. **Actionability:** The Marion County Communicable Disease program is taking action by providing information and resources to medical providers about proper treatment of gonorrhea infections.

4. **Linkage to other plans:** This measure connects to the fourth strategic priority of the Public Health Division’s Strategic Plan, which is to “Assure health promotion and disease prevention in Marion County.”

**Where we were** (Baseline-2015):
82% of gonorrhea cases were being adequately treated

**Where we are today** (2017):
95% of gonorrhea cases are now being adequately treated

**Where we want to go:**
Maintain or improve upon percent of gonorrhea cases being adequately treated
Foundational Programs – Each Oregon county must assure the following:
- Communicable disease control programs
- Environmental public health programs
- Prevention of injury and disease and promotion of health programs
- Clinical preventive services

ORS 431.142-145

Some of the Services Provided

- 10,083 client visits (non-WIC)
- 5626 Vaccines given
- 9674 WIC participants
- 3812 environmental health inspections (licensed facilities, schools, childcare)
- 36 Water system surveys
- 621 animal bites investigated
- 471 food handlers trained
- 94 food managers trained
- 57 Indoor Clean Air Act complaints (smoking)
- 2992 diseases reported
- 29 outbreaks investigated

Programs

- Communicable disease investigation
- Sexually transmitted infections clinic
- HIV testing clinic
- TB investigation & management
- Emergency Preparedness
- Child & adult immunizations

- Environmental Health
- Early childhood nurse visiting
- Maternity case management
- WIC Supplemental Nutrition
- Reproductive Health
- Prevention - substances, chronic disease, problem gambling
- Vital Statistics

Our Locations

Main Office
3180 Center Street
Salem, OR 97301
(503) 588-5357
(503) 588-5342 Clinic

North County
976 N Pacific Highway
Woodburn OR 97071
(503) 981-5851

Satellite Office
WIC- 421 S. Water St.
Silverton, OR 97381
503-588-5057

Satellite Office
1377 N. 10th Avenue
Stayton, OR 97383
(503) 769-9873

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A New Public Health System for Oregon

In 2015, the Oregon Legislature enacted ORS 431.131, defining the foundational programs and capabilities for public health departments. The new system will be phased-in over the next few years.

**Foundational Program** “means a public health program that is necessary to assess, protect or improve the health of the residents of this state.”

Foundational programs include:
- Communicable disease control
- Prevention and health promotion
- Environmental health
- Access to clinical preventive services

**Foundational Capability** “means the knowledge, skill or ability that is necessary to carry out a public health activity.” Foundational capabilities include:
- Assessment and epidemiology
- Emergency preparedness and response
- Communications
- Policy and planning
- Leadership and organizational competencies
- Health equity and cultural responsiveness

Marion County Coalitions – collaboratively improving the public health system

**Public Health Emergency Preparedness Coalition**: Collaborative and community-focused public health emergency preparedness.

**All Marion Immunization Coalition (AMIC)**: Promotes child and adult immunizations.

**Community Health Improvement Partnership (CHIP)**: Promotes a collaborative, collective impact approach to addressing health priorities chosen by the community.
Use the following links for more information about Marion County Public Health:

General information about the health department: click here

Data and health assessments: click here

  Health profiles

  Topic specific reports

  Links to other data

Community Health Improvement Plan: click here

Information for healthcare providers: click here

Information for the public: click here

Information for schools and business: click here

Programs and Services: click here