

Northeast Tri County Health District 2019 Annual Report



To All-

As the Administrator for Northeast Tri County Health District (NETCHD), I am pleased to present the 2019 Annual Report. This report represents the collective efforts of our organization to preserve, promote, and protect public health within the counties of Ferry, Pend Oreille, and Stevens.

Sincerely,

Matt Schanz, Administrator

2019 LEADERSHIP

Health Officer

Samuel Artzis, MD

Administrator

Matt Schanz, RS

Community Health Director

Judy Hutton, RN

Environmental Health Director

Alyssa Spradley, RS (January-May)

Matt Schanz, RS (June-November)

Jon Ness, RS (December)

Pend Oreille County Community Health Supervisor

Jan Steinbach, RNC

2019 BOARD OF HEALTH MEMBERS

Mike Blankenship, Commissioner, Ferry County

Don Dashiell, Commissioner, Stevens County

Johnna Exner, Commissioner, Ferry County

Steve Kiss, Commissioner, Pend Oreille County

Elbert Koontz, Mayor, City of Republic

John Ridlington, Mayor, City of Kettle Falls

Steve Parker, Commissioner, Stevens County, Board Vice Chair

Shirley Sands, Mayor, City of Newport

Karen Skoog, Commissioner, Pend Oreille County, Board Chair

MISSION

Northeast Tri County Health District works with other entities to assess, protect, preserve, and promote the health of the tri-county area and establishes local policy relating to population-based services in Ferry, Pend Oreille and Stevens Counties.

ADMINISTRATIVE AND FINANCE

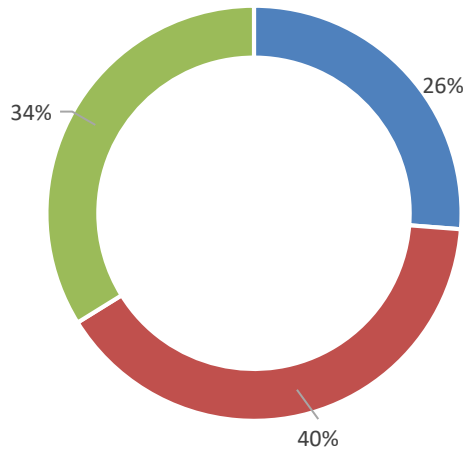
Northeast Tri County Health District delivered services in Ferry, Pend Oreille and Stevens Counties through three office locations in each of the counties of Ferry, Pend Oreille, and Stevens.

- 20.3 Full-Time Equivalent (FTE)
- 21 Employees
- Total Payroll (salary and benefits) of \$1,471,883

DEVELOP AND MAINTAIN EFFICIENT AND EFFECTIVE ADMINISTRATIVE SERVICES AND SUPPORTS

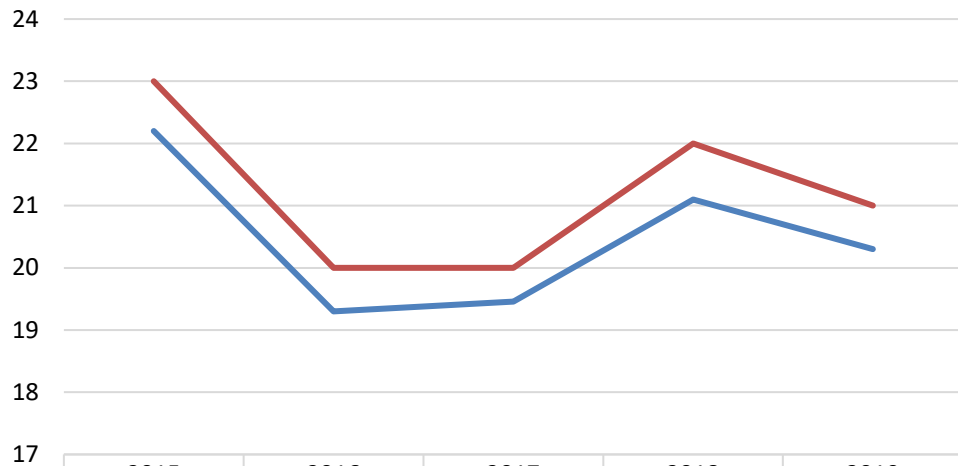
- Appoint a Health Officer and Vital Records Deputy Registrar
- Maintain a Personnel System
- Maintain a Uniform System of Financial Tracking and Reporting
- Establish a Fee Schedule
- Develop Operating Policies and Procedures
- Maintain a Management Information System and Electronic Capacity
- Board of Health Policy Development and Action
- Enact Local Public Rules and Regulations

Employee Salary and Benefits

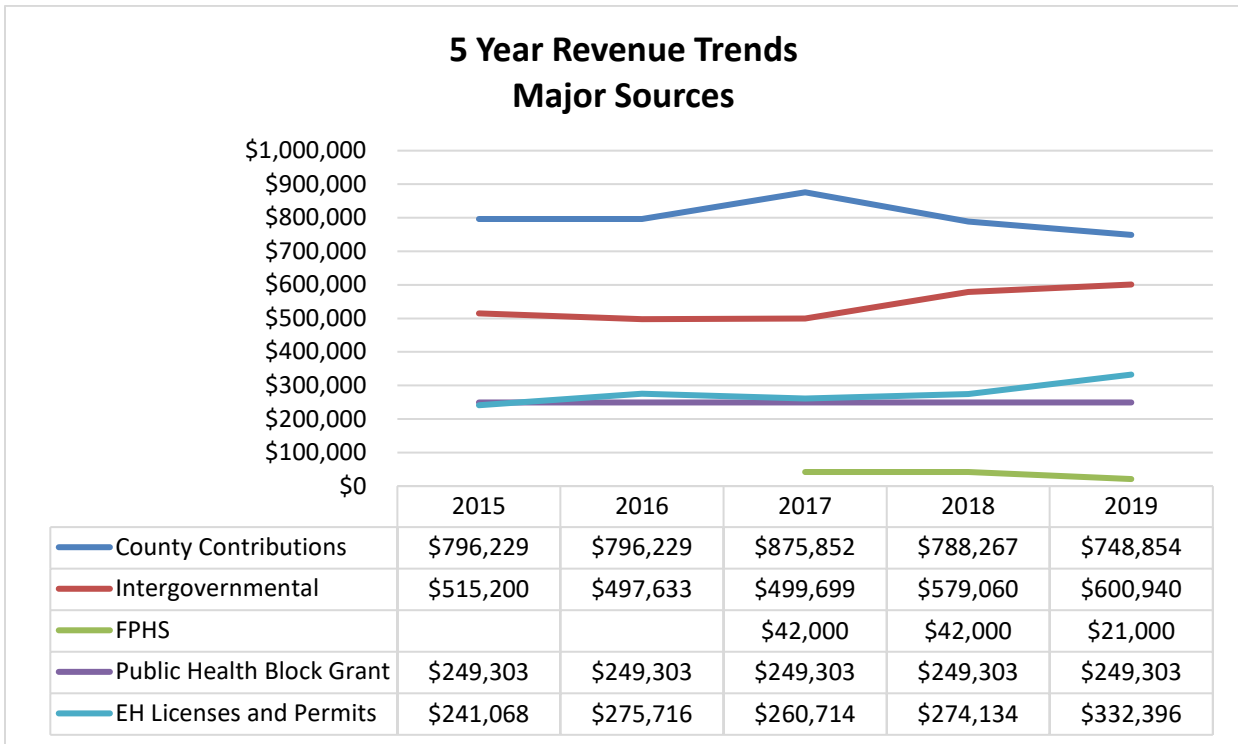
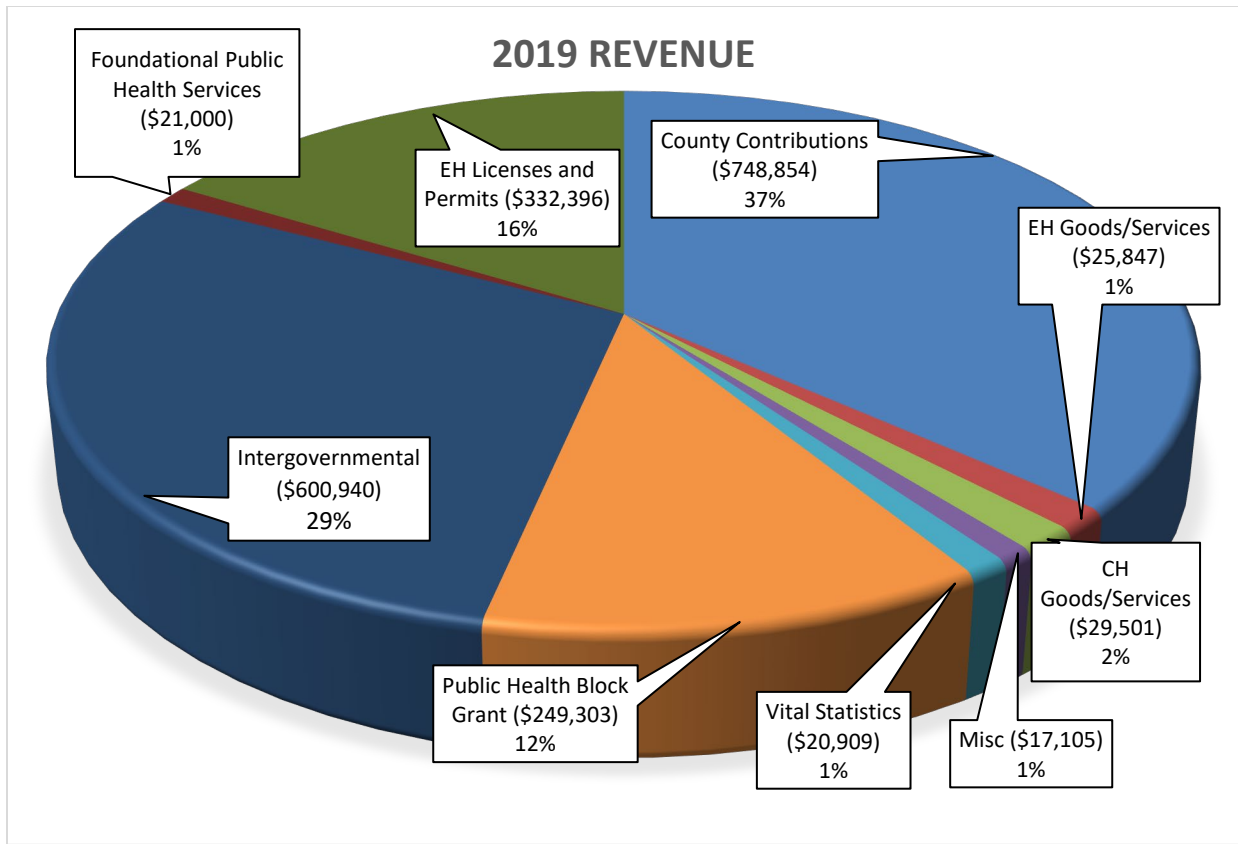


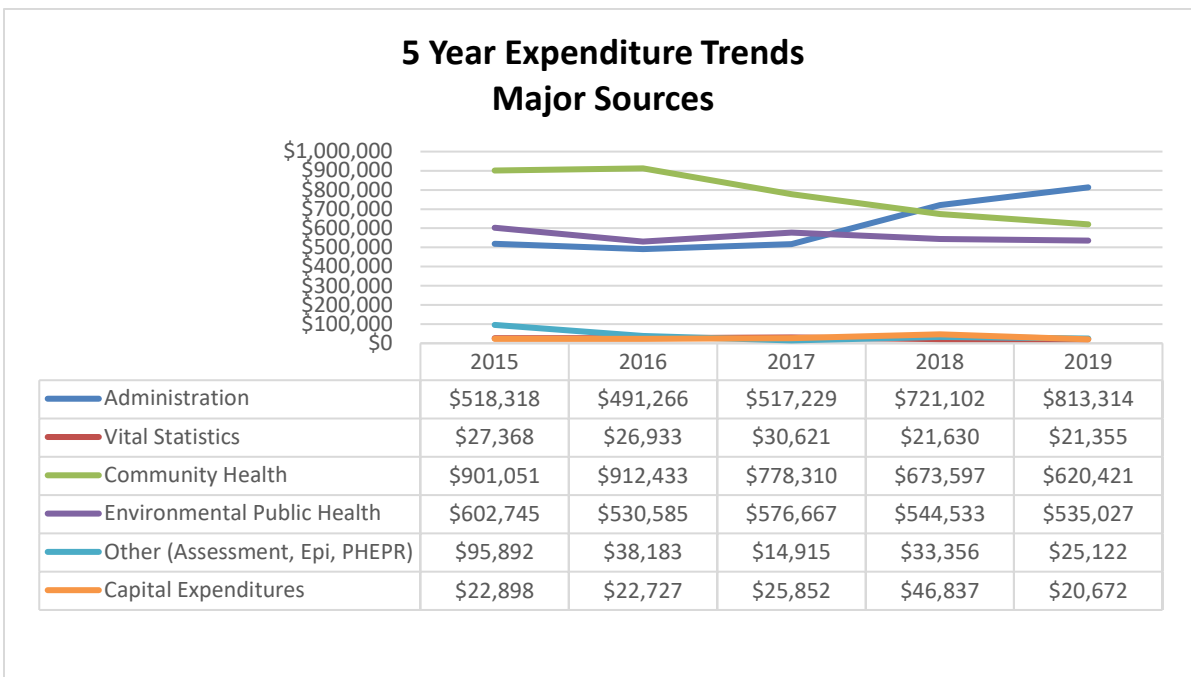
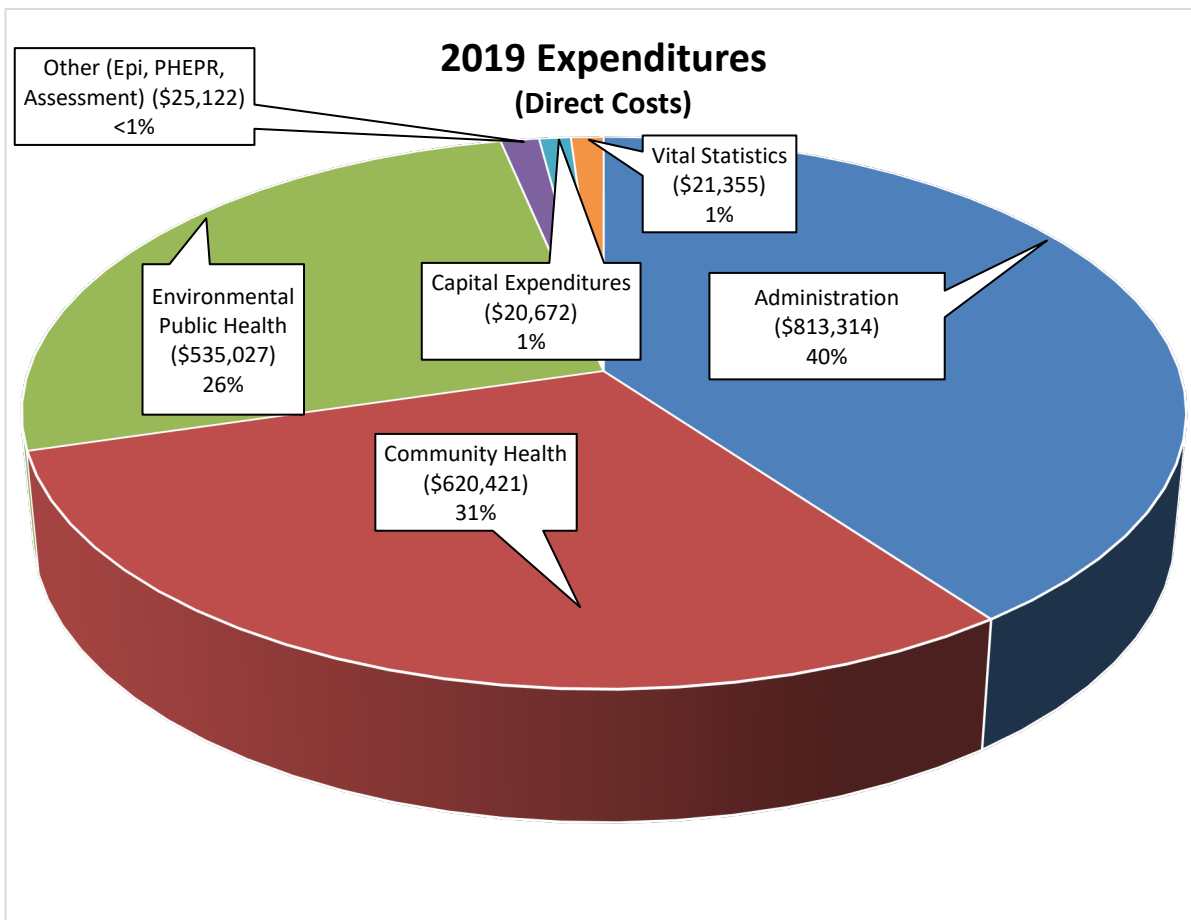
■ Administration (\$386,037) ■ Community Health (\$587,950) ■ Environmental Health (\$497,896)

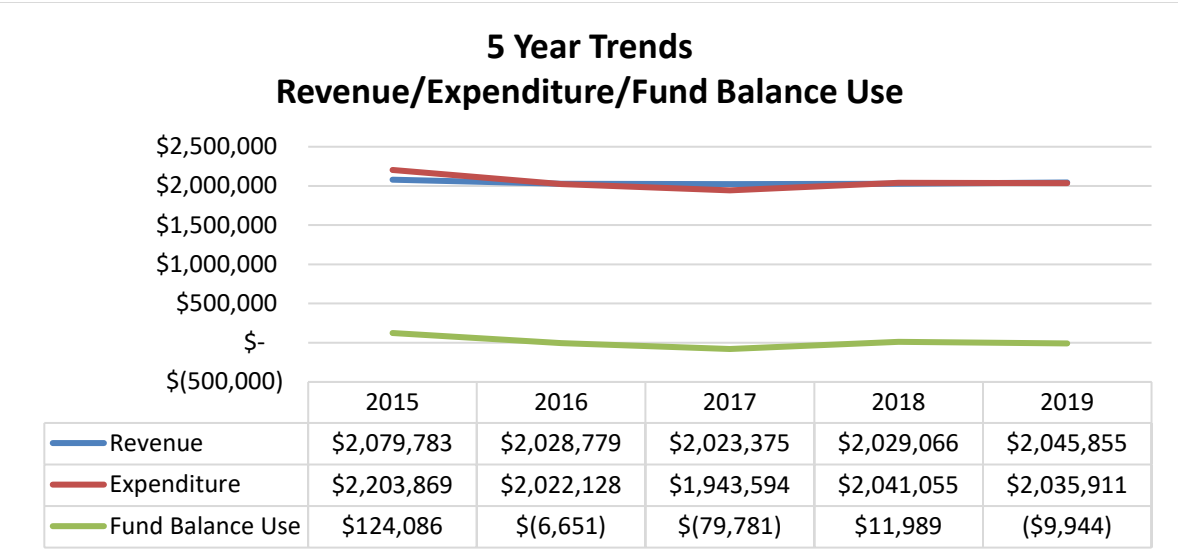
5 Year Employment Trends



	2015	2016	2017	2018	2019
FTEs	22.2	19.3	19.46	21.1	20.3
Employees	23	20	20	22	21



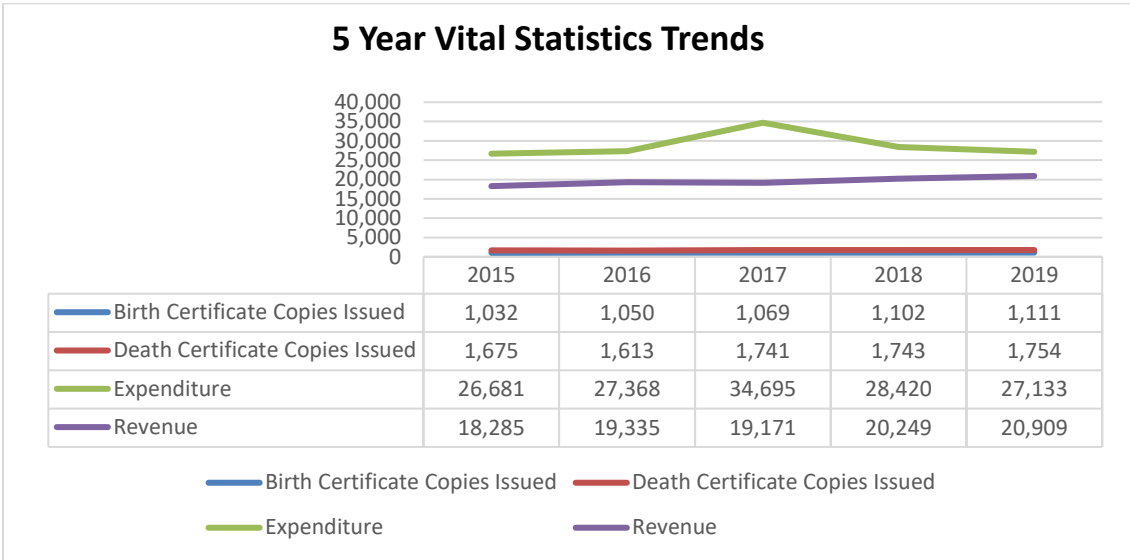




VITAL STATISTICS

Through the Colville administration office, vital statistics services are provided. Under the supervision of the health officer, administrative staff serve as local deputy registrar's, with the administrative executive secretary functioning as lead deputy registrar. Services provided include:

- Providing certified birth certificates for persons born in Washington State after July 1, 1907.
- Assist with the process to correct birth records.
- Providing certified death certificates for deaths that occurred in Ferry, Pend Oreille, and Stevens Counties from February 2014 to present as well as deaths occurring in other Washington counties if the record was filed electronically.
- Assist with the process to amend death certificates.
- Review and file each death record in computer database to ensure compliance with laws.
- Assist family with death certificate process in the absence of funeral home involvement.



PUBLIC HEALTH EMERGENCY PREPAREDNESS & RESPONSE ACTIVITIES

The public health emergency preparedness and response (PHEPR) program is led by the District’s administrator, who acts as the public health “Local Emergency Response Coordinator.” The services and activities of this program promote the planning, surveillance, training, infrastructure development, and communication development of the District’s emergency preparedness and response capabilities. PHEPR activities in this program include:

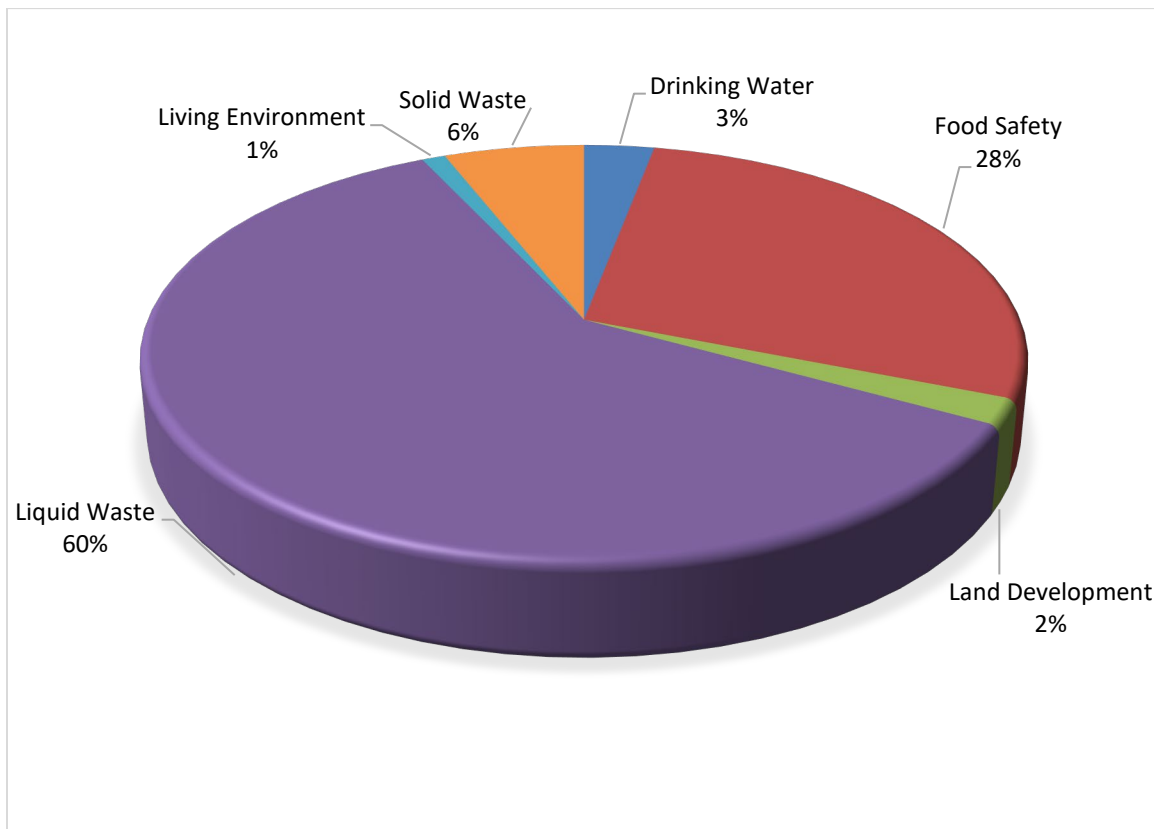
- Maintaining and exercising the public health emergency response plan
- Maintaining and testing a 24/7 response system
- Participating and organizing regional meetings and activities
- Participation in county local emergency planning committee (LEPC) group meetings, exercises, and plan reviews
- Working in close coordination with county emergency managers
- Completing and organizing training activities for staff
- Development of local plans and implement use of Strategic National Stockpile

OF SIGNIFICANCE IN 2019:

Participated in each county’s update process for multi-hazard mitigation plans, established mutual aid agreement for public health emergency coordination with tribal partners, registered all staff with emergency notification system, Washington Secure Electronic Communications, Urgent Response and Exchange System (WA SECURES), completed substantial update of Emergency Response Plan with appendixes/annexes, and participated in Washington State Department of Health’s review of NETCHD program.

2019 ENVIRONMENTAL PUBLIC HEALTH ACTIVITIES

Environmental Public Health Activities by Program in 2019



CHEMICAL/PHYSICAL HAZARDS ACTIVITIES

Chemical/physical hazards activities deal primarily with the effects of chemical or physical contaminants in the environment which may adversely affect the health and/or safety of the public. Activities include:

- Assess the potential health threats at a property that has been the site of illegal drug manufacturing and required corrective action, when necessary, prior to re-occupancy
- Provide assistance and informational material to the public on lead poisoning and testing
- Provide assistance and informational material to the public on radon and radon testing
- Assist with questions about the proper handling and disposal of asbestos
- Work with local and state agencies to assist in providing a local response to emergencies, such as spills or storage leaks, until the appropriate state agency is available
- Coordinate with the Washington State Department of Ecology, Washington State Department of Agriculture, and the Washington State Department of Health in matters dealing with exposure to hazardous chemicals
- Respond to complaints

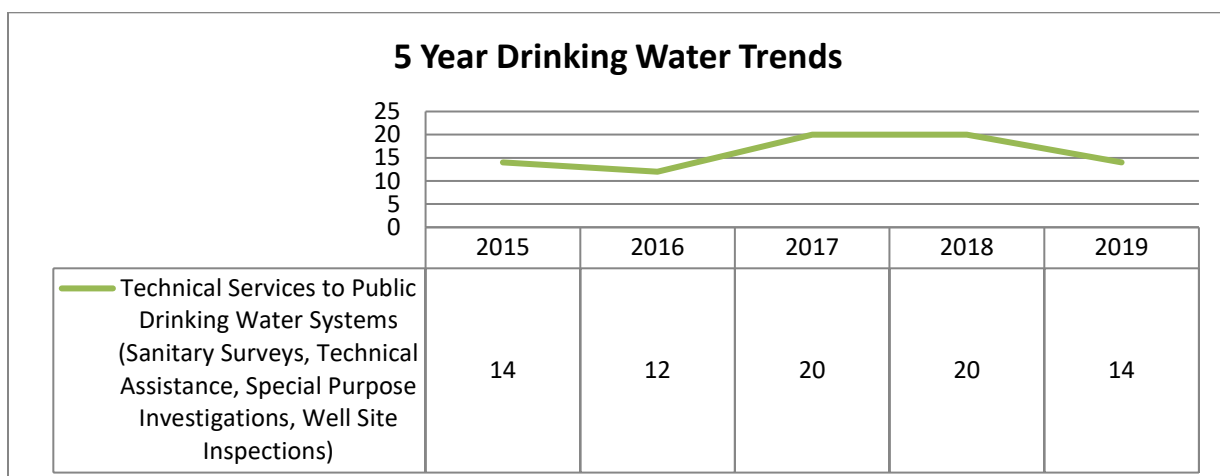
DRINKING WATER ACTIVITIES

The purpose of the drinking water program is to help ensure the safety and adequacy of drinking water, both for private and public supplies. Environmental public health staff supports the efforts of the Washington State Department of Health (DOH) to approve and monitor community water systems. Responsibilities for public water systems are delegated from DOH through a joint plan of responsibility as well as a locally adopted resolution. Environmental public health staff is responsible for completing the following activities:

- Provide support to DOH by monitoring and inspecting community water supplies
- Provide technical assistance to owners and operators of public drinking water systems
- Evaluate proposed sites for new public drinking water wells
- Review Group B water system designs and approve proper installation
- Coordinating with planning departments during the platting process for new subdivisions proposing public water service
- Work with building departments to provide recommendations for water system treatment and testing parameters for water system adequacy
- Investigate waterborne illnesses
- Respond to complaints and inquiries
- Provide owners of private water systems technical assistance about drinking water safety

OF SIGNIFICANCE IN 2019: Staff completed all 12 of the contracted Sanitary Surveys for the Department of Health.

2019 DRINKING WATER PROGRAM SERVICES				
	TOTAL	Ferry	Pend Oreille	Stevens
Sanitary Surveys	12	3	1	8
Technical Assistance	0	0	0	0
Special Purpose Investigations	1	0	1	0
Public Well Site Inspections	1	0	0	1
Group B Water Systems	0	0	0	0



FOOD SAFETY ACTIVITIES

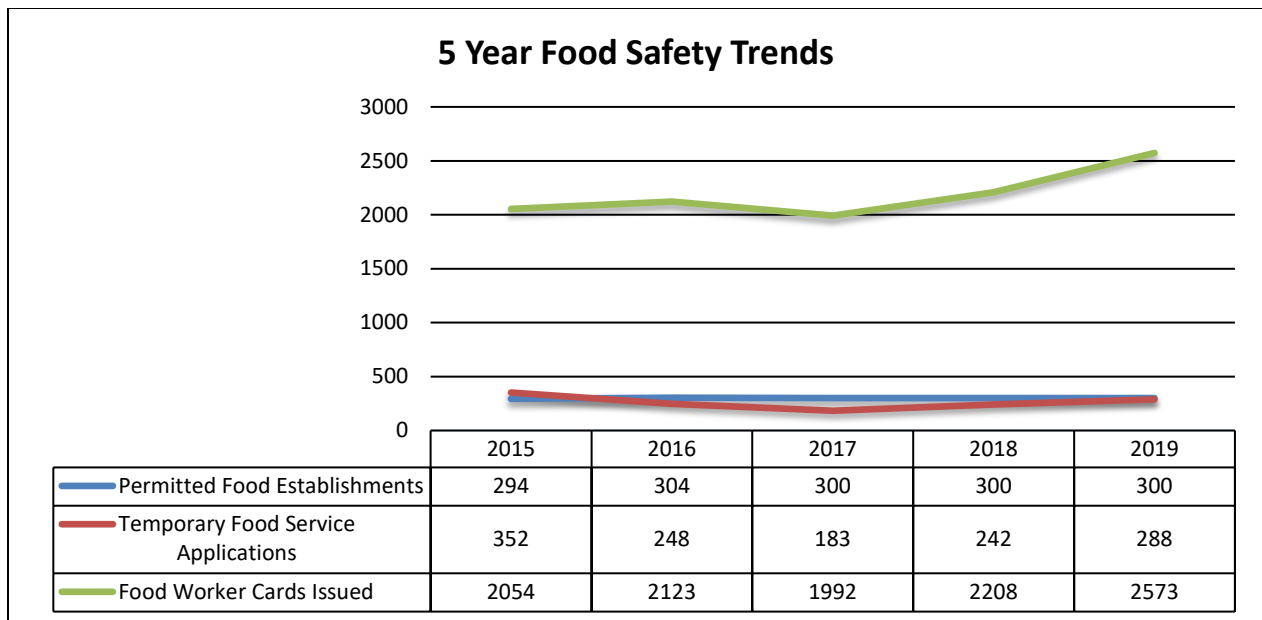
The food safety program is focused on promoting and protecting the health and well-being of the public by preventing the spread of food-borne illnesses. To accomplish this goal, environmental public health staff conducts the following activities:

- License and periodically inspect all public food establishments, including grocery stores, restaurants, bars and taverns, bed and breakfast operations, temporary food service facilities, mobile food units, catering businesses, and school cafeterias
- Review plans for construction of new food service establishments or the remodeling of an existing establishment
- Investigate food-related complaints and foodborne illnesses
- Provide training and testing for food workers
- Coordinate with other public agencies at the state and federal level to ensure safe and wholesome food is made available to the public
- Provide educational and technical advice to managers of food service establishments and the public

OF SIGNIFICANCE IN 2019: Implementation of food inspection reports being available online.

Implementation of online software integration was completed. Temporary food applications can now be applied for online. Staff completed significantly more inspections than the standards in the Food and Drug Administration (FDA) guidelines.

2019 FOOD SAFETY PROGRAM SERVICES					
	TOTAL	Ferry	Pend Oreille	Stevens	Out of Area
Permitted Food Establishments					
Permitted Food Establishments	300	42	57	201	
Food Establishment Inspections	463	47	92	324	
Temporary Food Service					
Regular Applications Received	288	41	47	157	43
Regular Events Received	177	20	39	81	37
Regular Non-profit Events Received	132	23	21	85	3
Recurring Events (Farmer's Market, etc.)	17	2	4	9	2
Recurring Non-profit Events Received	8	2	0	6	0
Temporary Event Inspections	132	0	6	126	
Food Worker Cards Issued	2573	357	516	1700	
Food-Borne Outbreak Investigations	1	0	0	1	
Complaints	24	2	5	17	



LIQUID WASTE ACTIVITIES

The goal of the liquid waste program is to ensure that the public is not exposed to disease causing organisms, nuisances, or other pollution caused by on-site sewage collection and disposal. Environmental public health staff is charged with the responsibility for completing the following activities:

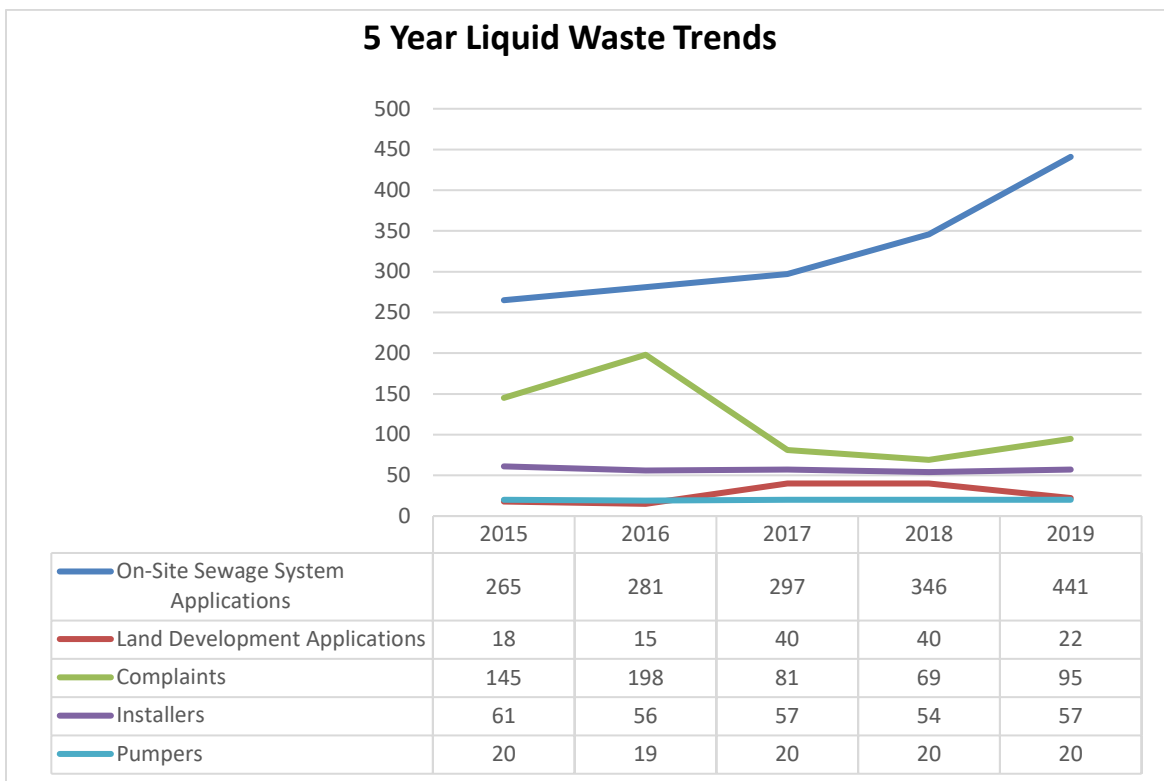
- Ensure the proper siting and installation of on-site sewage systems serving structures generating less than 3,500 gallons of wastewater per day
- Provide information to the public about proper operation and maintenance of on-site sewage systems
- Respond to complaints and correct failing on-site sewage systems
- Provide technical assistance to homeowners
- Certify installers and pumpers
- Provide educational opportunities for on-site sewage system professionals, including installers, designers, and engineers
- Review land use proposals to determine suitability for the installation of on-site sewage systems or impacts to existing systems
- Provide concurrent review of plans for larger on-site sewage disposal systems under the jurisdiction of the Washington State Department of Health, when requested

OF SIGNIFICANCE IN 2019: Processed 101 more septic applications than the previous year. One loan was approved with the Washington State Department of Ecology Craft3 program to allow for third-party financing of failing septic systems. Continued efforts were made with the county prosecutor's offices to address public health violations. Implemented an online complaint program that integrates with your database software, resulting in more efficient processing of complaints.

2019 LIQUID WASTE PROGRAM SERVICES

	TOTAL	Ferry	Pend Oreille	Stevens	Out of Area
On-Site Sewage Permit Applications	398	61	71	266	
Replacement/Repair Applications	42	7	5	30	
System Type by Percentage					
• Gravity	63%	69%	51%	70%	
• Pressure Distribution	6%	5%	7%	5%	
• Enhanced Treatment	25%	21%	33%	22%	
• Other	6%	5%	9%	3%	
Land Development Reviews	22	2	1	19	
New Complaints Received	95	15	21	59	
Certified Pumpers	20	2	4	4	10
Certified Installers	57	2	9	24	22

5 Year Liquid Waste Trends



LIVING ENVIRONMENT ACTIVITIES

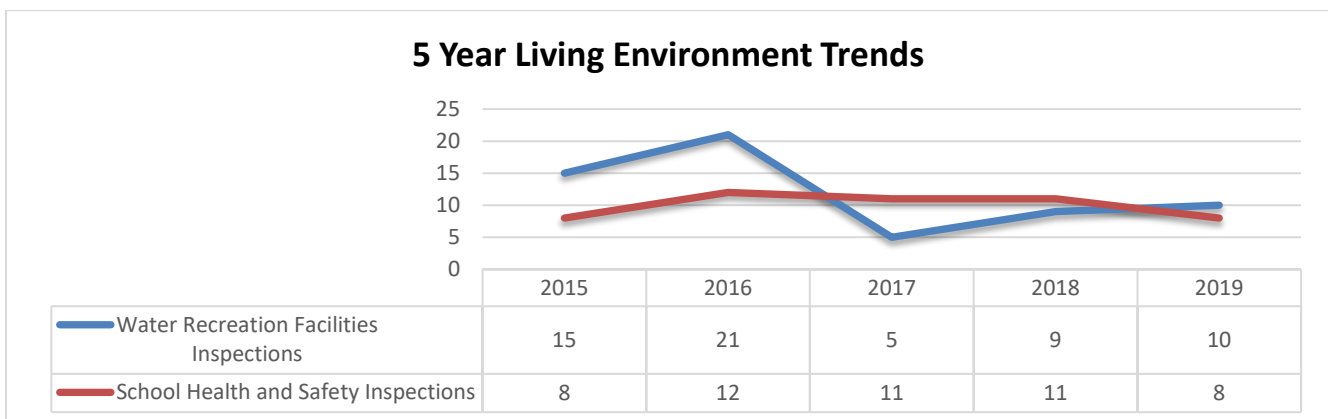
The aim of the living environment program is to protect the public from injury or disease in public buildings, schools and water recreation facilities. This program also covers a wide variety of other activities. Activities in this program include:

- Permitting and inspecting public swimming pools and spas
- Monitor public bathing beaches for water quality, when necessary
- School health and safety program that allows for health and safety inspections of schools, as well as school construction plans, response to complaints, indoor air quality concerns, and playground safety
- Respond to complaints regarding housing, indoor air quality, recreation facilities, campgrounds, etc.
- Educate business owners on the provisions of the *Smoking in Public Places Law*, and seek enforcement when necessary

OF SIGNIFICANCE IN 2019: Continued coordination with the Washington State Department of Health (DOH) for the testing of lead in drinking water at schools. Republic Elementary and Gess Elementary (Chewelah) had some fixtures with results between 10 and 20 parts per billion (ppb). DOH provided them with guidance on remediation actions and offered follow up testing. The two schools have implemented a flushing program but have not requested follow up testing.

2019 LIVING ENVIRONMENT PROGRAM SERVICES				
	TOTAL	Ferry	Pend Oreille	Stevens
Permitted Water Recreation Facilities	11	0	5	6
• Inspections of Water Recreation Facilities	10	0	5	5
• Closures for Violations	0	0	0	0
Schools That Require Health and Safety Inspections*	42	8	7	27
School Health and Safety Inspections for 2019	8	3	0	5
Living Environment Complaints/Request for Service	3	0	0	3

*Schools are to receive an inspection once every three years



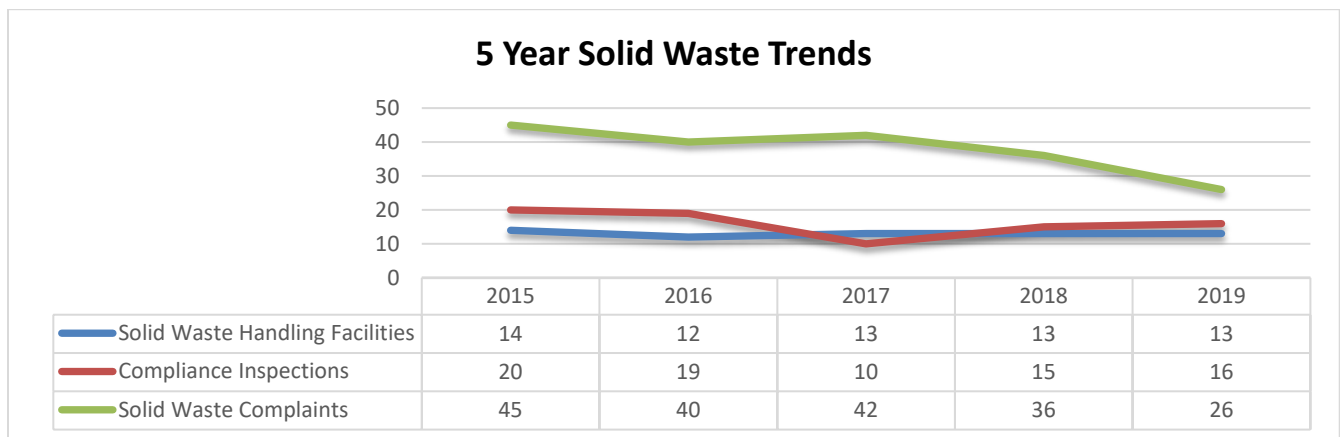
SOLID WASTE ACTIVITIES

Activities of the solid waste program are aimed at ensuring that solid waste materials are properly collected, stored, and disposed of in a manner that reduces the probability for disease transmission, nuisance, and environmental degradation. In meeting this responsibility, staff works closely with county solid waste departments, solid waste advisory committees, and the Washington State Department of Ecology. Activities include:

- Issuance of solid waste handling permits for landfills, transfer stations, and wood ash disposal sites
- Compliance inspections of permitted facilities
- Ongoing review of compliance reports for permitted sites, including groundwater monitoring
- Respond to solid waste complaints
- Development and enforcement of local solid waste regulations
- Coordination of tri-county solid waste meetings

OF SIGNIFICANCE IN 2019: Coordinated the post closure monitoring of Torboy landfill in Ferry County, and the Lone and Deer Valley landfills in Pend Oreille County. This will result in significant savings to the counties. Several collaborative meetings were conducted to move towards compliance for the leachate management at the Stevens County landfill. Collaborative meetings conducted with the City of Colville concerning the proper management of street sweepings, yard debris, and leaf collections. Updated our Solid Waste Ordinance to be compliant with WAC 173-350 and WAC 173-351.

2019 SOLID WASTE PROGRAM SERVICES				
	TOTAL	Ferry	Pend Oreille	Stevens
Solid Waste Handling Facilities	13	2	5	6
Compliance Inspections	16	2	5	9
Solid Waste Complaints	26	2	3	21

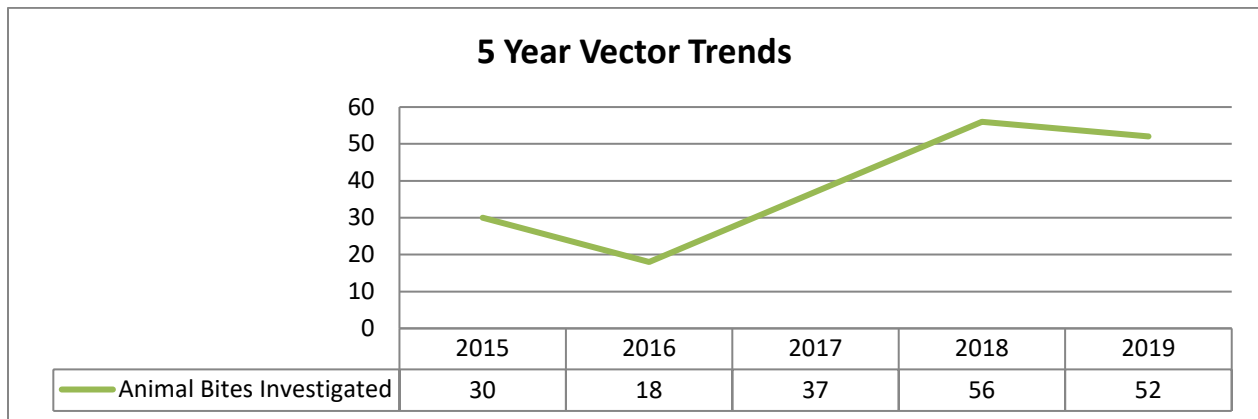


VECTOR ACTIVITIES

Activities in this program are in response to animal bites, complaints or direct requests for information or assistance regarding vectors. Activities include:

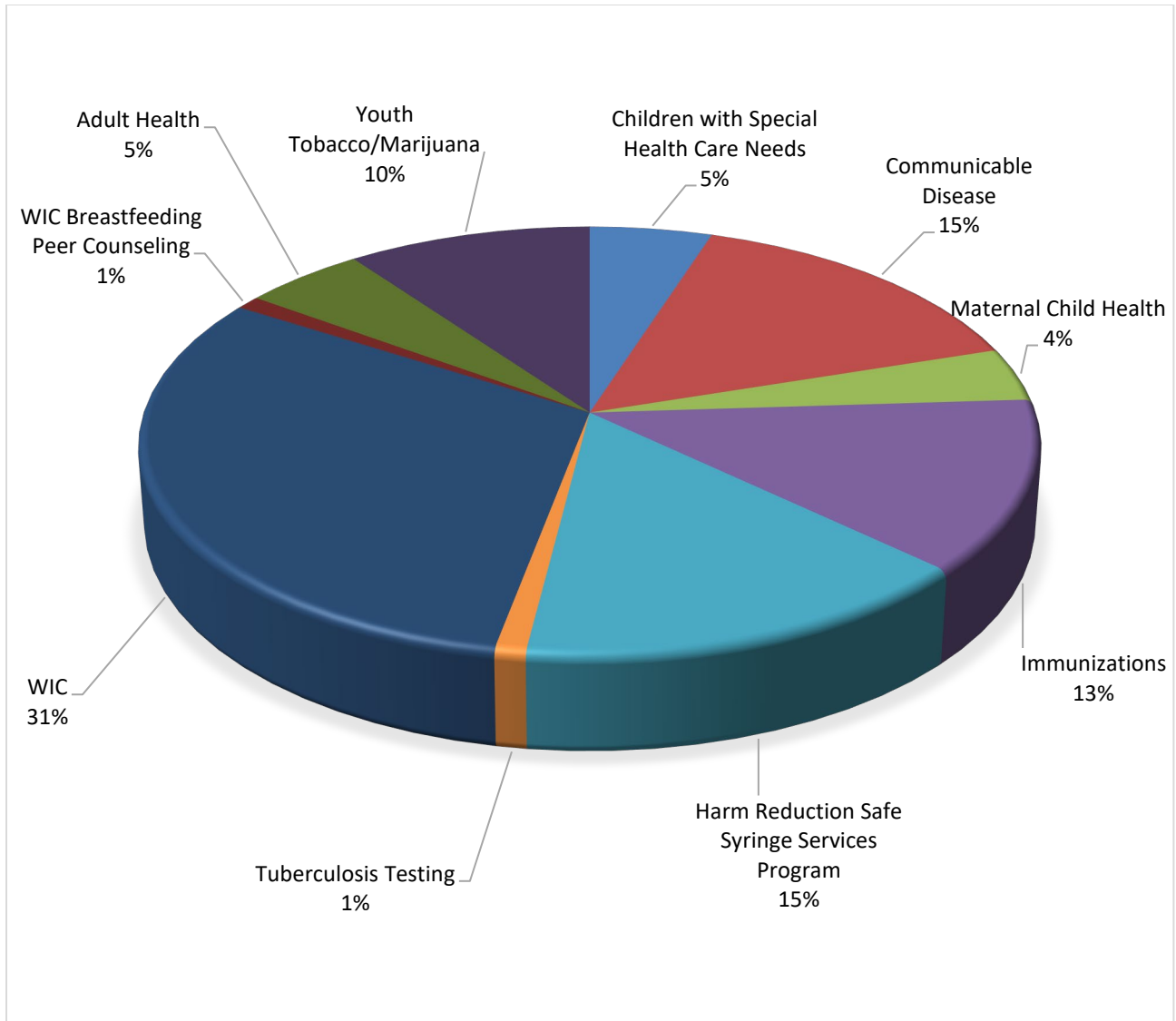
- Investigation of animal bites and bat exposures
- Providing technical advice and educational material on vector control
- Providing technical assistance and educational information about West Nile virus
- Responding to vector related complaints

2019 VECTOR PROGRAM SERVICES				
	TOTAL	Ferry	Pend Oreille	Stevens
Reported Rabies Exposure Investigated	52	11	7	34



2019 COMMUNITY HEALTH ACTIVITIES

Community Health Activities by Program in 2019



COMMUNICABLE DISEASE

Communicable disease in 2019 had a large diversity of diseases reported including cases of probable mumps, relapsing fever, and yersiniosis. NETCHD also saw the addition of a new reportable, *vaping associated lung illness*.

Notable general communicable disease investigations for 2019 include:

- Measles outbreak occurred in Clark County, Washington. During the outbreak, communicable disease staff provided health alerts and education for healthcare providers, community members, and local schools. With the outbreak occurring, communicable disease staff assisted school nurses with the measles, mumps, and rubella (MMR) requirements of staff and students. Samples from two residents were sent for measles testing, both were negative. NETCHD did not have a confirmed case of measles occur during the outbreak.
- In April, there was an increase of upper respiratory illness that was negative when testing was done for influenza A or B. NETCHD's Health Officer, Dr. Samuel Artzis, recommended increasing testing and found parainfluenza 3 circulating in a higher than normal rate. Communicable disease staff worked with local health care providers and facilities on implementing infection control guidelines and providing education to the public to decrease further transmission.
- In May, Ferry and Pend Oreille Counties both had cases of hepatitis A reported. The Pend Oreille County case was linked to current hepatitis A outbreak occurring in Spokane County. The case reported to Ferry County was linked to travel out of the country. In July, an additional hepatitis A case was reported in Stevens County, that was linked to the Spokane County outbreak. This case was found to be convalescent during work-up. In response to the hepatitis A outbreak occurring in Spokane County, communicable disease staff reached out to occupations at highest risk for exposure, for example, emergency medical services (EMS) and sewage and waste treatment staff, to discuss risks and importance of hepatitis A immunization.
- The end of May, confirmed pertussis cases were reported in Ferry County. By the end of the year, more than 25 cases were investigated for potential pertussis in both Ferry and Stevens Counties. By the Department of Health (DOH) definition, 13 were confirmed cases of pertussis, with the rest being reported as suspect or probable.
- In November, two cases of campylobacteriosis were linked to consumption of raw milk. Community health communicable disease staff coordinated with environmental health staff in efforts to prevent further transmission.

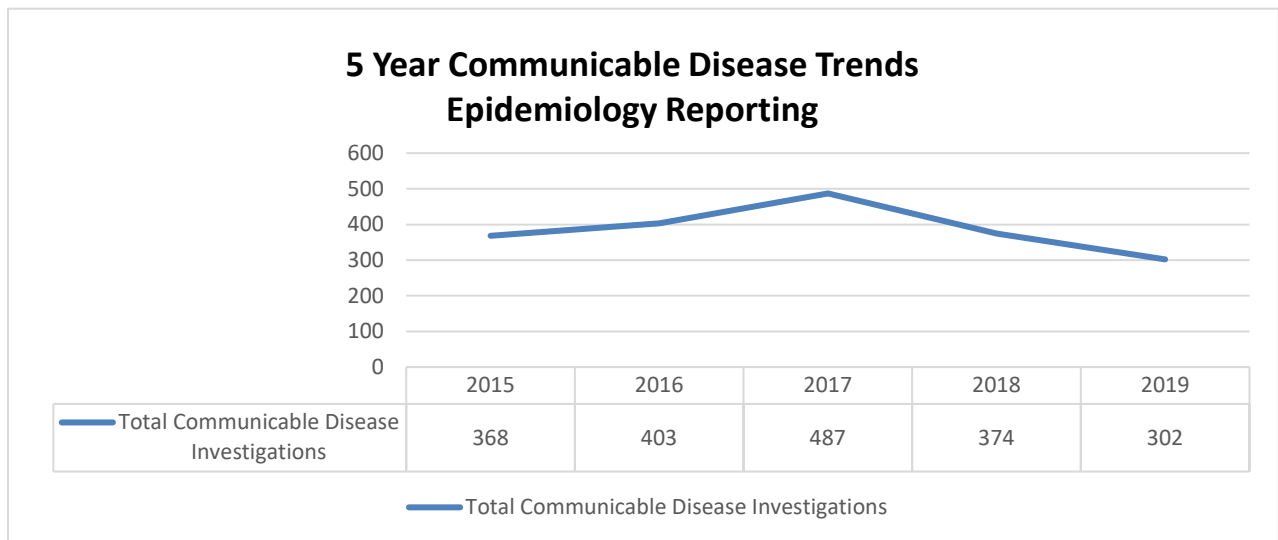
Sexually transmitted disease/sexually transmitted infection investigation activities for 2019 include:

- Chlamydia continues to be the highest reported sexually transmitted disease, with an increase in gonorrhea cases reported in Ferry and Stevens Counties. To increase awareness, education and prevention, communicable disease staff continue interviewing gonorrhea cases to assure proper treatment and partner management/treatment.

Work in communicable disease includes surveillance and investigation of notifiable conditions in Washington State, as described in WAC 246-101. Community health staff is responsible for completing the following activities:

- Investigation of individual cases and outbreaks of communicable diseases
- Collection, analysis, and dissemination of communicable disease information to identify disease trends, including emerging infections
- Education and support for health care providers and the public on communicable disease prevention and control
- Planning and response for public health emergencies involving communicable diseases

OF SIGNIFICANCE IN 2019: Communicable disease staff saw an increase in disease outbreaks which included pertussis occurring in our tri-counties and Spokane County. Hepatitis A outbreak in Spokane County which resulted in linked cases in our tri-counties. Measles outbreak in Clark County, campylobacteriosis outbreak in Stevens County, and local outbreaks of non-reportable diseases like parainfluenza 3.



COMMUNITY HEALTH COMMUNICABLE DISEASE INVESTIGATIONS				
Disease	Ferry	Pend Oreille	Stevens	Total Confirmed Cases
Campylobacteriosis	0	2	7	9
Giardiasis	1	1	1	3
Legionnaires Disease	0	1	0	1
Shigellosis	0	0	0	0
Salmonellosis	0	0	5	5
Shiga toxin-producing E. coli	1	0	1	2
Suspected Rabies	0	1	0	1
Chlamydia	13	25	92	130
Gonorrhea	7	1	31	39
Syphilis	0	0	3	3
Herpes Simplex	3	3	4	10
Hepatitis A	0	1	0	1
Hepatitis B – Acute	0	0	1	1
Hepatitis C – Acute	0	0	0	0
Hepatitis B - Perinatal	0	0	1	1
Hepatitis B – Chronic	0	0	1	1
Hepatitis C – Chronic	6	9	58	73
Pertussis	5	1	7	13
Meningococcal Disease	0	0	0	0
Rare Disease of PH Significance	0	0	0	0
Mumps	0	0	0	0
Influenza associated Death	0	4	3	7
Haemophilus Influenzae	0	0	0	0
Arboviral Disease	0	0	0	0
Hantavirus	0	0	0	0
Malaria	0	0	0	0
Prion Disease Human	0	0	0	0
Tickborne	0	0	0	0
Relapsing Fever	0	0	1	1
Coccidiomycosis	0	0	0	0
Cryptosporidiosis	0	0	0	0
Yersiniosis	0	0	1	1
TOTAL INVESTIGATIONS	36	49	217	302

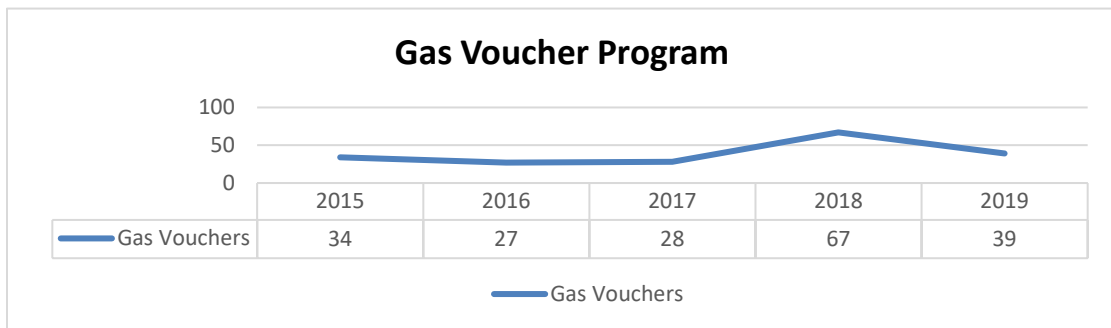
These are confirmed cases for Ferry, Pend Oreille, and Stevens Counties. This chart does not display suspect and probable cases that occurred in 2019.

GAS VOUCHERS

The Stevens County Relay for Life gas voucher program assists cancer patients who reside in Stevens County and need to travel outside the area for chemotherapy and/or radiation treatments. The gas vouchers help to offset fuel costs incurred while traveling weekly or sometimes daily for appointments. Cancer patients receive six-\$25 gas vouchers, which can be redeemed at a participating gas station located in Colville, Chewelah, or Loon Lake. This program operates solely on private donations.

In 2019, approximately \$6,000 in gas vouchers were given to cancer patients in our Stevens County communities. The Cancer Outreach Center located at Providence Mount Carmel Hospital received \$1,517.33 in private donations during 2019.

OF SIGNIFICANCE IN 2019: All funds were depleted by the end of October. Although we received many inquiries, we were unable to fulfill many gas voucher requests during the last quarter of 2019. NETCHD staff is coordinating fundraising events within our facility and are working closely with the Cancer Outreach Center locally to raise additional funds for this program.

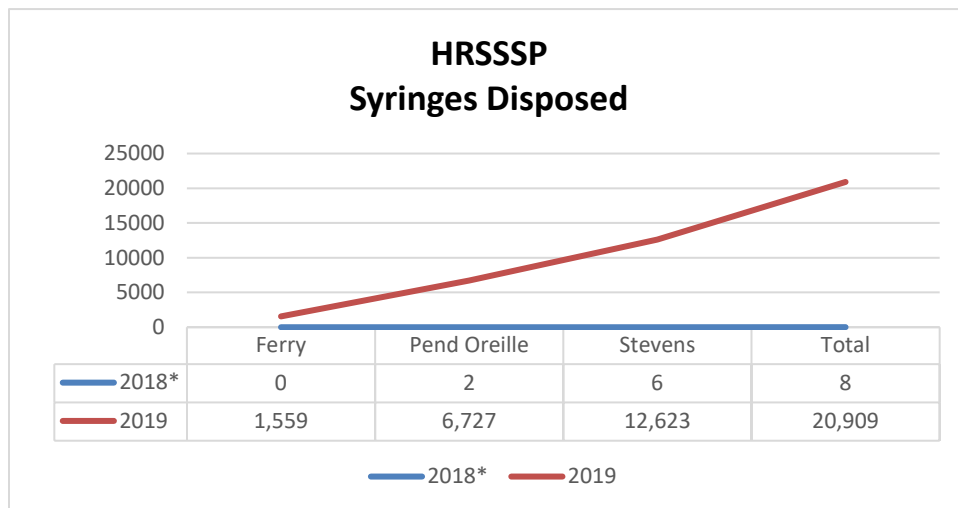


HARM REDUCTION SAFE SYRINGE SERVICES PROGRAM

In August 2018, NETCHD opened a Harm Reduction Safe Syringe Services Program (HRSSSP) to address the increased rates of hepatitis C and the opioid crisis. In 2018, 939 syringes were exchanged, eight naloxone kits (overdose reversal medication) were distributed, one of which was used to successfully reverse an overdose. In 2019, 20,909 syringes were properly disposed of and 83 naloxone kits were distributed, with 22 of the kits used to reverse overdoses. The HRSSSP program is currently providing services to over 60 unique clients with several of the clients attending the exchange for themselves and others.

Accomplishments for 2019:

- Ferry and Pend Oreille Counties saw the first clients utilize the HRSSSP.
- Two extension sites were opened with once per month services at the following locations:
 - Loon Lake Food Bank
 - Chewelah Food Bank
- Expanded services in Ferry County are offered by appointment, as needed.
- Naloxone kits were provided to local law enforcement agencies:
 - Ferry County Sheriff’s Department
 - Stevens County Sheriff’s Department
 - Chewelah Police Department
 - One kit distributed was used to reverse an overdose
 - Colville Police Department
 - Kettle Falls Police Department
- Distributed 83 naloxone kits through the HRSSSP to individuals at risk for overdose, family members of individuals at risk, and community members who work with an at-risk population.
- Naloxone kits provided through the HRSSSP resulted in 22 overdose reversals.
- The HRSSSP has properly disposed of >1500 syringes from the community but were not looking to exchange syringes. The syringes disposed by community members are not included as part of our exchange count.



*HRSSSP started in the last quarter of 2018

IMMUNIZATION PROGRAM WASHINGTON IMMUNIZATION INFORMATION SYSTEM VACCINES FOR CHILDREN

Immunizations have proven to be one of the most effective ways to prevent diseases. The immunization program works towards preventing vaccine preventable diseases in children, adolescents, and adults.

The Washington State Adult Vaccine Program (AVP) provides vaccine for adults 19 years of age and older, who are underinsured or uninsured. This program is funded using Section 317 federal funding and is offered once per year on a very limited basis. The adult state supplied vaccines are offered in each of our three offices.

NETCHD continues to provide Vaccines for Children (VFC) in the Republic office only. All offices administer adult vaccines for travel and businesses needing vaccines for their employees. Influenza vaccines are available on a limited basis in the Colville and Republic offices.

NETCHD received an additional \$5,600 grant from DOH for the 2019-2020 funding cycle, as well as funding from Foundational Public Health Services, to improve immunization rates in the birth to 18-year-old population within our three counties. NETCHD chose to concentrate our activities on assisting daycares, schools, preschools, and immunization providers with activities that would increase immunization rates within this population. An informational presentation was given for school superintendents and conversations have been held with school nurses and vaccine coordinators in the provider's offices throughout our three counties regarding offering school-based vaccination clinics.

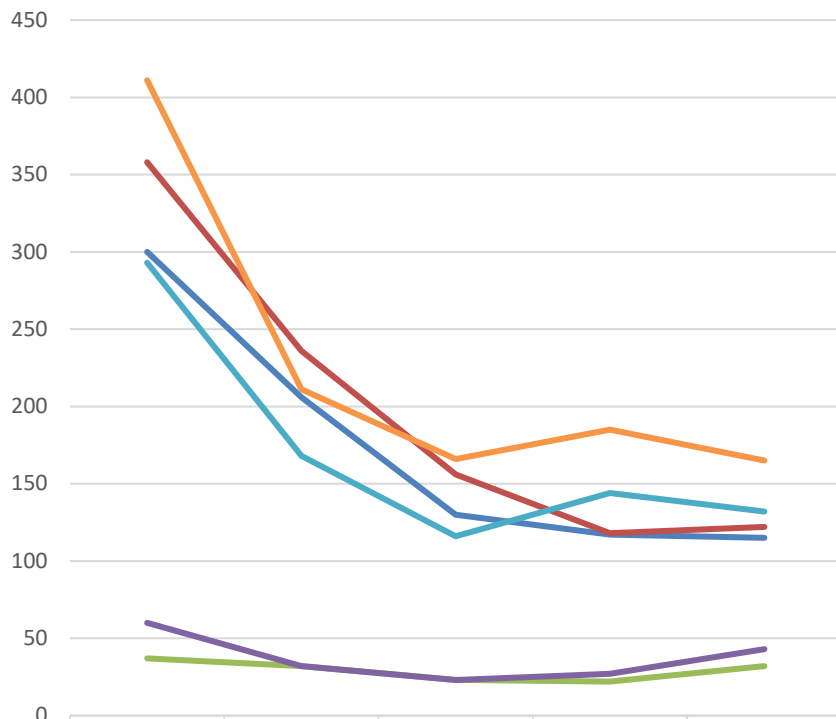
NETCHD partnered with NEW Health Programs during the "vaccine round-up" for the Colville School District. The vaccine round-up clinics are held twice during the school year at one of the schools within the Colville School District. In 2019, NETCHD community health staff assisted with this same type of clinic at the Chewelah School District. Community health staff provided data input into the Washington Immunization Information System (WIIS).

NETCHD partnered with the Newport School District and local providers to assist in administering approximately 80 vaccinations during the Newport School District "School Health Fair". New during 2019, NETCHD added additional school-based clinics at Springdale, with Loon Lake School District invited to attend; 14 vaccinations were administered. Hunters School District, with Evergreen School District invited to attend; 5 vaccinations were administered. Selkirk School District; 15 vaccinations were administered. All vaccinations administered were entered in the WIIS by NETCHD staff.

The Rural Children's Immune Outreach Project, a new collaborative project between NETCHD and Providence Northeast Washington Medical Group (PNEWMG) is in the formative stages. This outreach will focus on increasing the number of children 0-2 years of age, who are not up-to-date on their immunizations. A clinic room will be utilized at NETCHD's Colville office. NETCHD will provide advertising within the communities and outreach to the clientele it serves. PNEWMG will have providers, vaccines, supplies, and other necessities. This project was still in the planning stages at the end of 2019.

NETCHD reached out to school districts within the three counties to offer our assistance with enacting the new MMR vaccine law for schools, preschools, and licensed childcare facilities. The law took effect July 28, 2019 and applies to public and private schools and childcare facilities by removing the option for a personal/philosophical exemption to the MMR vaccine requirement. It also requires employees and volunteers at childcare centers to provide immunization records indicating they have received the MMR vaccine or proof of immunity. This law does not change religious and medical exemptions laws. Children who have one of these types of exemptions on file are not affected by the new law. Most of the school districts were prepared for the new law and did not require as much assistance as they originally anticipated.

5 Year Trends Clients Served and Immunizations Given



	2015	2016	2017	2018	2019
Ferry - Clients	300	206	130	117	115
Ferry - Immunizations Given	358	236	156	118	122
Pend Oreille - Clients	37	32	23	22	32
Pend Oreille - Immunizations Given	60	32	23	27	43
Stevens - Clients	293	168	116	144	132
Stevens - Immunizations Given	411	211	166	185	165

2018 - 2019 IMMUNIZATION EXEMPTION RATES IN SCHOOLS BY COUNTY			
COUNTY	STUDENTS	EXEMPT STUDENTS	EXEMPTION RATE
Ferry	793	56	7.0%
Pend Oreille	1,527	94	6.1%
Stevens	6,223	487	7.8%

2018-2019 K-12 IMMUNIZATION EXEMPTION RATES BY TRI-COUNTY SCHOOL DISTRICT

(Exemption indicates the student is not up to date on required school immunizations)

COUNTY	DISTRICT	EXEMPTION RATES	
		2017-2018	2018-2019
Ferry	Curlew	23.3%	23.6%
Ferry	Inchelium	No Report	0.5%
Ferry	Keller	No Report	No Report
Ferry	Orient	16.0%	No Report
Ferry	Republic	12.3%	20.9%
Pend Oreille	Cusick	14.7%	4.2%
Pend Oreille	Newport	9.0%	9.0%
Pend Oreille	Selkirk	4.0%	5.9%
Stevens	Chewelah	2.7%	No Report
Stevens	Columbia	6.7%	5.6%
Stevens	Colville	12.5%	7.1%
Stevens	Evergreen	12.1%	11.8%
Stevens	Kettle Falls	11.9%	12.6%
Stevens	Loon Lake	3.6%	8.9%
Stevens	Mary Walker	13.4%	12.8%
Stevens	Nine Mile Falls	6.6%	5.6%
Stevens	Northport	17.7%	20.4%
Stevens	Onion Creek	14.7%	No Report
Stevens	Summit Valley	32.9%	27.5%
Stevens	Valley	25.3%	22.8%
Stevens	Wellpinit	1.1%	0.8%

MATERNAL CHILD HEALTH BLOCK GRANT POPULATION-BASED WORK

The Washington State Department of Health (DOH) initiated a fundamental change in 2013 regarding how the federal block grant dollars would be utilized for Maternal and Child Health (MCH). NETCHD was asked to select from a specified menu of activities, what we wanted to address in our three counties. NETCHD chose the National Performance Measures (NPMs):

- Increase the percentage of Children and Youth with Special Health Care Needs (CYSHCN) ages 0-18, whose families report that community-based services are organized so they can use them easily.
- Adverse Childhood Experiences (ACEs), community planning and organizing.
- Participate in local Accountable Communities of Health (ACH).

Work has continued with community partners to implement activities to "move the needle" within these performance measures. At the beginning of the new fiscal year, October 2019, the NPMs were changed and the work was as follows:

- ACEs planned activities will be centered on assessing the existence of programs, organizations, and coalitions within the three counties that aim to prevent ACEs and promote resiliency.
- Educate NETCHD staff, community partners and/or community members about ACEs, complex trauma and resiliency.
- Work with community partners to support trauma informed programs that already exist and assist those partners that would like to develop such services.

Adverse Childhood Experiences (ACEs):

New to the 2019-2020 Maternal and Child Health Block Grant work within the three counties is information gathering regarding ACEs and what resources are available to assist families within schools and other agencies. Children with qualifying ACEs scores may also be eligible for the CYSHCN program, depending on what services the child may require. CYSHCN coordinators have been training in ACEs and trauma informed care and have informed schools within the three counties regarding the training they have completed and what resources are available. The CYSHCN coordinators are researching which programs school staff have been trained in and if they were able to secure funding. They have talked to funding sources about what is required from a school to secure funding, to train staff on ACEs, and what services are available for children with high ACEs scores. The coordinators will then talk with partners in other agencies such as Head Start, Early Head Start, and preschools to see what resources are available to them with regards to trauma informed care. Once this process is complete, community asset mapping will be performed to assess where services exist, and where there may be gaps in services. This information will be used to explore funding for training within agencies that are interested.

Accountable Communities of Health:

NETCHD participated in local accountable communities of health (ACH) meetings with regular attendance at Healthy Ferry County Coalition, Pend Oreille Health Coalition, and Stevens County Roundtable, to support public health activities within these groups and advocate for the maternal and child health population.

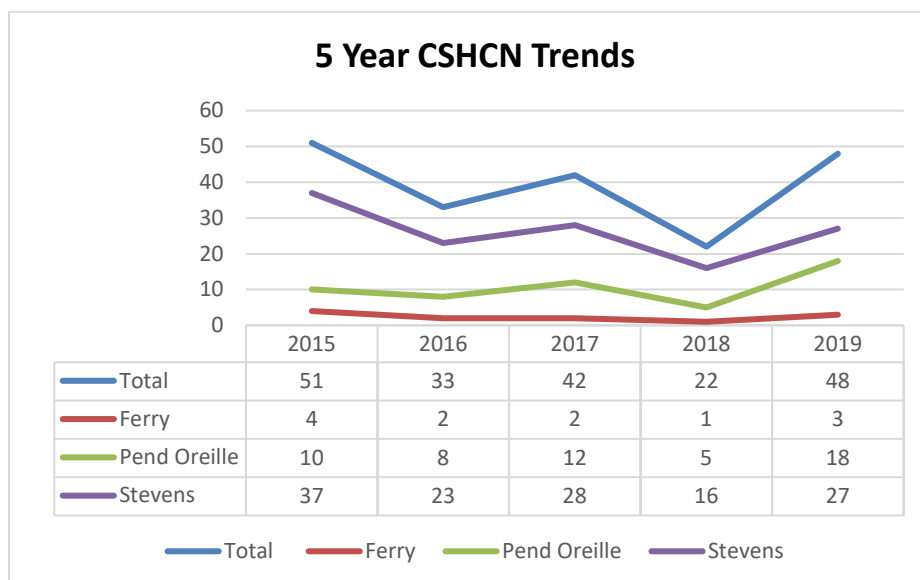
Children with Special Health Care Needs (CSHCN):

The Children with Special Health Care Needs (CSHCN) program serves children who have serious physical, behavioral or emotional conditions that require health and related services beyond those generally required by children. Community health staff is responsible for completing the following activities:

- Provide assessment to determine need for health or developmental services.
- Link families to appropriate information and referral services in their local communities to early and continuous screening.
- Promote partnerships among families, health care providers, other professionals, and the communities to help families know about and access medical and other services for their children with special needs.
- Promoting medical homes through care coordination and co-management strategies, education, use of care notebooks and care plan tools, and other resources.
- Work to increase and improve health insurance for children with special health care needs. This is done primarily through federal, state and local funding and inter-agency collaboration.
- Promote community-based services which are accessible, coordinated, client centered, and culturally competent.
- Collaboration, along with partners to help families and youth receive the services necessary to make the transition to adult life, including adult health care, work and independence.

The diagnoses for children served through this program included children identified with developmental delays, low birth weight infants, infants diagnosed with failure to thrive, premature infants as well as infants born with birth defects such as cleft lip and palate.

OF SIGNIFICANCE IN 2019: The CSHCN coordinator for Ferry and Stevens Counties began training, and the CSHCN coordinator for Pend Oreille County assisted with her training as well. The Pend Oreille County coordinator also assisted with service delivery to families within the tri-counties during the training process. New families continue to be enrolled and existing clients are being contacted regarding their interest or need for future services within the CSHCN program.



MEDICAID ADMINISTRATIVE CLAIMING

Medicaid administrative claiming (MAC) is a statewide effort by local health jurisdictions (LHJs) to assist the state in administering its Medicaid program. The federal agency, Centers for Medicaid Services (CMS) reimburses public agencies and their contractors for part of the costs of activities that assist the state Medicaid agency to carry out its responsibilities. Many of these activities already are being done in LHJs. NETCHD tracks “matchable” activities, and after invoicing is complete, is reimbursed by Medicaid for those activities.

OTHER COMMUNITY HEALTH DIVISION ACTIVITIES

In addition to program activities, NETCHD staff participates in an advisory capacity on several community advisory boards, councils, workgroups and teams to support families and children. In this role, staff is used as a resource to address the health of children, as well as offering information to staff and parents. These connections facilitate the sharing of resources, new programs and cooperative work efforts. These collaborative efforts include participation in the following groups:

- Head Start
- Healthy Ferry County Coalition
- Interagency Coordinating Council (Birth to 3 Program)
- Northeast Washington Health Programs
- Pend Oreille Health Coalition
- Rural Resources Community Action
- Stevens County Roundtable

TRI-COUNTY OPIOID TREATMENT NETWORK PROJECT

The Hub & Spoke grant is a response model project introduced as an element of the 21st Century Cures Act to address the opioid crisis in Washington State. The “Hubs” are appointed medical facilities where individuals with opioid use disorder (OUD) can be evaluated and prescribed medication-assisted treatment (MAT) and treated for co-occurring chronic illnesses. The “Spokes” comprise of various agencies such as medical facilities and social service organizations where individuals with OUD can be identified and referred to the hub for treatment evaluation. At each spoke, a designated care navigator is available to help those with OUD overcome any barriers that can compromise successful treatment induction and maintenance. Together the hubs and spokes in Ferry, Pend Oreille and Stevens Counties form the Tri-County Opioid Treatment Network offering comprehensive medical, mental and social healthcare. By providing medical treatment, counseling and other wrap-around services, those with OUD will have increased treatment access and recovery success.

NETCHD is a participating spoke, housing one care navigator within the Tri-County Opioid Treatment Network. Other agency spokes include Rural Resources, Lake Roosevelt Community Health Center, Ferry County Health, and NEW Alliance Counselling Services. The care navigator at NETCHD works to identify individuals eligible for MAT through the Harm Reduction Safe Syringe Services Program (HRSSSP) and the Stevens County Diversion Program. The NETCHD Care Navigator offers tailored navigation of health and social services to effectively address specific challenges to receiving treatment.

In addition, the NETCHD care navigator is newly responsible for facilitating the Opioid Speakers Bureau (OSB). The OSB action plan was created because of the Opioid Response Conference held in March of 2019. The bureau will be comprised of expert individuals who will speak on the opioid crisis and its effects on individuals and communities. It is with high hopes integration of opioid prevention education through the OSB will be initiated in the 2019-2020 school year for youth in the tri-county area. NETCHD Care Navigator responsibilities within the grant are as follows:

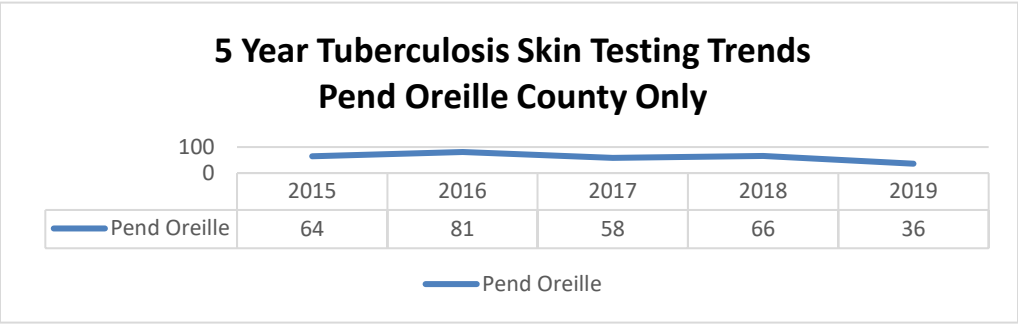
- Identify unique individuals eligible for medication-assisted treatment.
- Refer individuals to hubs for treatment evaluations.
- Connect individuals to other participating spokes within the Tri-County Opioid Treatment Network to create a dynamic support system.
- Navigate individuals into medical, social and mental healthcare systems.
- Coordinate appropriate additional health and social resources to meet individual needs.
- Conduct HRSSSP in Ferry, Pend Oreille, and Stevens Counties on an as-need basis.
- Assist with development of remote HRSSSP locations to provide better harm reduction coverage.
- Outreach to Ferry County to increase awareness of available syringe services program within the county.
- Facilitate and develop OSB to provide opioid prevention education to tri- county youth.

OF SIGNIFICANCE IN 2019: Five referrals were completed for MAT. Four individuals were connected to MAT and additional services through utilization of the HRSSSP. The fifth individual inquired about the Tri-County Opioid Treatment Network via telephone and was linked to treatment. Also, in 2019, there were no referrals completed through the newly established Stevens County Diversion Program. However, outreach was attempted to five individuals identified through the diversion selection process for treatment consideration. Many individuals who are ineligible for diversion but maintain charges related to opioid use are still offered referral and care navigation. Positively, two of the five individuals contacted were already active within the treatment network. The other three individuals were either unable to be reached directly or were unprepared for treatment.

TUBERCULOSIS PURIFIED PROTEIN DERIVATIVE SKIN TESTING

This program provides tuberculosis (TB) purified protein derivative (PPD) screening for clients. Some screenings are routine as part of a new hire, or a mandated program requirement. Other individuals are screened due to TB exposure or symptoms. In 2017, TB screening was offered in Pend Oreille County only due to lack of nursing availability to administer and read the tests in Ferry and Stevens County.

OF SIGNIFICANCE IN 2019: A contact investigation took place during 2019 regarding a person that was exposed during travel to Asia.

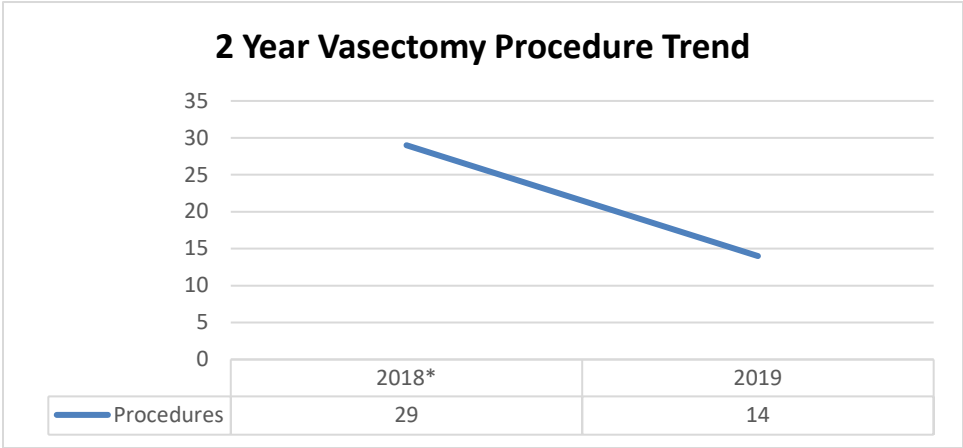


VASECTOMIES

As part of the Providence Rural Residency Training Track, an agreement was signed January 2018 between NETCHD and Providence Northeast Washington Medical Group (PNEWMG). This agreement allows residents, under the instruction of their preceptor, Dr. Patrick Shannon, to perform vasectomies at the NETCHD Colville office. The patient completes the required sterilization counseling at PNEWMG with a procedural appointment scheduled at NETCHD. A nominal fee is charged by NETCHD to the patient for the procedure only, which is billed to their respective insurance. NETCHD’s sliding fee schedule is applied to any balance after insurance or private pay for the procedural cost only.

This program has been very accommodating for a resident physician to satisfy their training requirements. It is also designed to improve the availability of permanent birth control in our area at a low-cost to families. A vasectomy is one of the most effective methods of birth control and are among the most cost-effective. Engaging men in family planning can increase couple communication and facilitate male involvement in reproductive responsibility.

OF SIGNIFICANCE IN 2019: PNEWMG gave precedence to the waitlist of patients wanting the vasectomy procedure in early 2018. At the close of 2018 there was a total of 29 procedures. Once the waitlist was satisfied, 2019 had a total of 14 procedures along with a new group of resident physicians. NETCHD has been very successful in the billing process for payment of the vasectomy procedure.



*2018 had several patients waitlisted

WOMEN, INFANTS, AND CHILDREN NUTRITION PROGRAM

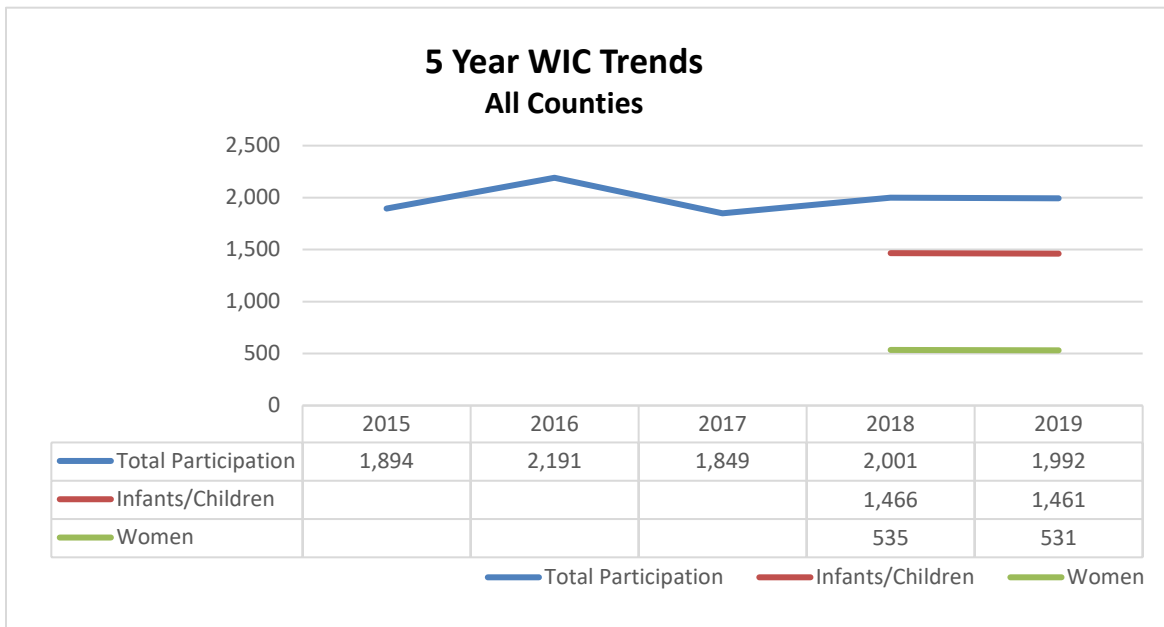
Women, Infants, and Children (WIC) is a nutrition program that helps pregnant, breastfeeding, and postpartum women, new mothers, infants and children under five years of age eat well, learn about nutrition and staying healthy. Participants must meet income and medical/nutritional risk eligibility requirements. Women eligible for WIC are generally at greater social and economic disadvantage and are at a higher risk for obesity, smoking before and during pregnancy, and poor maternal or infant health outcomes such as preterm birth or delivery of low birth weight infants than women who are not eligible for WIC services. In addition to improving maternal and infant health outcomes, the WIC program also contributes significant funds back into the local economy. Community health WIC staff is responsible for completing the following activities:

- Health screening
- Nutrition and health education
- Breastfeeding promotion and support
- Referrals for other services
- Providing funds for nutritious foods

WIC HIGHLIGHTS IN 2019 INCLUDE:

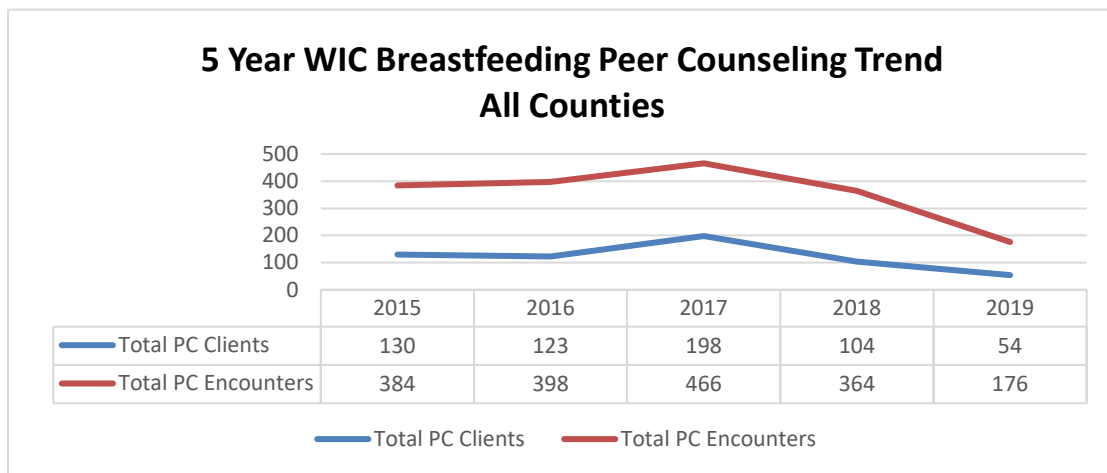
- Total WIC participants in Ferry County: 306
- Total WIC participants in Pend Oreille County: 348
- Total WIC participants in Stevens County: 1,338
- Total food dollars from WIC spent in Ferry County = \$106,102
- Total food dollars from WIC spent in Pend Oreille County = \$106,430
- Total food dollars from WIC spent in Stevens County = \$412,816
- Collaboration with community partners has been an increased focus, particularly in breastfeeding promotion.
- NETCHD provided a breastfeeding room at a local fair, which offers a private area for moms to breastfeed, a changing table is provided, as well as educational material.
- We have continued providing WIC services for clinics in Chewelah and Springdale. These services are being offered twice per month in Chewelah and once per month in Springdale. This continues to be a much-needed service for WIC clients in south Stevens County.
- In looking at state data, there is additional potential for furthering our WIC services in south Stevens County. We are working with the state to possibly provide services in Suncrest and surrounding areas.

OF SIGNIFICANCE IN 2019: All Washington WIC clinics transitioned from Client Information Management Services (CIMS) and WIC checks to Cascades and WIC cards during 2019. NETCHD was with the first roll-out and completed the transition successfully in July 2019. Although the transition presented some challenges for the state, Cascades has been a very positive and successful endeavor for our WIC staff and clients. Our local tri-county grocery stores have seen increased sales due to the ease of our clients using the new WIC cards. The success of this transition was a direct result of the hard work and organization of our WIC Coordinator, Erin Zawadzki. The goal of this transition was to provide the ease of shopping for both our clients and our grocery stores, as well as increasing our caseload.



WIC BREASTFEEDING PEER COUNSELOR PROGRAM

Breastfeeding is the optimal source of nutrition for infants. The breastfeeding peer counselor program provides support for breastfeeding women. Peer counselors are experienced at breastfeeding, trained to solve breastfeeding problems, and make referrals. The peer counselors also provide ongoing encouragement to help mothers meet their breastfeeding goals, which happens via in-person visits, telephone consultations, text messaging and Facebook. This form of support has proven successful in helping women get through the rough patches often encountered during their breastfeeding experience increasing the successful initiation as well as continuation of breastfeeding. The peer counselor in Stevens County is assisting all breastfeeding women who request these services. With the increasing responsibilities of the Stevens County peer counselor who is also the NETCHD WIC Coordinator, a plan is being formulated to hire and train a peer counselor for Pend Oreille County in the year 2020.



YOUTH MARIJUANA PREVENTION AND EDUCATION PROGRAM

NETCHD received funding from the Washington State Department of Health, via Spokane Regional Health District (SRHD), who is the community lead organization, for a six-county regional effort to reduce youth marijuana and e-cigarette use.

The goal of the youth marijuana prevention and education program (YMPEP) is to reduce the initiation use of marijuana by youth 12-20 years of age. This will be achieved by using best and promising practices. NETCHD will engage with SRHD and other partners throughout the region to work collaboratively to assess community needs and assets, develop and implement a strategic plan and evaluate the progress toward established goals.

Responsibilities for this grant include:

- Participate in regional network established for the six-county region. As part of this participation, NETCHD agrees to support persons from outside the Health District to participate in the network, attend quarterly meetings, and attend trainings for the regional network.
- Implement the activities selected from the YMPEP implementation guide within Ferry, Pend Oreille and Stevens Counties.
- Reach out to decision makers to promote prevention work.
- Reach out to elected officials and community leaders of organizations that serve priority populations.

Priority populations include youth who:

- Live with someone who uses marijuana
- Struggle in school
- Live in a rural or frontier area
- Live in extreme or generational poverty

- Promote prevention work and provide recommendations for policy, system, and environmental (PSE) changes to include:
 - Increase perception of harm
 - Increase education on harm, impacts, law, strategies, including information on where marijuana is legal (i.e. not federal land, government housing, etc.)
 - Educate parents and public on legality, health, current issues
 - Educate youth on harms and health
 - Change perception that marijuana is healthy
- Educate marijuana retailers on the law and potential harms of youth marijuana usage.
- Educate parents and youth on the law and potential harms of marijuana use.
- Educate the public on public-use bans and focus messaging on PSE changes and priority populations.
- Promote the recovery helpline and the teen link hotline.
- Promote youth leadership and social skill development by working with SRHD, Northeast Washington Education Service District (NEWESD), tri-county area student assistant specialists, high school counselors, and school staff.
- Implement and support a school-based youth mentor, peer-education program; the Youth to Youth program which replaces the TAPS program used previously.

Part of this prevention work includes participation in four different state drug-free communities coalitions and Community Prevention and Wellness Initiative coalitions within the tri-counties. These coalitions encourage marijuana prevention as part of their work. We are continuing to offer schools the educational materials and any further education that they may need for the youth, staff, or administration.

YOUTH TOBACCO AND VAPING EDUCATION PROGRAM

The purpose of this grant is to reduce tobacco and vapor product use among the population through prevention of initiation among youth and young adults within our three counties. Although the responsibilities with this grant are a little different, the work is often done in conjunction with the youth marijuana prevention and education program (YMPEP) since the work is so closely aligned.

Responsibilities for this grant include:

- Eliminate exposure to secondhand smoke and electronic cigarette/vape emissions by providing resources to anyone or business who may wish to adopt smoke-free or vape free areas in their communities or business.
- Reduce tobacco-related disparities and support tobacco cessation interventions with the Colville, Kalispel and Spokane Native American Tribes by providing culturally appropriate resources as requested.
- Promote and support tobacco cessation through local health care clinics including WIC, Native American clinics, and Job Corps clinic.
- Prevent initiation among youth and young adults by providing education of tobacco sales laws and regulations to all tobacco retailers in the tri-county area.

- Educate on policymaker outreach and education as requested on the health implications of the Tobacco 21 ordinance.
- Educate elected officials, business owners, and the public on health implications of including vaping devices in the Smoking in Public Places law.
- Notify school nurses on e-cigarette product development trends.

OF SIGNIFICANCE IN 2019: NETCHD worked with the Washington Poison Center (WPC) and tri-county area schools in 2019 to offer WPC’s Truth Among the Vapor educational workshops to parents and school staff. A total of 14 tri-county schools hosted a staff vaping workshop with a total of 430 staff attending. A total of eight tri-county area schools hosted a parent vaping workshop with a total of 82 parents/concerned adults attending.