

Columbia County Modernization Plan

April 2026





Columbia County
Public Health
Prevent. Promote. Protect.

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Acronyms

CD	Communicable Disease
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
Columbia County Public Health	Columbia County Public Health
COOP	Continuity of Operations Plan
EHS	Environmental Health Specialist
LPHA	Local Public Health Authority
OHA	Oregon Health Authority
OSF	Opioid Settlement Fund
RHEC	Regional Health Equity Coalition

Executive Summary

The Columbia County Public Health Modernization Plan outlines a strategic approach to align with Oregon’s public health modernization framework. This plan ensures Columbia County Public Health can continue to deliver essential services, strengthen partnerships, and maintain access to critical health resources for its rural population of about 53,000 residents.

Based on the 2024 Statewide Public Health Modernization Capacity and Cost Assessment and the Columbia County Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) that were completed in early 2025, the plan focuses on the modernization capabilities:

- Assessment and Epidemiology: Use CHA and CHIP findings to guide public health interventions

- Communications: Implement a strategic communications plan to improve general outreach and emergency messaging
- Partnerships: Strengthen collaborations with nonprofits, schools, and other agencies
- Emergency Preparedness: Maintain emergency readiness despite staffing constraints
- Health Equity: Embed equity in all programs and pursue regional health equity coalition efforts
- Leadership & Policy: Drive policy initiatives and maintain organizational capacity

Additionally, the plan focuses on the foundational programs of environmental health, prevention and health promotion, communicable disease control, and partnerships for clinical services. Consistent barriers include limited funding, workforce shortages, and a lack of clinical capacity. The completion progress of this plan will be tracked via Monday.com, a work management system, with annual reviews to adjust strategies based on performance and community feedback. The Columbia County Public Health Modernization Plan provides a roadmap for strengthening public health infrastructure, fostering partnerships, and advancing health equity. While resource limitations pose challenges, Columbia County Public Health remains committed to innovation and collaboration to meet the evolving needs of the community.

Baseline Data & Assessment

2024 Oregon Public Health Modernization Capacity and Cost Assessment

As a part of a coordinated statewide effort involving all of Oregon's Local Public Health Authorities, Columbia County Public Health completed the Public Health Modernization Assessment tool in June 2024. The Public Health Modernization Capacity and Cost Assessment (CCA) provides Columbia County Public Health with vital information on the status of implementing all foundational capabilities and programs, as well as the funds needed for full implementation (See attached). In some cases (assessment and epidemiology, access to clinical preventive services), estimates for current and needed staffing resources have been updated to reflect significant changes since the period reflected in the assessment.

Columbia County was not the Local Public Health Authority in 2016, at the time of Oregon's first Public Health Modernization Capabilities and Cost Assessment, so we

cannot provide a specific comparison or progress report using data from the 2016 CCA as a baseline. However, since 2018 (when Columbia County became the LPHA, assuming responsibility for monitoring service delivery and compliance with federal and state regulations), Columbia County Public Health has been established and staffed with a public health director and public health professionals, all working to advance foundational capabilities and programs.

In addition to completing the CCA, Columbia County Public Health recently

- Conducted a Community Health Assessment (2025),
- Conducted robust community engagement processes to inform the Community Health Improvement Plan (2025), and
- Developed Environmental Hazards and Health Assessment Report (2025).

Our baseline data and assessment include these resources, rounding out the CCA with critical community insights and additional data.

Plan Introduction

The purpose of the Columbia County Public Health Modernization Plan is to support Oregon’s public health modernization framework as it is outlined in Oregon Revised Statutes (ORS) 431.131, 431.141, and 431.413. Specifically, this plan meets requirements outlined in ORS 431.131 (1) (c) for LPHAs to adopt, implement, monitor, evaluate, and modify as necessary a local public health modernization plan.

Importantly, this plan is designed to ensure that Columbia County continues to serve the community by providing essential public health services, strengthening local partnerships, and maintaining access to critical assistance.

Through this plan, Columbia County Public Health aims to improve public health infrastructure and continue to respond to emerging public health threats in a timely manner. This plan reaffirms Columbia County Public Health’s commitment to health equity and drive to modernize existing infrastructure going into the future.

Planning Process

Columbia County Public Health staff developed this public health modernization plan after careful review of the results from the 2024 Public Health Modernization Capacity and Cost Assessment, and the CHA and CHIP.

Data describing staffing capacity and overall costs for each foundational capability and program are taken from Columbia County Public Health’s 2024 Public Health Modernization Capacity and Cost Assessment for nine of the 11 foundational elements; two foundational elements (assessment and epidemiology and communicable disease prevention) have been updated with 2025 data due to a combination of poor data quality data in the 2024 CCA and significant changes since 2024 in those areas.

Formal Involvement by Columbia County Public Health’s Governing Body

The plan was shared with the Columbia County Board of Commissioners in March 2026. A draft of this plan was included in the Board of Commissioners' pre-meeting information packet, and during a formal work session on March 6, 2026, the Public Health Director, Jaime Aanensen, presented it.

Columbia County: Overview

Columbia County Public Health is the Local Public Health Authority for Columbia County, Oregon. The Columbia County Public Health office is located in the county seat of St Helens. Columbia County's northeast border is 62 miles along the Columbia River, bordering Multnomah, Washington, and Clatsop Counties. Carved out of Washington County in 1854, its past was tied to commercial fishing, water, transportation, and lumber. Industrialization has accelerated recently, but timber, dairy, and horticulture remain important. Columbia County Public Health is a part of the Columbia County government, which is overseen by the Board of County Commissioners.

Recent Census data estimates a population of 53,178 people spread across 658 square miles (Census, 2023). Columbia County is a designated rural county with unique populations requiring special attention and care.

In Columbia County, residents identify as:

- Race:
 - 85.6% white
 - 2.4% Black or African American
 - 1.9% American Indian or Alaskan Native
 - 5.2% Asian
 - 0.5% Native Hawaiian or Pacific Islander

- 4.4% as two or more races
- Ethnicity:
 - 14.9% Hispanic or Latino
- Age:
 - 4.8% 0-5 years old
 - 19.6% 6-17 years old
 - 56.0% 18-64 years old
 - 19.6% 65 and above years old

Compared to the state of Oregon as a whole, Columbia County residents have higher rates of chronic disease like heart disease and Type II diabetes, a higher incidence of cancer rates and deaths, higher smoking rates, and higher rates of heavy drinking behavior (Oregon BRFSS).

County-Specific Concerns & Priorities

The 2025 Columbia County Health Assessment (CHA) and 2025 Community Health Improvement Plan (CHIP) sought to gauge the health-related concerns and priorities of those who live, work, and play in Columbia County. With the input of over 300 community members, the CHA results identified that the most significant health and safety concerns for residents were:

- Substance misuse, alcohol misuse, and mental health
- A shortage of primary care, specialty care providers, and mental health providers available in the county
- Siloing of services; could be difficult to get connected with existing services
- Housing shortages
- Lack of employment opportunities and higher wage jobs

For the CHIP, a steering committee comprised of community leaders and partners identified priorities based on the feedback from the community, as well as trends and needs they were seeing within their own organizations. The steering committee chose three priorities: 1) meeting community basic needs, 2) access to healthcare, and 3) substance use disorders, and created a series of goals, objectives, and action items that aligned with the priorities.

Key Partners

As a small department lacking clinical care ability, Columbia County Public Health depends on established partners, as well as building new partnerships to ensure that community needs are being met.

- Community-Based, Non-Profit Organizations
 - Columbia Health Services
 - Columbia Community Mental Health
Community Action Team
 - Youth Era
 - Amani Child Abuse Assessment Center for Columbia County
- Governmental Agencies
 - Columbia County Sheriff's Office
 - Veteran's Affairs
 - Clatsop County Department of Public Health
- Schools and Education
 - Head Start/Early Head Start
 - Scappoose, St Helens, Rainier, Vernonia, and Clatskanie School Districts
 - NW Regional Education Service District
- Local Businesses and Organizations
 - Broadleaf Arbor/EngAGE NW

Implementing Foundational Capabilities and Programs

Capability 1: Assessment & Epidemiology

Staffing Capacity	.1 FTE
Staff Needed for Full Implementation	1.0 FTE
Current Expenditure	\$8,000
Funding Needed for Full Implementation	\$120,000

(Note: Staffing and expenditure estimates were not taken from the 2024 CCA but instead reflect health department data as of December 2025.)

Columbia County Public Health demonstrates strengths in Assessment and Epidemiology Roles: 01.02.00—*Data access, analysis, and use*, and 01.04.0—*Conduct and use basic community health assessments*. Columbia County Public Health published our CHA and CHIP in the spring of 2025. The CHA noted several social determinants of health affecting the health status of residents, such as lack of public transportation, high housing costs, and lack of available jobs paying a living wage. Populations with additional barriers were identified as older adults, people of color, and youth. These populations require unique considerations when developing intervention programs. The CHA also revealed leading causes of death in Columbia County, including cancer and heart disease, which are higher than the state of Oregon average.

All staff refer to the findings in the CHA and CHIP when developing interventions, communications, and educational materials to ensure that traditionally underserved populations are prioritized. Assessment and epidemiology are core concepts that Columbia County Public Health staff use to inform their work every day. In the future, Columbia County Public Health will continue to develop ways to utilize, share, and update partners on data findings, such as through our website, and to access and use current data trends to inform work.

Columbia County Public Health fulfills Assessment and Epidemiology Role 01.05.01—*Infectious disease-related assessment by tracking communicable diseases and using social media, provider notifications, and flyers to inform the public about current outbreaks and rising disease cases*.

OHA Program Element 51-01, LPHA Leadership, Governance, and Program Implementation, is available to support assessment and epidemiology work; however, these funding streams are extremely competitive with other departmental operations and ultimately do not provide sufficient funding for Columbia County Public Health to obtain dedicated assessment and epidemiology staff. While some staff members can conduct basic assessment activities related to their programs, and ad hoc reports and assessments can be conducted with one-time funding to contractors, the lack of dedicated data analysis expertise and staff is a major barrier to completing this work to the desired extent. Furthermore, our CCA results indicate that Columbia County Public Health needs to increase staffing levels for Assessment and Epidemiology.

Capability 2: Communications

Staffing Capacity	.11 FTE
Staff Needed for Full Implementation	.60 FTE
Current Expenditure	\$31,000
Funding Needed for Full Implementation	\$115,000
Funding Sources	OHA

Aligned with PHM Activity 07.01.01—*Develop and implement a strategic communication plan that articulates and supports the local public health authority’s mission, values, roles and responsibilities*, Columbia County Public Health solicited the help of LS Strategies, LLC, to create a strategic Public Health Communications Plan, a department communication vision document, and a plain language document. The communications plan highlights what Columbia County Public Health is already doing well, such as maintaining a consistent social media presence, communicating with partners, and responding quickly to emerging threats and hazards, and addresses what can be improved, such as Columbia County Public Health obtaining its own website, expanding into other social media platforms, and/or developing a newsletter. The communications plan lays out two-year, step-by-step goals and objectives and a pathway for Columbia County Public Health to increase communications to the public, build relationships, and re-establish trust lost during the pandemic. The plan is rooted in cultural competency and equity, acknowledging that different groups of people communicate in different ways, and gives suggestions to Columbia County Public Health on how to best engage with all types of audiences identified in Columbia County. The Public Health Communications Plan was published in the summer of 2025 and will be reviewed and evaluated after it has been used for two years.

The communications plan aids in emergency communication as well, providing ways to communicate with a diverse audience in various ways. Additionally, Columbia County Public Health has developed and published the All-Hazards Plan, a guiding document that includes internal and external emergency communication tactics, decision trees that identify who is responsible for various emergency communications. Columbia

County has several ways to communicate with residents during an emergency, such as 24/7 social media capability and the Columbia Alert Network.

All staff are expected to adhere to the All-Hazards Plan and Public Health Communications Plan when participating in any internal or external communications. Columbia County has one full-time Public Information Officer for the county, and Columbia County Public Health has two positions, the Health Promotion Specialist – Modernization and the Emergency Preparedness Coordinator, that dedicate part-time work for communications.

In the future, Columbia County Public Health would like to expand into other forms of social media as suggested by the communications plan, and develop a separate Columbia County Public Health-specific website, as Columbia County Public Health has limited control over the current website housed within the county. There are several barriers to both, such as an outdated social media policy at the county level, approval from the Board of Commissioners, funding to dedicate to the projects, and staff time to implement.

2025 funding amounts for communications work is 0.5 full-time equivalent from Program Element 51-03 (2024-2025) and Program Element 51-05 (2025-2026) by the Public Health Promotion Specialist – Modernization role.

Capability 3: Community Partnership Development

Staffing Capacity	.22 FTE
Staff Needed for Full Implementation	.80
Current Expenditure	\$50,000
Funding Needed for Full Implementation	\$145,000
Funding Sources	OHA

As a small local public health authority (LPHA), Columbia County Public Health relies heavily on fostering relationships with new and existing community partners. For Columbia County Public Health, this looks like:

- Working with other organizations to create, plan, and implement public health interventions; exploring non-traditional partner options.
- Updating partners on projects and services
- Bolstering the efforts of partner organizations
- Being present at a wide range of health-related events throughout the county

Columbia County Public Health records all partner relationships on the work management system, Monday.com, under the 'Community Partner Tracker' board, complete with point-of-contact, agency mission, services provided, and physical location of the partner. As new partnerships are developed or existing partnership activities change, all staff can add and edit the tracker for the most up-to-date information.

Columbia County Public Health works extensively with community partners, such as working to establish a lactation support mobile service with Columbia Health Services, participating in several community baby showers, holding Narcan and overdose awareness trainings, tabling at WIC clinics, educating partners and community members during the in-person Living with Wildfire training series, and more. Columbia County Public Health also distributes resources to partners, such as condoms, smoking cessation materials, free Narcan and COVID-19 tests, hot weather/cold weather kits, and other educational materials, and works with partners to learn what resources are most meaningful to them. All staff are expected to work with community partners in the course of their work, as partner organizations have valuable insight into the unique populations being served in Columbia County.

Aligned with Oregon Public Health Accountability Metric #3—*Increase community resilience for climate impacts on health: extreme heat and wildfire smoke*, Columbia County Public Health is partnering with social service providers, Columbia County Emergency Management, and city and county facilities to build community resilience for extreme health and wildfire events.

Barriers and challenges to establishing and maintaining partnerships come from significant funding and staffing cuts at the federal level, affecting many of Columbia County Public Health's partnerships. With reductions in services, layoffs, and job changes, it can be difficult to get ahold of partners, plan future interventions, or continue current work under such significant stress. With this level of uncertainty, many partners are focused on simply staying afloat themselves.

Funding for community partnership work is embedded across all roles in public health and tied to the program element associated with the work. For example, Program Element 13 supports tobacco prevention outreach, while Program Element 46 supports reproductive health outreach.

Capability 4: Emergency Preparedness & Response

Staffing Capacity	.50 FTE
Staff Needed for Full Implementation	1.05
Current Expenditure	\$75,000
Funding Needed for Full Implementation	\$155,000
Funding Sources	OHA

According to OHA standards, Columbia County Public Health has prioritized emergency preparedness and response through the Living with Wildfire exercise, Health Alert Network (HAN) Drills, the Columbia County Shelter Training Incident and Exercise event, M-BRACE training, OHA-approved Ambulance Service Area Plans, and Continuity of Operations Plan (COOP). Columbia County Public Health’s Emergency Preparedness Coordinator, 0.5 full-time equivalent, is responsible for implementing emergency response efforts, securing and maintaining effective community partnerships, and creating and delivering emergency alerts to partners and the community alike via email, flyers, and Columbia County Public Health’s social media pages. Currently in progress is the Columbia County Public Health Mass Casualty Incident Plan. Columbia County Public Health does not have access to disaster epidemiology reports at the local level.

Barriers and challenges for full implementation of this capacity center around the availability of funds for this position. At this moment, Columbia County Public Health is only able to dedicate 0.5 full-time equivalent for the Emergency Preparedness Coordinator position, forcing Columbia County Public Health to share the responsibility of the coordinator with another department 20 hours a week. As a result, this position has limited bandwidth for public health emergency preparedness work beyond basic program element deliverables— particularly on internal preparedness activities for

incidents like outbreak investigations. Columbia County Public Health continuously explores ways in which the agency could support bringing this important position up to a full-time position to work on these and other department and community needs.

Capability 5: Healthy Equity & Cultural Responsiveness

Staffing Capacity	.12 FTE
Staff Needed for Full Implementation	.30 FTE
Current Expenditure	\$54,000
Funding Needed for Full Implementation	\$66,000
Funding Sources	OHA

Columbia County Public Health contracted with the Rede Group to publish the CHA and CHIP and the Health Equity Plan and Organizational Capacity for Health Equity Assessment. The Health Equity Plan established priorities, such as organizational capacity, maintaining and expanding partnerships, and effective communication strategies, as well as offered assessment into prioritizing health equity in Columbia County Public Health’s work and suggestions for improvement. Columbia County Public Health is in the process of implementing the suggestions and has focused attention on prioritizing staff training on health equity, updating job descriptions and hiring practices with a focus on health equity, and allocate funds to serve historically underserved groups. All staff are required to complete monthly trainings on various health topics, all rooted in health equity and cultural competency, and maintain health equity practices through data collection, communication, and addressing the unique needs of traditionally underserved populations. This is an ongoing effort to ensure that Columbia County Public Health is a trusted health leader in the community for all, considering unique determinants of health faced by populations in the planning of all programs and interventions.

Columbia County Public Health continues to work toward joining or developing a Regional Health Equity Coalition (RHEC) in partnership with Tillamook and Clatsop

counties. Unfortunately, Columbia County Public Health has been part of applications to the state for funding to support this program twice in the last several years (most recently in the fall of 2025) but has not been successful. Columbia County Public Health will continue to work with regional partners in an informal capacity to address and meet health equity plan goals but ultimately may struggle to make meaningful progress without dedicated funding and support.

Health equity is embedded as a foundational principle in Columbia County Public Health’s work.

Capability 6: Leadership & Organizational Competencies

Staffing Capacity	.20 FTE
Staff Needed for Full Implementation	.35 FTE
Current Expenditure	\$65,000
Funding Needed for Full Implementation	\$99,000
Funding Sources	OHA + County General Fund

Columbia County Public Health leadership capacity is largely made up of a full-time Department Director, a full-time Assistant Director, and a part-time Health Officer. Turnover in the Assistant Director role in 2025 led to some disruption and delay in progress on various activities. These positions are funded through a combination of the program elements they oversee, as well as some environmental health funding provided by the county.

Columbia County Public Health works closely with county policymakers to maintain operating budgets and to drive policy initiatives of public health interest. Recent collaborations include the development and approval of an Opioid Settlement Fund (OSF) plan, which will distribute funds to public health for various activities in early 2026. Additionally, Columbia County Public Health is currently working with county commissioners and legal counsel on an internal county lactation policy, and on a flavor resolution for tobacco/nicotine products.

Columbia County Public Health departmental leadership also participates in various public health collaboratives and groups that provide regular updates on policy changes that may impact public health operations, including the Oregon Coalition of Local Health Officials, which provides a regular venue for local health department leaders across Oregon to meet and discuss best practices and strategies for overcoming challenges in local public health operations.

Departmental leadership monitors staff activities and performance using the Monday.com platform, which streamlines collaboration in assigning tasks, setting deadlines, and tracking deliverables. Additionally, annual performance reviews are conducted to evaluate staff performance and activities, and growth plans may be used with individual staff members to provide more structure for addressing areas for improvement.

In previous years, Columbia County Public Health has sponsored a Certificate of Public Health course for two staff, a Certificate of Epidemiology coursework for another, and has covered attendance at statewide (CLHO, Oregon Public Health Association, and Rural Health Conferences) and national (NACCHO) meetings. While funding is now extremely limited for these types of professional development opportunities, the department has worked to implement internal training opportunities using county training resources and through the development of monthly public health-specific continuing education trainings, developed and maintained by the Columbia County Public Health Modernization Coordinator.

Columbia County Public Health also maintains up-to-date technology and tech training resources for its staff. The department leverages pre-existing resources (such as those produced and maintained by the state) whenever possible and, as new staff are onboarded to particular data or technology systems, department staff use these resources to provide training and guidance. Within the last year, Columbia County Public Health purchased new laptops for staff members and has deployed several new tech systems to support work, including upgraded Canva accounts and the Monday.com platform. Columbia County Public Health also employs the use of PAUBOX, a secure encryption service, to maintain streamlined HIPAA security in email.

Capability 7: Policy & Planning

Staffing Capacity

.27 FTE

Staff Needed for Full Implementation	1.45 FTE
Current Expenditure	\$57,000
Funding Needed for Full Implementation	\$253,000
Funding Sources	OHA

In accordance with OHA guidelines, Columbia County Public Health, in partnership with contractor Rede Group, has published a five-year strategic plan, as well as a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP). While Columbia County Public Health awaits the approval of an updated website (as mentioned under Capability 2: Communications), short explainers for the CHA and CHIP have been posted in digestible snippets on the Columbia County Public Health social media page, alerting the public to the top concerns of the county and what Columbia County Public Health is actively doing to address the concerns. As projects and interventions included in the CHA and CHIP are implemented, Columbia County Public Health will continue to update the community on progress and completion.

Currently, one significant barrier to fully publishing the plans is Columbia County Public Health’s limited ability to add content to the current website, which lacks mobile-friendly viewing and can be confusing to navigate. Once a new website is approved, Columbia County Public Health will be better equipped to publish the full plans to the public.

Columbia County Public Health works closely with county policymakers to maintain operating budgets and to drive policy initiatives of public health interest. Recent collaborations include the development and approval of an Opioid Settlement Fund (OSF) plan, which includes the distribution of funds to public health for various activities in early 2026. Additionally, Columbia County Public Health is currently working with county commissioners and legal counsel on an internal county lactation policy, and on a flavor resolution for tobacco/nicotine products.

Much of Columbia County Public Health's policy and planning activities are conducted by the public health director and assistant director, in collaboration with relevant staff members, depending on the type of initiative. Funding for policy and planning activities is provided via the relevant program element related to the activity.

Foundational Program 1: Environmental Health

Staffing Capacity	2.10 FTE
Staff Needed for Full Implementation	3.25 FTE
Current Expenditure	\$300,000
Funding Needed for Full Implementation	\$514,000
Funding Sources	Fees + County General Funds

(Note: The narrative below describes the current (April 2026) staffing status which differs from the staffing described in the 2024 CCA)

Following OHA guidelines and requirements for environmental public health, Columbia County Public Health is in the process of implementing findings and recommendations from the Columbia County Public Health Environmental Hazards Plan (published in early 2025) and addressing OHA deliverables.

The plan speaks specifically to statewide public health accountability metrics, priority #3—*Increase community resilience for climate impacts on health: Extreme heat and wildfire smoke*. We plan to:

1. Collaborate with health care providers to develop and promote a wildfire smoke exposure checklist for community members to keep themselves safe and healthy during a wildfire/smoke event. Disseminate this information through providers, libraries, schools, and local organizations.
2. Educate homeowners, landlords and renters about options to create safe indoor air (e.g., MERV 13 air filters, portable air cleaners), especially during wildfire smoke events. Disseminate this information through leasing offices, neighborhood organizations, and bulletin boards at businesses where community members may be purchasing supplies.
3. Enhance emergency communication capabilities and evacuation strategies, routes, and safety zones. Collaborate with Emergency Management, the Columbia County Public Health Emergency Preparedness Coordinator, and local organizations to identify and utilize trusted messengers and communication channels preferred by various populations in Columbia County. Some actions for this strategy are operationalized in a separate communications plan.

4. Make portable air cleaners more accessible to improve indoor air quality in homes during wildfire smoke events. Potential supports for acquiring and distributing air cleaners could include OHA's Air Conditioner and Air Filter Program, the Department of Human Services office in St. Helens, the Community Action Team, and the Wildflower Play Collective.
5. Coordinate with social service providers to ensure that emergency shelters are available during extreme heat events, poor air quality days, severe weather and other highly hazardous conditions. Ensure that the local population of people experiencing homelessness is made aware of these resources. This may be operationalized in a separate communications plan.

Aligned with Public Health Accountability Metrics, we have used data to select "extreme health" as a priority within this foundational program and have further focused our work on disparities among racial or ethnic groups (in particular Black or African American, Hispanic or Latino/a/x/e) rural or frontier communities people with lower incomes, people with disabilities, people with chronic conditions and/or physical disability, and people who are unsheltered, housing insecure or living in conditions that make them more vulnerable to environmental hazards. To further this work, we have engaged communities disproportionately affected by extreme heat so they can actively participate in policy planning. (This engagement was incorporated into our community health assessment engagement and community health improvement planning).

Columbia County Public Health partners with culturally specific organizations to develop tailored communication, outreach, and/or education about extreme heat, and Columbia County Public Health posts heat-wave advisory warnings on our County's social media page along with local resources and locations of cooling shelters in the county for anyone who seeks shelter to cool off during heat waves

To fulfill our role to develop, adopt, implement, and enforce environmental health regulations, and implement state-mandated programs where appropriate for small drinking water systems, septic oversight, Columbia County Public Health has an open recruitment (as of April 2026) for an Environmental Health Specialist 1 or 2. We have 0.5 temporary FTE in the position to maintain operations while we recruit for a permanent staff. The Environmental Health Specialists are responsible for licensing food service facilities, completing restaurant, hotel, pool/spa inspections, enforcing health and safety standards, responding to environmental health complaints, and educating the public about mitigating environmental safety concerns.

To fully implement Columbia County Public Health’s environmental health program, Columbia County Public Health is actively looking for funding sources to secure an additional Environmental Health Specialist (EHS) position. The additional position would give environmental health staff greater ability to tackle aspects of Columbia County Public Health’s Environmental Hazards Plan, such as building community resiliency in the wake of environmental hazards, developing data-sharing resources identifying environmental hazards, and building relationships with both community-based and governmental environmental health partners. Current barriers to full implementation revolve around staffing and funding, as one full-time position and one part-time position are unable to achieve additional goals outside of conducting inspections and regulatory activities. Other staff at Columbia County Public Health will also continue to support this foundational program, adding staff capacity through leadership, partnerships, health equity, and communications.

In addition to funding constraints, the widespread workforce shortage of Registered Environmental Health Specialists (REHS) has further complicated staffing challenges. Columbia County Public Health opened and promoted recruitment for an EHS 1 position for several months in 2025, without identifying a qualified candidate. This has informed our approach of training our EHS Trainee to succeed on the REHS exam, promote them to an EHS 1, and recruit a new EHS Trainee to meet our staffing needs.

Foundational Program 2: Prevention & Health Promotion

Staffing Capacity	1.59 FTE
Staff Needed for Full Implementation	2.00 FTE
Current Expenditure	\$178,000
Funding Needed for Full Implementation	\$215,000
Funding Sources	OHA + Local Opioid Settlement Funds

Columbia County Public Health has strong roots in prevention and health promotion. Columbia County Public Health has run social media campaigns highlighting nutrition, tobacco control, infants and maternal health, the need for increased physical activity, and injury prevention.

In spring 2025, Columbia County Public Health worked with LS Strategies, LLC to create a Public Health Communications Plan and has been working on implementation since that time, tracking progress on goals through Monday.com. Additionally, Monday.com houses a board specifically for community partner tracking, noting areas of service, points of contact, and physical location that all staff can add to when establishing relationships with new partners.

Health Promotion Specialists have attended numerous events, tabling with materials for Safe Homes (firearm safety and medication disposal), child injury prevention, child poisoning prevention, breastfeeding support, environmental hazards preparedness, Narcan education and distribution, smoking cessation help, and more. Health Promotion Specialists at Columbia County Public Health co-chair the Columbia Health Coalition, a group that (among other initiatives) is seeking to pass a flavored tobacco resolution through the Columbia County Board of Commissioners to support future flavored tobacco ban efforts.

Columbia County Public Health currently has 1.5 full-time Health Promotion Specialists, one for Modernization (0.5 FTE) and one covering drug, alcohol, and tobacco prevention (1.0 FTE). Columbia County Public Health staff will continue to add to these programs based on the needs of the CHA and CHIP, new data availability, and community feedback. In particular, Columbia County Public Health has planned expansions to prevention and health promotion activities related to substance use, with the planned distribution of county opioid settlement dollars from the county to Columbia County Public Health in early 2026.

One challenge to full implementation is the time it takes to build trust with community members in Columbia County. Often, initiatives get little traction at the beginning, and it is necessary to continue showing up and being present in the community before people will engage. It takes time and patience to build relationships with the public, and it is important not to give up because of low initial engagement.

Foundational Program 3: Access to Clinical Preventive Services

Staffing Capacity	.01 FTE
Staff Needed for Full Implementation	.10 FTE
Current Expenditure	\$7,100
Funding Needed for Full Implementation	\$34,000
Funding Sources	OHA

(Note: These estimates are taken from the 2024 CCA and do not include current plans to use Rural Health Transformation funds to strengthen this foundational area. We are in the process of finalizing partnership and resource needs for RHT-funded work.)

Columbia County Public Health does not currently have the capacity to provide preventive clinical services. While Columbia County Public Health has much of the infrastructure to provide many of these services (including a dedicated clinical space, a deployable mobile health unit, and a lab with vaccine and medication storage equipment), current funding is insufficient to support the hiring of clinical staff.

To meet the community’s need for clinical preventive services, Columbia County Public Health partners with Columbia Health Services and other healthcare clinics in the county, including OHSU Scappoose, where our health officer practices. Columbia Health Services operates one school-based mental health clinic (Vernonia) and four SBHCs that also serve as clinics open to the public. In addition, they provide WIC programs for Columbia County families. Columbia County Public Health works closely with Columbia Health Services to support their efforts to achieve communicable disease accountability metrics.

Columbia County Public Health works diligently to maintain partnerships with local providers to ensure continued community access to preventive services and to plan for improved access to clinical preventive services, particularly for vulnerable populations.

In the near future, Columbia County Public Health will use Rural Health Transformation funds to deploy its mobile health unit in partnership with Columbia Health Services and other community partners to provide immunization services for children and adults, STI testing, school physicals, and lactation consultation.

Foundational Program 4: Communicable Disease Control

Staffing Capacity	.5 FTE
Staff Needed for Full Implementation	1.5 FTE
Current Expenditure	\$50,000
Funding Needed for Full Implementation	\$155,000
Funding Sources	OHA

(Note: Staffing and expenditure estimates were not taken from the 2024 CCA but instead reflect health department data as of December 2025.)

Communicable disease surveillance has been a staple of Columbia County Public Health since 2019. Following the OHA guidelines for surveillance, response, and education, Columbia County Public Health is committed to monitoring, presenting, and responding to communicable disease (CD) outbreaks. Columbia County Public Health currently has .5 FTE, a Communicable Disease Investigation Specialist, who is responsible for tracking, investigating, and educating providers and patients on reportable and communicable diseases, as well as support from the department’s assistant director, who provides epidemiological guidance and supports immunization work. In response to emerging threats, Columbia County Public Health can provide timely communication and education to both the public and healthcare providers. Columbia County Public Health has collected, analyzed, and disseminated data from various primary data sources (including ORPHEUS, ALERT IIS, ESSENCE, and Health Space) to partners, providers, and the public through a variety of methods, such as social media, tabling at events, and handouts.

Focus on Public Health Accountability Metric Priority #1—*Reduce the spread of syphilis and prevent congenital syphilis* and #2—*Protect people from preventable diseases by increasing vaccination rates* is supported through our partnerships with Columbia Health Services and other local health clinics.

Columbia County Public Health tracks syphilis cases, works in conjunction with partners to increase the speed of treatment, and conducts case investigation and notifications.

We will continue these programs in the future, along with promoting screening to reduce the spread of syphilis and eliminate congenital syphilis.

Columbia County Public Health works toward achieving the Public Health Accountability metrics for protecting people from preventable diseases by increasing vaccination rates, focusing on influenza vaccination for people over the age of 65, and emphasizing Black/African American, Hispanic/Latino/a/x/e populations. To advance this work, Columbia County Public Health has provided education and technical assistance to long-term care facility staff and other health care providers to support their vaccination efforts. In addition, Columbia County Public Health uses its social media platforms to encourage and promote vaccinations, including influenza vaccination for people aged 65 or older. This work will continue in the future with tailored messaging for vulnerable groups.

Columbia County Public Health's ability to fully implement comprehensive communicable disease prevention and control activities is severely constrained by insufficient dedicated funding streams. While COVID-19 resources have supported core CD staffing and activities since the pandemic, the reduction and pending elimination of these funds leave a gap in how the Columbia County Public Health CD program will be supported.

Despite these barriers, Columbia County Public Health remains committed to offering infectious disease education to the community, local schools, and providers, as well as offering referrals and connections to services not offered at Columbia County Public Health. The strong partnership with Columbia Health Services allows Columbia County Public Health to bridge the gap and ensure that all residents of Columbia County have access to the services they need. Future goals include launching an online Columbia County health data portal, further developing and maintaining partnerships, implementing immunization and syphilis-prevention programs in the local jail, and using Rural Health Transformation funding to increase vaccination rates.

Modernization Plan Monitoring & Evaluation

Columbia County Public Health will monitor the progress on the modernization plan according to OHA standards by utilizing Monday.com, a performance management system, to track goals, tasks, and timelines. Each metric and accompanying foundational program, capacity, and public health accountability metric will be assigned to the individual(s) whose role most closely aligns with the required work. Staff are

required to check and update Monday.com boards a minimum of once per week, monitored by supervisory staff.

The Columbia County Modernization Plan will be reviewed every November-December before each new year, and adjusted as needed based on budget, staff capacity, plan effectiveness, and other feedback from the community and partners.

Plan Updates

Plan Version	Plan Publication Date
#1	December 31, 2025
#2	April 28, 2026

Statewide Accountability Metrics

Metrics	Incorporation in this plan
Communicable Disease Control: Congenital syphilis rates, primary and secondary syphilis rates, syphilis rates among people who can become pregnant, two-year-old vaccination rates, and adult influenza vaccination rates	See pages 24–26
Environmental Health Emergency department and urgent care visits due to extreme heat, hospitalizations due to extreme heat, deaths due to extreme heat, emergency department and urgent care visits due to respiratory illnesses from wildfire smoke	See pages 13 and 19–21

Attachments

Columbia County 2024 Cost and Capacity Assessment

References

Census profile: Columbia County, OR. Census Reporter. (2023).

<https://censusreporter.org/profiles/05000US41009-columbia-county-or/>

Oregon Health Authority. "Adult Prevalence Data, 2018-2021." Oregon Behavioral Risk Factors

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<https://app.powerbigov.us/view?r=eyJrIjoieTYlYnN2Y4NzAtYTA1My00ZjJkLWJIYTUtODQ5Y2Y5ZWQwODIjIiwidCI6IjY1OGU2M2U4LThkMzktNDk5Yy04ZjQ4LTEzYWRjOTQ1MmY0YyJ9>