CONFERENCE OF LOCAL HEALTH OFFICIALS

Conference of Local Health Officials

October 19, 2017

**Meeting Minutes**

In attendance: Nancy Staten (Baker); Charlie Fautin (Benton); Dawn Emerick (Clackamas); Sherrie Ford (Columbia); Muriel DeLaVergne-Brown (Crook); Ben Cannon (Curry); Tom Kuhn (Deschutes); Bob Dannenhoffer (Douglas); Ellen Larsen (Hood River); Jackson Baures (Jackson); Courtney Vanbragt (Klamath); Beth Hadley (Lake); Rebecca Austen (Lincoln); Sheree Smith (Morrow); Jessica Guernsey(Multnomah); Katrina Rothenberger (Polk); Jim Setzer (Umatilla); Carrie Brogoitti (Union); Tricia Mortell (Washington); Eric Mone (CLEHS); Pat Luedtke (HO)

Public Health Division: Anona Gund, Sara Beaudrault, Cara Biddlecom, Danna Drum, Lillian Shirley, Tim Noe, Andrew Epstein

CLHO: Morgan Cowling, Caitlin Hill

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| **Item** | **How** | **Notes** |
| Convene & Introduce | Update  |   |
| Agenda  | Review |  |
| September Minutes | Approve | Dr. Dannenhoffer motion and Tricia Mortell. 2nd. No debate. All in favor.Minutes approved |
| Special: CLHO Elections |  | CLHO Board voted on new leadership for the Coalition of Local Health Officials, and the Conference of Local Health Officials* Tricia Mortell for Chair
* Carrie Brogoitti for Vice Chair
* Dawn Emerick for Secretary
* Rebecca Austen for small County representative
* Lindsey Manfrin for medium County representative
* Jocelyn Warren for large County representative
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| CLHO Committee Reports- Healthy Families- Healthy Communities-Communicable Disease- Healthy Structure- Preparedness | Report | Preparedness Updates* Purpose of group is to facilitate preparedness within the state. Surveyed all PHEP folks to ask them about CLHO PHEP. Every CLHO PHEP member has 3-4 counties that they are responsible for sharing information with.
* Taking look at CLHO PHEP budget formula. Considering square mileage in formula, not just population.
* Looking at equity issues around regionalization. North Central will attend next meeting to discuss equity issues around budgeting.
* Question if the group discusses lessons learned from recent preparedness issues. Not as a standing agenda item but will consider it moving forward.
* Have not been discussing modernization explicitly.

Healthy Families* One big piece focused on was the healthy birth program and building home visits. Had a revision of PE 41 that was pretty minor. Working on a heavier revision of PE 41. Feedback provided around key performance measures related to PE 44.
* Have been having conversations about modernization and the restructuring of committees. Discussing how to transition things like maternal child health into the group.
* Title V conversations about assuring we are thinking beyond only home visiting for MCH which aligns with modernization.
* Update on 3391. There was a concern about the language that required local public health authorities to either provide reproductive health services or work with state to find a provider. Balancing assuring reproductive services while working with LHDs about the anxiety of not being able to fill the requirement.

Healthy Communities* Program areas included chronic disease, tobacco, and non-regulatory environmental health (brownfields).
* Working on public health system wide alignment on drug and alcohol program and prescription overdose.
* Made recommendations on tobacco funding formulas.
* Partnership with Clean Air Oregon looks at who is disproportionately impacted by air pollution.
* With integration of alcohol and tobacco prevention program, communication and decision making processes have changed.
* Modernization came to forefront when they were thinking about TPEP and ensuring all Oregonians had access to the services. Restructuring organization for CLHO. Want to continue to address collaborative teamwork between Healthy Communities and other committees.

Communicable Diseases* Deals with everything CD related – HIV, TB, and STIs.
* Highlights from 2017 – changed meeting time to Friday mornings to improve attendance. Modernization worked with state to provide input on the measures that were just discussed. CLHO CD structure won’t change with modernization.
* Dealt with a bunch of different CD and immunization issues.
* Group will look at new CDC TB data collection requirements that were just released.

Healthy Structures* Been very busy. Purpose of committee was to look at priorities and standards in funding as they move to new structure which is systems and innovation. In the last month they have worked on creating new structure. Objectives of committee were looking at minimum standards, creating new model. Part of issue being unclear about discussions and commitees.
* Focusing on what are the innovations that might be happening and how do new ideas get distributed.

General Considerations* Modernization: It will be requested that committees explicitly start to discuss modernization as a standing agenda item. Groups will be tasked with linking PEs to modernization capabilities.
* Equity: There are different ways of thinking about equity, i.e equitable outcomes, equitable services, and equitable funding. We need to define what we mean so we have a shared language, especially as it relates to modernization.
* Collaboration: How do committees assure there is collaboration and communication across committees? Three levels of equity: funding, outcomes,
* Guidance on how to have the conversation around equity would be very helpful. Modernization and which pieces would relate to equity.
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| TPEP Funding | Update  | Oct 10th meeting spent significant time doing SWOT analysis and tobacco control at regional, state, and local levels. LHDs were able to talk about their challenges and request flexibility at local level. Agreed to look at funding formula over the next 18 months and are pulling together workgroup. At JLT concluded that it would be 3 admins, 3 PMS, 3 TPEP Coordinators. Based on the feedback getting, put together a group that JLT will review and make sure they have optimal representation. There is some consideration that this workgroup still needs to be connected closely to the Committee work. Tanya Phillips, Co-Chair of the Healthy Communities committee suggested an update at the next committee meeting.  |
| Modernization Process Measures | Update | Sara Beaudrault presented on process measures recommended by Accountability Metrics Subcommittee. Process measures are tied to accountability metrics. During July – Sept OHA worked with CLHO committees to create these measures.They will start with baseline data. For information not currently collected, they are figuring out how to collect it. Considerations from CLHO:* LHD has limited ability to make providers to go through AFIX training.
* Challenging to get training at local level. Come up with ways to do this but need more of a comprehensive system.
* Not very many process measures. Response: Wanted to narrow down process measures as to not overwhelm locals.
* Adults smoking cigarettes – measure could be changed to using tobacco instead of smoking cigarettes.
* Number as a measure could be problematic in small counties (i.e. representation on one active transportation board would mean different things to a large vs. a small county). When possible, try to use other measures like percents.
* Modernization is aspirational.
* Active transportation boards: This work can happen in a meaningful way on other boards like coalitions. Tweak language so that it reflects other groups doing meaningful work as well.

Will publish these measures in early 2018 pending approval from PHAB.Process measures will be discussed at CLHO Committees about the incorporatation into PEs.  |
| PE Template Changes | Review | The Program Element (PE) Template is intended to assist Public Health Division programs in creating a PE, which describes programmatic and service deliverables for inclusion in the Financial Assistance Agreement (FAA) with each Local Health Department (LHD). A standard template provides consistency throughout the process.The webinar on the new PE template will be held November 1, 2017, from 1:00-2:00pm. Sara and Andrew will talk about the PE Template, Modernization, and Process Measures. If Accountability metric isn’t funded it won’t be incorporated into the PEs. |
| CHA/CHIP Training | Update | Anona Gund, Transformation Analyst at Transformation Center presented on new training which will help support collaborative approach between hospitals/LHDs/CCOs on their CHAs/CHIPs for a shared improvement plan. Some regions are already integrated. CLHO Considerations* Different CHA/CHIP requirements and timelines for hospitals, CCOs, and LHDs.
* Are there better opportunities to have senior LPHA staff participate in their CCO?
* How will LPHAs know when these trainings are happening? Response: they will be expected to be invited by CCOs.
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| Adjourn – Stretch break |  |  |