

## **Program Element #51: Public Health Modernization: Regional Partnership Implementation**

1. **Description.** Funds provided under this Agreement for this Program Element may only be used in accordance with, and subject to, the requirements and limitations set forth below, to deliver Public Health Modernization: Regional Partnership Implementation.
  - a. **Establish a Regional Partnership of local public health authorities (LPHAs) and other stakeholders.** Develop and sustain Regional Infrastructure through a Regional Partnership of LPHAs and other stakeholders.
  - b. **Implement regional strategies to control communicable disease and reduce health disparities.** Implement regional strategies to control communicable disease within the region. Place emphasis on reducing communicable disease-related disparities.
  - c. **Demonstrate new approaches for providing public health services.** Participate in learning communities and ongoing evaluation. Share emerging practices and demonstrate how these practices can be applied across the public health system.

The 2016 public health modernization assessment<sup>1</sup> showed that health equity and cultural responsiveness is the least implemented foundational capability across Oregon's public health system, and that one in four people live in an area in which communicable disease control programs are limited or minimal.

LPHA must use funds provided through this Program Element to establish a regional approach for communicable disease control that is tailored to a specific communicable disease risk within the region. LPHA must place emphasis on identifying and reducing communicable disease-related disparities. LPHA must demonstrate models for Regional Infrastructure that are scalable in other areas of the state or for other public health programs.

All changes to this Program Element are effective upon receipt of grant award unless otherwise noted in Exhibit C of the Financial Assistance Award.

2. **Definitions Specific to Public Health Modernization: Regional Partnership Implementation.**
  - a. **Foundational Capabilities.** The knowledge, skills and abilities needed to successfully implement Foundational Programs.
  - b. **Foundational Programs.** The public health system's core work for communicable disease control, prevention and health promotion, environmental health, and assuring access to clinical preventive services.
  - c. **Public Health Accountability Outcome Metrics.** A set of data used to monitor statewide progress toward population health goals.
  - d. **Public health accountability process measures.** A set of data used to monitor local progress toward implementing public health strategies that are necessary for meeting Public Health Accountability Outcome Metrics.
  - e. **Public Health Modernization Manual:** A document that provides detailed definitions for each Foundational Capability and program for governmental public health, as identified in ORS 431.131-431.145. The Public Health Modernization Manual is available at: [http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public\\_health\\_modernization\\_manual.pdf](http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public_health_modernization_manual.pdf).

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<sup>1</sup> 2016. Oregon Health Authority. State of Oregon Public Health Modernization Assessment Report. Available at [www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/PHModernizationFullDetailedReport.pdf](http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/PHModernizationFullDetailedReport.pdf).

- f. Regional Partnership. A group of two or more LPHAs and at least one other organization that is not an LPHA that is convened for the purpose of implementing strategies for communicable disease control and reducing health disparities.
- g. Regional Infrastructure. The formal relationships established between LPHAs and other organizations to implement strategies under this funding.
- h. Regional Governance. The processes and tools put in place for decision-making, resource allocation, communication and monitoring of the Regional Partnership.

3. **Program Components.** Activities and services delivered under this Program Element align with Foundational Programs and Foundational Capabilities, as defined in [Oregon’s Public Health Modernization Manual](#), ([http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public\\_health\\_modernization\\_manual.pdf](http://www.oregon.gov/oha/PH/ABOUT/TASKFORCE/Documents/public_health_modernization_manual.pdf)) as well as with Public Health Accountability Outcome Metrics and Process Measures (if applicable) as follows:

a. **Foundational Programs and Capabilities** (As specified in the Public Health Modernization Manual)

Program Components	Foundational Program					Foundational Capabilities						
	CD Control	Prevention and health promotion	Environmental health	Population Health	Access to clinical preventive services Direct services	Leadership and organizational competencies	Health equity and cultural responsiveness	Community Partnership Development	Assessment and Epidemiology	Policy & Planning	Communications	Emergency Preparedness and Response
Establish a Regional Partnership	X					X		X		X		
Implement communicable disease control strategies	X						X	X	X	X	X	X
Demonstrate new approaches for providing public health services	X					X		X		X		X

b. **Public Health Accountability Outcome Metrics:**

The 2017-2019 public health accountability metrics adopted by the Public Health Advisory Board for communicable disease control are:

- Two year old immunization rates
- Gonorrhea rates

LPHA is not required to select two year-old immunization rates or gonorrhea rates as areas of focus for funds made available through this Program Element. LPHA is not precluded from using funds to address other high priority communicable disease risks based on local epidemiology and need.

**c. Public Health Accountability Process Measure:**

The 2017-19 public health accountability process measures adopted by the Public Health Advisory Board for communicable disease control are listed below. LPHA must select a high priority communicable disease risk based on local epidemiology and need, the following process measures may not be relevant to all LPHAs.

- Percent of Vaccines for Children clinics that participate in the Assessment, Feedback, Incentives and eXchange (AFIX) program
- Percent of gonorrhea cases that had at least one contact that received treatment
- Percent of gonorrhea case reports with complete “priority” fields

**4. Procedural and Operational Requirements.** By accepting and using the Financial Assistance awarded under this Agreement and for this Program Element, LPHA agrees to conduct activities in accordance with the following requirements:

- a.** Implement activities in accordance with this Program Element.
- b.** Engage in activities as described in its Public Health Modernization Regional Work Plan, which has been approved by OHA and as set forth in Attachment 1, incorporated herein with this reference.
- c.** Use funds for this Program Element in accordance with its Regional Program Budget, which has been approved by OHA and as set forth in Attachment 2, incorporated herein with this reference. Modification to the Regional Program Budget of 10% or more for any line item may only be made with OHA approval.
- d.** Develop Regional Infrastructure through formation of a Regional Partnership of LPHA and other partners.
  - (1)** Maintain a Regional Partnership leadership team list for communication with OHA.
  - (2)** Use a formal Regional Governance structure for decision-making, resource allocation and implementation of approved regional work plan for LPHA and partners participating in the Regional Partnership.
  - (3)** Ensure the Regional Partnership is staffed at the appropriate level to address all sections in this Program Element and to fulfill work plan objectives and activities.
  - (4)** Ensure funding is used to support Regional Partnership goals as well as meet the needs of all participating LPHA and partners.
- e.** Implement regional strategies to address a specific communicable disease risk for the region with an emphasis on reducing communicable disease-related health disparities.
  - (1)** Engage local organizations as strategic partners to control communicable disease transmission.
  - (2)** Develop and implement a system for identification and control of communicable disease with strategic partners.
  - (3)** Use established best practices whenever possible.
  - (4)** Establish partnerships with Regional Health Equity Coalitions, federally recognized tribes, community-based organizations and other entities in order to develop meaningful relationships with populations experiencing a disproportionate burden of communicable disease and poor health outcomes.
  - (5)** Work directly with communities to co-create strategies to control communicable disease transmission. Ensure that health interventions are culturally responsive.

- (6) Communicate to the general public and/or at risk populations about communicable disease risks.
- (7) Provide training to health care and other strategic partners about communicable disease risks and methods of control. Provide technical assistance to health care and other strategic partners to implement best and emerging practices.
- (8) Develop and implement a system for communications with strategic partners about disease transmission.
- (9) Demonstrate capacity to routinely evaluate communicable disease control systems through the response to disease reports and make changes to practice based on evaluation findings.
- (10) Complete an assessment of the region's capacity to apply a health equity lens to communicable disease control programs and services and to provide culturally responsive communicable disease control programs and services.
- (11) Complete an action plan that addresses key findings from the regional health equity assessment for communicable disease control.

- f. Implement and use a performance management system to monitor achievement of work plan activities, deliverables and milestones.
- g. Participate in quarterly calls with OHA to discuss progress toward regional work plan activities, deliverables and milestones.
- h. Ensure members of the Regional Partnership leadership team participate in the planning of and attend two in person collaborative learning opportunities and other remote collaborative learning opportunities.
- i. Participate in evaluation of public health modernization implementation in the manner prescribed by OHA.
- j. Seek opportunities to share information about Regional Partnership strategies for communicable disease control and reducing health disparities with outside organizations.

**5. General Budget and Expense Reporting.** LPHA must complete an "Oregon Health Authority Public Health Division Expenditure and Revenue Report" located in Exhibit C of the Agreement. These reports must be submitted to OHA each quarter, by the 25<sup>th</sup> of the month following the end of the fiscal year quarter.

**6. Reporting Requirements.**

- a. Have on file with OHA an approved Regional Work Plan no later than four weeks after initial funding is received.
- b. Submit quarterly Regional Work Plan progress reports using the timeline and format prescribed by OHA.
- c. Submit to OHA the following deliverables, in the timeframe specified:
  - (1) A minimum of one new policy (e.g., Memorandum of Understanding, Joint Agreement, County Resolution) describing the Regional Partnership by March 3, 2018
  - (2) Regional Partnership organizational chart by March 31, 2018
  - (3) Regional health equity assessment and action plan by December 31, 2018
  - (4) At least two additional products (e.g., regional policies for implementation of a best or emerging practice, data sharing agreements, or communication materials) by June 30, 2019

**7. Performance Measures.**

If Regional Partnership completes fewer than 75% of the planned activities in its approved work plan for two consecutive calendar quarters in one state fiscal year, LPHA shall not be eligible to receive funding under this Program Element during the next state fiscal year.

**Attachment 1**  
**Regional Work Plan**

**Attachment 2**  
**Local Program Budget**