

August 15, 2019 Meeting of the Conference of Local Health Officials

Members Present:

☑Baker – Nancy Staten	☐ Hood River – Trish Elliot	☑ North Central PHD – Teri Thalhofer
☑ Benton – Charlie Fautin	☑ Jackson –Jackson Baures	☑ Polk – Kristty Polanco
☑ Clackamas – Julie Aalbers	☑ Jefferson – Mike Baker	🗆 Tillamook – Marlene Putman
□ Clatsop – Mike McNickle	☐ Josephine – Mike Weber	☑ Umatilla – Joseph Fiumara
☑ Columbia – Mike Paul	☑ Klamath – Jennifer Little	☑ Union – Carrie Brogoitti
☑ Coos – Florence Pourtal-Stevens	☐ Lake – Judy Clarke	☑ Washington – Tricia Mortell
☑ Crook – Muriel DeLaVergne-	☑ Lane – Jocelyn Warren	☑ Wheeler – Karen Woods
Brown	☑ Lincoln – Rebecca Austen	□Yamhill – Lindsey Manfrin
☑ Curry – Ben Cannon	☑ Linn – Glenne Hughes	
☑ Deschutes –Heather Kaisner	☐ Malheur – Sarah Poe	☑ HO Caucus – Pat Luedtke
☑ Douglas – Bob Dannenhoffer	☑ Marion – Katrina Rothenberger	☑ CLEHS Caucus – Joseph Fiumara
☑ Grant – Jessica Winegar	✓ Morrow – Sheree Smith	☐ AOPHNS - vacant
☐ Harney – Jolene Cawlfield	✓ Multco – Adelle Adams, Marc	
	Harris	

Public Health Division:

Lillian Shirley, Cara Biddlecom, Sara Beaudrault, Collette Young, Tim Noe,

Coalition of Local Health Officials:

Morgan Cowling, Sierra Prior

Minutes

Jessica Winegar motioned to approve July minutes, Muriel DeLaVergne seconded. Board approved

Appointments



Conference of Local Health Officials

The Board appointed Che Pivovar (Polk County) and Samantha Schafer (Lincoln County) to the Communicable Disease Conference Committee.

PH Modernization – PE 51

On Monday, August 12, OHA PHD hosted a webinar to provide an overview of proposed changes and the process for creating PE 51. Many CLHO members participated, and OHA shared a detailed packet with the draft PE, FAQs and additional information. The documents from the packet are available on the CLHO website. Tricia reviewed the background and the process for the Program Element development.

PE 51 includes goals and objectives from CLHO, PHAB, and the Oregon legislature to position public health to provide essential public health services to every person in Oregon. The JLT worked with the CLHO CD and S&I Conference Committees to develop the new program element to encompass the new investment from the legislature. Goals in writing the PE included transitioning from project based work and incorporating input from the modernization manual to advance implementation.

The legislature understands that modernization needs to be advanced each year and recognizes that the investment for 2019 is a small win. The \$15 million investment will be distributed accordingly:

\$10 mill to LPHA

\$1.2 mill to federally recognized tribes for their modernization assessment

\$3.8 to OHA PHD

PE 51:

Section 1: LPHA Leadership, Governance and Program Implementation

Section 2: Regional Partnership Implementation (available to continuing and new partnerships)

Section 1: This section is designed to provide structure so LPH is working in same direction for modernization, and flexibility to determine appropriate work for their jurisdiction in the next two-year cycle

- Leadership and Governance Section: All LPHAs are required to participate in learning collaborative. The structure isn't fully developed yet, but the goal is to work with locals to develop a systems approach for



strategic direction for state and local work. OHA is committed to reducing the impact of travel. The section also includes a menu of options with flexibility.

- Health equity and cultural responsiveness: LPHAs will complete an equity assessment if they haven't already, and all LPHAs are expected to move towards implementation of an equity plan.
- Communicable disease control: There is a menu of options for jurisdiction specific CD control and prevention work.

<u>Timelines:</u> Formal award announcements will be made in the first week of Sept. and OHA anticipates work plans and budgets will be due Oct. 11, and final approval is anticipated by Nov 8.

- Sara Beaudrault: If CLHO approves PE on Aug. 15, then instructions will be sent out by end of day and high level proposals will be due next Friday (Aug. 23) by the end of the work day.
- Tricia Mortell emphasized that the PE was developed through JLT, S&I and CD committees, there is no recommendation brought to the Board by a committee. Tricia emphasized considering if PE is flexible and strategic.
- The goal is to make funds available on Oct. 1 so there's no gap in funding. Final budgets and workplans are due Nov. 8. Funds will be available before final work plans submitted for both local and regional work.
- Regional plans are due Aug. 23.

Comments and Questions:

- Sheree Smith expressed concern from smaller counties that there aren't enough funds to bring someone new on board. Small counties are limited by current staff capacity and may have to consider work with other counties to pool funds or share FTE.
- Tricia Mortell assured that OHA will work with locals that come together to share funding. OHA also confirmed it's possible to hire someone with FTE partially funded with regional funds and partially with individual LPHA funds if there is work alignment.
- Jackson Baures inquired whether disease investigation is considered a direct service. OHA confirmed it is not, and the FAQ has a definition of what is considered a direct service.
- There was some discussion about how smaller counties have a lot of work that strains their capacity when considering CD work and the associated administrative work for the PE and limited funds to support that



required work. Florence Poutal-Stevens proposed revisiting the funding formula in the future because it's not equitable for smaller counties to accomplish the proposed scope of work.

- Karen Woods asked for clarification about where the funds allocated to Wallowa County in the funding formula would go. OHA PHD responded that they are fulfilling the statutory obligations for Wallowa County and they will receive the modernization allotment.
- A question was raised about whether counties can be in two regional partnerships. If counties are considering more than one partnership they should contact Sara Beaudrault and Cara Biddlecom.
- Jennifer Little asked if the inclusions/exclusions allow to subcontracting with LPHAs to cover costs for leading regional work and whether LPHAs can pool funds separate from the regional pot of money. OHA confirmed yes to both questions.

OHA PHD Plans for Modernization Funds:

OHA PHD will support public health system work, data systems and will work towards providing county level data, supporting health equity work for plans, supporting partnerships, and increasing surge capacity for CD and environmental health, and running the required learning collaborative from PE 51.

Muriel DeLaVergne-Brown moved to approve PE 51, and Terri Thalhofer seconded the motion. In further comment Florence Pourtal-Stevens commented on the previous work sessions said she was appreciative of the work and listening for concerns and questions.

The Board approved PE 51 (21-3).

CLHO: Systems and Innovation Work Priorities

Florence Pourtal-Stevens and Mike Baker (S&I Co-Chairs) presented that the committee has been dormant for last two months because they are in search of direction from the Board. Through working on PE 51 and hearing concerns, the co-chairs wondered if the committee should be positioned to work on modernization as system wide work with LPHAs and OHA PHD. Florence share that from her perspective the work is lacking an overall mission and strategic direction, and that there is technology and systems that don't speak to each other. There is a need for appropriate tools to support making a case for the work public health is doing. Possible questions for the



S&I Committee may include: What are the most needed investments for advancing public health systems; What are the strategies and goals for achieving process and systems outcomes,

and health outcomes.

The co-chairs are awaiting input from S&I committee. Teri Thalhofer expressed that as a PHAB member, she would like to formally link S&I Committee work to PHAB, as it would be an opportunity to get feedback from more counties to PHAB. Muriel DeLaVergne-Brown echoed that CLHO still hasn't identified a systems level approach, and that it's important to look at data at the systems level.

Tricia Mortell asked if the S&I Committee has sufficient members and geographical representation from state. There are 10-12 people regularly attending. The co-chairs opened an invitation to everyone, especially if they are interested in data work. S&I usually meet on the Monday before CLHO from 2-3:30pm, but the next meeting is Aug. 19. The committee is open to staff, as well, if it's an appropriate fit.

Updates:

- **JLT Update:** Tricia Mortell reminded the Board that the Joint Leadership Team (JLT) is comprised of the CLHO Executive Committee and state leadership staff working together. Lately JLT has been focusing on systems level conversations over last year. JLT is planning to work with S&I to move towards implementation work and discussing more for systemic work. Recently JLT had a request to move MCH from the Prevention Committee to the Access to Clinical Preventative Services Committee as it would be better to have MCH connected to WIC. The Board requested that these committees have a vote and bring a decision to the Board in October for approval. JLT is also having conversations about the learning collaborative. JLT will form a small work group with 1-2 meetings to bring the initial framework and ideas to the CLHO Retreat for discussion on what LPHAs are hoping to achieve. Tricia Mortell said that she wants to have representation from LPHAs that fall in the small and extra small bands in the funding formula for designing the framework. Muriel DeLaVergne-Brown, Jennifer Little, Florence Pourtal-Stevens, Sheree Smith and Rebecca Austen volunteered. Florence Pourtal-Stevens suggested S&I should be involved in developing the framework.
- **PHAB:** PHAB meets on Aug. 15 after the CLHO meeting. They will be discussing health equity, and talking about sharing more widely what OHA is doing in their health equity work.



- PHAB Subcommittees

- legislative session and looked at modernization funding. Previous two meetings have mirrored CLHO conversations and mostly included updates and no action items. The subcommittee is currently on hiatus until action items are brought forward.
- Metrics & Accountability: The last meeting with everyone present was in May and they discussed what metrics might change. The oral health metric will stay, and there will be discussion about opioids (which will also be on PHAB Aug. 15 agenda). The 2019 Accountability and Metrics document is available online. The subcommittee is looking at alignment of public health and CCO metrics.

Meeting adjourned at 10:50am.