September 17, 2020

Meeting of the Conference of Local Health Officials

**Executive Members** Present: Jocelyn Warren, CLHO Chair, Lane; Carrie Brogoitti, Vice-Chair, Center for Human Development Union; Katrina Rothenberger, Secretary, Marion; Jackson Baures, Large County Rep, Jackson; Rebecca Austen, Small County Rep, Lincoln; Joseph Fiumara, Coalition of Local Environmental Health Specialists; Pat Luedtke, Health Officer Rep, Lane, Tricia Mortell, Past Chair, Washington;

Absent: Lindsey Manfrin, Public Health Administrator of Oregon Caucus; Mid-County Rep

**Members Present:**

 North Central PHD – Shellie Campbell

 Polk – Jacqui Umstead

 Tillamook – Marlene Putman

 Umatilla – Joseph Fiamara

 Union – Carrie Brogotti

 Washington – Tricia Mortell

 Wheeler – Karen Woods

 Yamhill – Lindsey Manfrin

☐ HO Caucus – Pat Luedtke

 CLEHS Caucus – Joseph Fiumara

☐ AOPHNS – vacant

 Public Health Administrators - Lindsey Manfrin

 Baker – Nancy Staten

☐ Benton – Charlie Fautin

 Clackamas – Philip Mason-Joyner

☐ Clatsop – Mike McNickel

☐ Columbia – Mike Paul

 Coos – Kathy Cooley

 Crook – Muriel DeLavergne-Brown

 Curry – Sherrie Ward

 Deschutes – Nahad Sadr-Azodi

 Douglas – Bob Dannenhoffer

 Grant – Kimberly Lindsay

 Harney – Nick Calvin

 Hood River – Trish Elliot

 Jackson – Jackson Baures

 Jefferson – Mike Baker

 Josephine –Audrey Tiberio

 Klamath – Jennifer Little

☐ Lake – Judy Clarke

 Lane – Jocelyn Warren

☐ Lincoln – Rebecca Austen

 Linn – Shane Sanderson

 Malheur – Sarah Poe

 Marion – Proxy: Ryan Matthews

☐ Morrow – Diane Kilkenney

 Multco – Adelle Adams

**Public Health Division:** Cara Biddlecom, Danna Drum, Lillian Shirley, Sara Beaudrault, Akiko Saito, Aaron Dunn, Melissa Sutton, Time Noe, Brett Sherry, Collette Young

**Meeting Guests:**

**Coalition of Local Health Officials:** Morgan Cowling, Sierra Prior

**Agenda Review & Meeting Goals:** No changes were made to the agenda.

**August Minutes**

*Motion: Bob Dannenhoffer motioned to approve the August Minutes. Trish Elliott seconded. No discussion. No objections. Board approved.*

**Appointments**

No appointments.

**Crisis Care Guidance Update**

Akiko Saito presented. OHA has been reviewing the guidance, which was most recently updated in 2018. The Health Equity Committee of OHPB gave feedback a couple weeks ago. OHA is re-launching a review with health equity centered in the process. CLHO has been involved with this since 2014. While OHA understands the Crisis Guidance was intended to apply ethical principles, it doesn’t currently contain OHA’s values for equity and diversity that have become more apparent during COVID-19. Since the guidance doesn’t currently take into consideration equity, OHA will not be referring to or using the 2018 guidance moving forward. It has been removed from COVID-19 response work. OHA intends to move quickly in reviewing the guidance. OHA will reach out to CLHO, LPHAs, and Tribal Health Authorities in early October for input.

Rachael Banks asked how hospital systems are engaged, and has there been thoughts on what hospitals would used if a decision needed to be made in a crisis. Akiko said that regional hospital systems have been built up during COVID, and there is an MOU with all six. They are looking at some of the more general guidance around canceling elective surgeries as an example. They have looked at patient transport and resources allocation pieces and they will use that as needed. Oregon has had coordination calls with Washington partners as well for responding to wildfires.

**CD Data Sharing Legislation**

Collette Young presented. OHA is looking for a solution for the need to share case information on a platform that is secure and would allow other care coordinators (CCOs) to have timely information about folks in their care that might need wrap around services and care coordination due to COVID-19. Collette welcomed feedback on how LPHAs could be notified when CCOs are working on providing wrap around services that isn’t burdensome.

Jocelyn Warren shared that more information is needed, but she would check with her tech folks to she if they have suggestions.

**Epi and Lab Capacity Grant**

Melissa Sutton presented. In May, OHA got notification of an award through an existing funding stream. It requires an adequate testing plan, and submitting the draft testing strategy to CDC and the White House, and increasing testing to 2% of the population per month and meeting vulnerable populations’ needs over 30 months, and a framework to coordinate testing.

Aaron Dunn continued. The framework provides flexibility, but there are core underpinning features to focus on: regions, and down to county level, to make sure there is sufficient staffing levels. The COVID response is focusing on region response work as we move into a long-term response. Counties should be interacting with these regional staff. There’s also a focus on vulnerable populations and meeting the needs of counties. A small testing team has been coordinating work across the state usually in response to outbreaks with a lot of focus on migrant and seasonal farmworker populations and LTCFs. OHA added 6 FTE, and with ELC, they are looking to expand to 21-27 individuals to be regional coordinators and provide assessment on gaps. There will be contracts for regional hospitals and resource funding. It could be a public health nurse, but hospitals might choose to staff that differently. As OHA starts to staff this up, they want to plug in the work that LPHAs are doing to assess gaps around testing and understand needs at the local level.

Melissa reviewed Nic Blosser’s Oregon Testing Initiative that will rely on the regional approach. The goal is to increase in-state reliable testing capacity and the speed of results to identify cases and halt transmission. This involves testing all cases and contacts of cases. The proposal right now is to partner with Oregon academic institutions and increase capacity by 10,000 tests per day. This comes from modeling by researchers at MIT. It’s a reasonable goal as we look at a potential surge. Melissa welcomed questions.

Jocelyn Warren asked for clarification if the testing piece of the ELC is separate from Nic Blosser’s work. Melissa said they are separate plans and funding sources. Jocelyn asked if there is a plan for how they will coordinate. Melissa said that is a work in progress and will sort of be determined by whether populations meet the ELC funding criteria.

Tricia Mortell asked about timelines and when we might see more testing at the local level. Aaron said 5 positions are closing now, so OHA is in the HR process. Aaron anticipates a jump in resources in October. Contract lease discussions are in progress with regional hospital groups.

Diane Kilkenny asked if OHA would reach out to clinics in rural areas. Aaron said that’s a goal and there will be a staff person designated to rural health needs and who will work with the rural health office at OHSU.

Jocelyn Warren said that using equity as a focus for the Crisis Care Guidance, we can center that in testing as well. Aaron added that there will also be positions for Tribes, outbreak support in vulnerable populations, and outreach to communities of color to make this a robust response for testing.

Trish Elliot asked if they will work in coordination with LPHAs. Aaron said yes, LPHAs should be working with these regional staff on a day-to-day basis. Danna Drum added that it will take time to get infrastructure in place, but this work should help with getting the dots connected. Trish Elliot asked if this is connected with Medical Teams International. Aaron said that OHA has looked at working with MTI. The testing team is open to leveraging any resource that’s out there.

**Vaccine Planning Funding**

Danna Drum presented. On a Health Administrator call, OHA mentioned some funding for COVID vaccine planning. OHA had follow-up conversations with the CD Committee chair and Jocelyn Warren. CLHO last month approved funding for the supplemental flu funds. OHA will go ahead with moving those to the next IGA amendment. It doesn’t require a PE change. It’s one-time funding, but the PE states that LPHAs have to apply for one-time funding. There will be a small administrative burden as administrators will get an email for opting into flu funding that is going through the Modernization funding formula and that will count as your application.

OHA now has additional one-time funds for COVID vaccine planning. This will go to CLHO CD in early October for the Conference Board to approve in October. It’s similar to the flu requirements, and it’s a similar amount. After the COVID vaccine planning funds are approved, there will be a similar opt in process.

OHA found out about these funds recently. OHA know that administrative funding burden continues to be a concern. The goal is to report on these two streams together, but OHA doesn’t have a final determination on this. OHA is pursuing the least burdensome option to avoid having the COVID vaccine funds in a separate PE if possible.

Tricia Mortell asked if the bodies of work can’t be blended. Danna said the work is similar, so that’s why OHA is trying to figure out if this can be administratively put together. Collette Young said the flu funds came to us to prep for COVID and access to vaccines. The access to vaccines is the primary difference. Jocelyn said there will be overlap with flu, but also some differences for COVID. She said she hopes there will be opportunity to share ideas.

**Report to the Legislature on Funding for Modernization**

Sara Beaudrault reminded everyone that this report goes to the legislature every two years. There was an extension this year. The report has two main sections - current progress and then priorities for the next biennium. Sara reviewed the executive summary (full report available in CLHO Meeting Materials).

For 2021-2023 investments, PHAB and CLHO recommended staying the course on priorities, which will expand into environmental health and emergency preparedness. There were no changes to the funding formula and the intent is to distribute the majority of funds to LPHAs.

PHAB will give feedback today. The report will be submitted to LFO at the end of the month.

**EH IGA**

Brett Sherry presented. OHA started a workgroup in November to review the EH IGA. Meetings wrapped up in July. Topics addressed in the revisions include: delegating to subcontractors; enforcement; and reporting clarifications. The goal is to review points in more detail at the next Conference meeting. The draft will be shared ahead of time. The Current IGA doesn’t expire until 2023, but there is an amendment to revise the remittance factor for the second half of the biennium. As part of the IGA, the state is required to supply a preliminary remittance factor to LPHAs in September to raise fees if needed. COVID has obviously impacted this. The preliminary remittance factor has gone down, but we won’t have a final remittance factor until April.

Danna Drum said the draft remittance factor will also get circulated with county counsels. Aaron Dunn said they will share a track changes document to be able to review changes.

**Adjourn**