

June 16th, 2022

Meeting of the Coalition of Local Health Officials

Meeting Began: 11:45am

Executive Members:

<u>Present:</u> Jocelyn Warren, CLHO Chair, Lane; Carrie Brogoitti, Vice-Chair, Center for Human Development Union; Katrina Rothenberger, Secretary/Treasurer, Marion; Jackson Baures, Large County Representative, Jackson; Shane Sanderson, Medium County Representative, Linn; Katie Plumb, Small County Representative, Crook; Joseph Fiumara, Coalition of Local Environmental Health Specialists, Umatilla; Lindsey Manfrin, Public Health Administrators of Oregon, Yamhill; Marie Boman-Davis, Legislative Committee Representative, Washington

Absent: Dr. Pat Luedtke, Health Officer's Rep

Members Present (x if present)

Χ	Baker – Meghan Chancey	X	Jackson - Jackson Baures		North Central PHD - Shellie Campbell
Χ	Benton - April Holland	X	Jefferson - Mike Baker	X	Polk – Naomi Adeline
X	Clackamas - Philip Mason-Joyner	X	Josephine – Janet Fredrickson		Tillamook - Marlene Putnam
	Clatsop - Margo Lalich	X	Klamath - Jennifer Little	X	Umatilla - Joseph Fiumara
	Columbia - Mike Paul	X	Lake - Judy Clarke	X	Union - Carrie Brogoitti
	Coos - Anthony Arton	X	Lane - Jocelyn Warren	X	Washington – Marie Boman-Davis
X	Crook – Katie Plumb	X	Lincoln - Florence Pourtal	X	Wheeler – Shelby Thompson
	Deschutes – Nahad Sadr-Azodi	X	Linn - Shane Sanderson	Х	Yamhill - Lindsey Manfrin
	Douglas - Bob Dannenhoffer	X	Malheur - Sarah Poe		
	Grant - Kimberly Lindsay	X	Marion - Katrina Rothenberger		HO Caucus - Pat Luedtke
Χ	Harney – Jolene Cawlfield		Morrow – Robin Canaday	X	CLEHS Caucus - Joseph Fiumara
Χ	Hood River - Trish Elliot	X	Multnomah – Adelle Adams	X	PHAO - Lindsey Manfrin

Other LPHA Staff: Stacy Brubaker



Public Health Division: Danna Drum, Sara Beaudrault

Coalition of Local Health Officials: Sarah Lochner, Executive Director; Laura Daily, Program Manager

Guests: Ben Wood and Brittany Chen (Health Resources in Action); Tera Hurst (Health Justice Recovery Alliance)

Motion: Jackson Baures made a motion to approve the May 2022 minutes. Florence Pourtal seconded the motion. Unanimous vote, motion past.

Agenda Items

Appointments: No appointments.

Health Resources in Action: Sarah Lochner introduced this topic by discussing Oregon's goal of eliminating health inequities by 2030. Many health administrators have felt uncertain about their role in this goal, and with so many new health administrators, it is important that we are all using the same language and have a shared understanding. With this in mind, CLHO is contracting with Health Resources in Action to create an equity training series.

Ben Wood and Brittany Chen with HRiA shared some of their work thus far on creating these equity sessions. They did an initial assessment with CLHO staff and identified a handful of CLHO members to interview. HRiA did one-on-one interviews in April and a group discussion in May to gather different perspectives and to tailor the sessions to what will be most helpful.

During key informant interviews, several themes emerged that will be reflected in the training:

- Trust building: building cohesion with CLHO members and creating safer/brave spaces
- Variability in context and approach: recognize variability, building individual skills and shared understanding/mission, political environment impacts approaches.
- Build on successes and address barriers: support practical application and build strategies for allyship.

During the group discussion, most folks agreed that we should:

- Focus on trust building
- Consider unique context and circumstances



- Develop a shared agenda on equity
- Find collective grounding in PHM to integrate health/racial equity
- Focus on systems change approaches (vs. individually-focused approaches)

Florence Pourtal asked how we will go about bringing system/organizational change if there isn't individual change. Ben acknowledged that it will be a balance between these two things. Brittany added that individual transformation and learning will certainly be happening, but the practical application will be focused on the system level and how CLHO members can have an impact on achieving equity in Oregon.

Ben and Brittany described success in this training as: a deeper shared understanding, building trust and partnership, foundational content with specific actions/policy examples, and a highlight/building on successes. In addition to Brittany and Ben, there will be two additional HRiA staff members who have a background in rural health since this is a significant topic in Oregon public health.

In preparation for these sessions, Ben and Brittany recommended that CLHO articulate continued commitment to this work and identify structures to continue conversations and relationship-building after these equity sessions with HRiA. This will allow CLHO to come to a shared understanding of their role in eliminating health inequities by 2030 and to keep learning and developing together.

CLHO staff will be sending out calendar holds for these two sessions, and HRiA will send out the learning objectives and some pre-reading in mid-July. CLHO members can reach out to Ben and Brittany if you have questions: bchen@hria.org and bwood@hria.org.

Ballot Measure 110 Updates: Tera Hurst, Executive Director of the Health Justice Recovery Alliance, shared an update on the implementation of BM 110 which decriminalized the possession of small amounts of illicit drugs and puts funds from marijuana taxes into a wide array of addiction services. This year will see \$302 million in investment from the 2021 Legislative Session in addiction recovery and harm reduction services. It provides free services, focuses on populations most harmed by the War on Drugs, and looks to move addiction services out of criminal justice and into health care.



Early funds included \$30 million+ invested in Access to Care Grants, and this has served about 16,000+ Oregonians in six months. Funding has been granted to 26 out of 36 counties. The funding is being awarded now to Behavioral Health Resource Networks (BHRNs). BHRNs are a set of providers, working together as a network, to increase access to low-barrier addiction services. At least one BHRN must be established in each county and offer all of these services:

- Behavioral Health Treatment that is evidence-based, trauma-informed, culturally specific, linguistically accessible, and patient-centered;
- Peer support and recovery services designed to help people continue to address their substance use;
- Housing temporary, stable, and permanent housing; and
- Harm reduction interventions including overdose prevention, access to naloxone and hydrochloride along with drug education and outreach.

Tera shared that this process has been slow – it was supposed to go out in January, but the review of applications has been slow. However, there have still been many successes (Tera provided examples in the slides in the meeting materials). The Oversight and Accountability Council put forth the formula for how much each county will receive, which considers a county's Medicaid population (40%), houseless count (30%), arrests (20%), and overdose deaths (20%). There is a public dashboard that shows the grantees in each county for those wishing to track the funding:

Sarah Poe shared the challenges they've experienced in Malheur. Being on the border, they have become a destination for 1.2 million people to buy recreational marijuana and now to be a place where they can use substances without criminalization. They typically administer 2-3 doses of Narcan every day to reverse an overdose, and she stated that while Malheur is only 0.2% of the population of the state, it is 10% of the recreational marijuana sales that fund BM 110. She stated that the peer and treatment community in Malheur is not supportive of how this funding is being distributed. Tera acknowledged that this is not everyone's favorite law and is not having the impact on every community equally. However, she cautioned that we are at the very beginning of this, and BM 110 is providing money for services that were not available prior to this.

Stacy Brubaker stated that there are several entities that applied in Jackson County collaboratively to form a BHRN, yet there seem to be some one-off organizations that did not collaborate that seemed to get fully-funded. Tera clarified that the only organizations that might be able to apply on their own would be an entity that provides all the services previously stated (which is going to be rare). Thus far, only 10% of the funding has gone out. Tera asked for folks to reach out if they have questions, particular concerns, or have a particular need in their community.



Marie Boman-Davis asked how folks would engage with Health Justice Recovery Alliance and the BM 110 Advisory Council. Tera advised folks to reach out to her first to connect.

In-Person/Hybrid Meeting Review: Laura Daily reviewed a draft agreement for CLHO's proposed in-person Board meetings every quarter (in meeting materials). These agreements outline the roles of CLHO staff, the host county, and visitors during these visits. Visitors will be responsible for their own mileage, lodging, and meals aside from lunch on the day of our Board meetings which CLHO will cover. The host county will be responsible for recommending safe places to stay, eat, and visit while CLHO members are visiting their community. The host county can also arrange an optional event, such as a professional development opportunity, a group meal, or an outing to a point of interest.

Jackson Baures brought up that one of the suggestions for defining "safe" as being a certain distance from a homeless encampment would be challenging in most communities. Several other members agreed that this would be challenging. Lindsey Manfrin stated that it also further increases stigma around homeless populations which is not something public health professionals should be doing. Laura offered to take that suggestion out and send out the draft to everyone in the meeting follow-up.

CLHO Staff/Contractors Panel: Sarah Lochner reviewed that the Board approved two new positions in the 2022-23 budget: a communications specialist and a contract lobbyist. Sarah would like to put together a panel to help with recruiting and hiring for these positions (the Executive Committee is usually involved, but others are welcome too). Naomi Adeline, Jackson Baures, and Adelle Adams volunteered to be part of this panel. Sarah will be sending out information in the next few weeks to get this group together.

Last minute additions: Sarah Lochner wanted to draw attention to several funding opportunities that Laura added to CLHO's Weekly Brief. SB 1545 (Future Ready Oregon) is a large workforce investment that local Workforce Development Boards have already begun receiving (through a portion of the program known as "Prosperity 10,000"). Sarah urged CLHO members to reach out to their Workforce Boards. Oregon DHS also has grants available for cleaner air spaces for the upcoming wildfire season. There is also \$15 million in ARPA funds available through Oregon DEQ for septic stations – these funds go first to survivors of wildfires and then to others. Links will be included in the meeting follow-up and minutes:

- Future Ready Oregon
- DHS Air Quality



Septic

Danna Drum shared information on the CDC Workforce NOFO that was released earlier this morning. Most jurisdictions in Oregon will not be eligible to apply of their own because of population requirements. OHA will be applying for Oregon, and the NOFO states that not less than 40% of the grant should be distributed to health departments who were not awarded directly. OHA will work with LPHAs and keep them updated on the application process.

Jennifer Little advised LPHA administrators to keep watch for a survey about the HPP Committee's BM 108 work.

Meeting adjourned at 12:30pm.