



# OREGON COALITION OF LOCAL HEALTH OFFICIALS

Representing the collective interests  
of Oregon's 33 local public health  
authorities to improve the health of  
all Oregonians.

oregonclho.org

**Date:** September 09, 2022

**Proposal:** CLHO formalizes a Workforce Development Committee to guide CLHO's work

**Justification:** The Oregon Coalition of Local Health Officials specializes in 3 main areas of work: policy and advocacy, workforce development, and general LPHA support (see [this concept map](#) for a full view of CLHO work). Policy and advocacy work is guided by input from the CLHO Legislative Committee and the Executive Committee, and general LPHA support needs are identified by individuals CLHO members in meetings and one-on-one outreach and the CLHO Board. However, there is no established group guiding CLHO's workforce development efforts. This work has been loosely guided by the CLHO Board.

Within the last year, CLHO's scope for workforce development has changed and expanded.

- CLHO released the [Workforce Report](#) in March 2022, a large body of work that has opened doors for new solutions and collaboration with partners. CLHO attempted to convene an ad hoc Workforce Development Workgroup that could review and prioritize the recommendations within the report, but this group did not have clear aims or structure and discontinued meetings while CLHO collaborated with OHA on the CDC Public Health Infrastructure and Workforce Grant. However, CLHO has several possible avenues of work based on the Workforce Report and aims to repeat this report in some form every two years.
- CLHO also applied for the HRSA Rural Public Health Workforce Capacity-Building Grant in March of 2022 and was awarded this grant in August 2022. This \$1.5 million grant will last 3 years, bring on new staff, and coordinate projects in eight counties.
- CLHO is in the process of developing a legislative platform for the 2023 session, and the current proposal is an incentives package for the public health workforce. Should this legislation pass, the implementation will require a significant time commitment from CLHO staff. Should this legislation fail to pass, CLHO staff and members will need to review and revise the legislation for future sessions.

With these expanded/new areas of work, it is important that CLHO staff have ongoing, in-depth guidance from CLHO members. Forming a committee that can review current and potential work, establish general priorities, make recommendations to the CLHO Board, and provide (sometimes rapid) guidance on major issues and ramifications of changes will allow the CLHO Board to vote and direct the work of CLHO staff with confidence. Having this official channel will also allow CLHO staff to prioritize time and be mindful of capacity when pursuing new areas of work.

**Proposed Areas of Work for the Workforce Committee:** Some major areas of work for the Workforce Committee might include:





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- Establishing general priorities for workforce development and recommending these to the CLHO Board
- Reviewing key issues and research on the topic of public health workforce and providing recommendations to the CLHO Legislative Committee for potential policy solutions
- Determining the process and priorities for future iterations of the Workforce Report
- Reviewing and identifying solutions to billing issues that limit reimbursement rates for public health nurses
- Reviewing potential grants and approving/guiding CLHO's participation/pursuit of these funds
- Collaborating with academic/training partners to identify gaps for the future/current public health workforce
- Receiving updates on the activities of the Leadership Development Program, the Accreditation Workgroup, and other areas of work for CLHO related to workforce development (and providing recommendations/guidance where necessary)

**Proposed Composition of the Workforce Committee:** Like the Legislative Committee, participation in the Workforce Committee will depend on interest and capacity. LPHA administrators may sit on this committee or may appoint staff who have expertise or knowledge in workforce issues. An important discussion will be whether to include county staff outside of the health department (such as human resource officials, commissioners, etc.) and/or partners outside of county governments (academic institutions, OPHA, OPHI, OHA, etc.). CLHO will also strive for representation from counties of all sizes, levels of rurality, and structures (public vs. non-profit). Because this proposal includes oversight of the Leadership Development Program and other workforce-related programs, the Workforce Committee should include representatives from each of those groups.

