



March 16th, 2023

Meeting of the Coalition of Local Health Officials

Meeting Began: 11:50

Executive Members:

Present: Naomi Biggs, CLHO Chair, Polk; Jocelyn Warren, Past CLHO Chair, Lane; Carrie Brogoitti, Vice-Chair, Center for Human Development Union; Philip Mason-Joyner, Secretary/Treasurer, Clackamas; 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)

X	Baker – Meghan Chancey		Hood River - Trish Elliot	X	Multnomah – Jessica Guernsey
X	Benton – Sara Hartstein	X	Jackson - Jackson Baures	X	North Central PHD - Shellie Campbell
X	Clackamas - Philip Mason-Joyner	X	Jefferson - Mike Baker	X	Polk – Naomi Biggs
X	Clatsop – Jiancheng Huang	X	Josephine – Janet Fredrickson	X	Tillamook - Marlene Putnam
	Columbia – Jaime Aanensen	X	Klamath - Jennifer Little	X	Umatilla - Joseph Fiumara
X	Coos - Anthony Arton	X	Lake - Judy Clarke	X	Union - Carrie Brogoitti
	Crook – Katie Plumb	X	Lane - Jocelyn Warren	X	Washington – Marie Boman-Davis
X	Deschutes – Heather Kaisner	X	Lincoln - Florence Pourtal	X	Wheeler – Shelby Thompson
X	Douglas - Bob Dannenhoffer	X	Linn - Shane Sanderson	X	Yamhill - Lindsey Manfrin
	Gilliam – Dailene Wilson	X	Malheur - Sarah Poe		HO Caucus - Pat Luedtke
	Grant – Kimberly Lindsay	X	Marion – Katrina Griffith	X	CLEHS Caucus - Joseph Fiumara
X	Harney – Kelly Singhose	X	Morrow – Robin Canaday	X	PHAO - Lindsey Manfrin

Public Health Division: Danna Drum



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

Guests: Ryann Gleason

January 2023 Minutes: Mike Baker made a motion to approve the January 2023 minutes. Shellie Campbell seconded. All present in favor, motion passed.

Agenda Items

Appointments: No appointments.

CBO Funding Process Recommendations: Naomi Biggs introduced the topic.

Naomi Biggs: Thank for participating in the budget note process that Laura moderated. OHA has proposed a compromise: “Agreement for 2023-25 Public Health Modernization General Funds for Community-based Organizations” – Sarah sent this document out on March 8th, and Laura shared it again on March 10th. There were multiple opportunities to provide feedback both on the original budget note and on OHA’s proposal, at these workgroup meetings and via email. While the OHA proposal does not cover everything we asked, it covers some key areas (in writing):

1. Assurance that funding will be spread throughout the state.
2. LPHAs will be part of the decision-making process.
3. CBO and LPHA workplans will be shared with relevant partners.

Almost one year ago, we were at the CLHO Retreat in Hood River discussing how to reestablish trust and what that would look like. This is an important step forward in rebuilding that trust, so thank you to Danna, Cara, Cynthia, and Ashley for working with us in this. Since we’ve already had opportunities to discuss this, I would like to ask for a motion to move this OHA proposal forward.

Marie Boman-Davis: As a point of clarification, did the LGAC already accept this OHA proposal?



Sarah: Not the LGAC but the Association of Oregon Counties (AOC). This started in the Health and Human Services Subcommittee there and was going forward as a bill (HB 3587). Now that they have reviewed and accepted this OHA proposal, that bill is now dead and won't be moving forward.

Naomi Biggs: And to clarify further, AOC's bill was similar to CLHO's budget note. With this discussion, CLHO would be putting aside the budget note and accepting OHA's proposal.

Motion: Marie Boman-Davis made a motion. Katrina Griffith seconded. Two opposed (Jefferson and Umatilla). Two abstaining (Lane and Crook). Remaining present in favor, motion passed.

Legislative Committee Recommendations: Sarah Lochner, Anthony Arton, and Jennifer Little reviewed the recommendations to the Board from the Legislative Committee.

Sarah Lochner: HB 2925 is the companion bill to HB 2918, Racism as a Public Health Crisis bill. CLHO has voted to support HB 2918 which provided additional funding (~\$4 million) for the mobile health units. HB 2925 moves the deadline for this initiative back to allow more time. Right now, they have a final report due in November 2023 on the work of the workgroup, and this bill moves that back (November 2023 will be an interim report) and allows more time for the funding to go out and for the work to be completed. The Legislative Committee voted to support HB 2925 at a Priority 3, which is the same (9 votes in support).

Florence Pourtal: Is this at all related to the grant application we just received? And if so, why did it take so long to get the grant out and gives only three months to spend it? Second, the health provider shortage is severe, and while we think this is a good idea, Lincoln does not have enough staffing to support this. I am disappointed that this funding just came out and would like to know why.

Anthony Arton: I second that – we won't be able to apply for this with only two week to get an application in and only three months to spend the funds.

Sarah Lochner: My understanding is that OHA faced some challenges with hiring the internal position that would shepherd this work along, and so the workgroup only began meeting about six months ago. Once the workgroup agreed on the



parameters of the RFP, it needed to go through OHA's internal processes, which just take time especially with their shortage of contracts and fiscal staff.

Florence Pourtal: I'm wondering if a better solution is to go back to the Legislature and explain this rather than pass the problem onto the locals and organizations applying for the funding and setting us up for failure. I'm not happy with this at all.

Danna Drum: I don't believe the Public Health Division has been very involved in this work, so I don't have additional information beyond what Sarah shared.

Sarah Lochner: Because HB 2925 pushes the deadline back, there may be opportunities to pursue some creative funding solutions. For example, there might be ways to allow funding from this biennium to be carried over, so if you apply and are awarded and purchase your mobile unit in the next three months, perhaps remaining funds can be used going forward. I don't know for sure, but those are possibilities to explore.

Marie Boman-Davis: There may also be supply chain issues – Washington County has been on a waiting list for months to get a mobile unit. COVID has impacted production, so those who are considering this funding, you should look into if supply is available.

Florence Pourtal: It seems very similar to the BHRN funding, which was a fiasco for us, so I will not be supporting moving this forward.

Motion: The CLHO Legislative Committee has recommended that the CLHO Board support HB 2925 at a Priority 3. Jennifer Little seconded. Two opposed (Lincoln and Jefferson).

Joe Fiumara: Can we clarify what we are voting on?

Anthony Arton: Right, I think I lost what we were talking about. Isn't this bill something that will happen in the future? It's not the RFP that has already come out.

Sarah Lochner: We are voting on HB 2925 which extends the deadlines to complete the work within the Racism is a Public Health Crisis bill.



Anthony Arton: So, they are tied, but they are separate issues – is that right? So, what Florence and I have reservations about is the RFP that just came out, which is related, but this bill is not directly tied to that RFP.

Sarah Lochner: I will have to check with Liza at OHA about whether this bill will extend the timeline for grant recipients to use the funding. I can circle back on this.

Anthony Arton: Okay, because I am upset about the RFP that just came out, but I am still supportive of the overall concept and project. I would be interested in tabling this until we have more information and then doing an email vote.

Sarah Lochner: Yes, we can do that.

Marie Boman-Davis: Can I request that email votes be done via a link rather than an email chain?

Lindsey Manfrin: Yes, and that email votes not be a place for feedback. It should just be a no/yes/abstain because otherwise comments and feedback can make it confusing about what we are voting on.

Motion: Anthony Arton made a motion to table this issue. Bob Dannenhoffer seconded. 0 opposed, 0 abstain, all remaining present in favor.

HB 2431/SB 470: Medicaid Pre-Trial Coverage

Anthony Arton: These bills would provide OHP coverage to people who are in custody while awaiting trial. As of right now, people who are in custody awaiting trial have their OHP coverage canceled, which I think is unfair because they could be innocent. HB 2431 extends this coverage to adults in custody, and SB 470 extends this coverage to juveniles in custody. It is a bipartisan bill, and the Legislative Committee voted (all 9 present voted in favor) to support these two bills at a Priority 2 which includes providing our logo and providing written testimony.

Marlene Putnam: Does this coverage end at sentencing? And are there exceptions for people not sentenced to prison?



Lindsey Manfrin: My understanding is that you only lose your coverage while you are in custody, so those who are not sentenced to prison time would not necessarily have their coverage end at all.

Sarah Lochner: Right, my understanding is that people lose coverage when they are institutionalized, and those sentenced but not with a prison sentence would be able to keep their coverage open.

Marlene Putnam: Thank you – I've been keeping an eye on this since it came up about five years ago. Another big question at that time was how funding appropriated for providing health services in jail should be balanced with appropriations to Medicaid. I don't have an answer for that, and I'm just happy to see this moving forward.

Sarah Lochner: Right, and this is supported by AOC, and coverage for people in custody is a big priority of NACO (National Association of County Officials).

Jiancheng Huang: Another topic to discuss is that this time of incarceration may be a moment to provide substance use disorder treatment. I don't want to lose that opportunity.

Sarah Lochner: Right, I think that is an important piece, and we have a separate bill that the Legislative Committee will be considering regarding this treatment and coverage for people in custody.

Motion: The CLHO Legislative Committee has recommended that the CLHO Board support HB 2431 and SB 470 at a Priority 2. Lindsey Manfrin seconded. 0 opposed, 0 abstained, all present in favor, motion passed.

HB 2638: School Heating/Ventilating/Air Filtration

Jennifer Little: The bill directs district school boards to ensure that buildings regularly used by students have proper heating, air conditioning, and ventilation systems to provide for learning and safety. It also allows the State Board of Education to do rulemaking and requires compliance by January 1, 2029. The Legislative Committee voted unanimously to support this at a Priority 2 (logo and testimony). In discussing this with my school district, they were supportive of this and said that most of their building are already in compliance, but that may not be the case everywhere. But knowing my superintendent was supportive made me more confident in this bill.



Motion: The CLHO Legislative Committee has recommended that the CLHO Board support HB 2638 at a Priority 2. Katrina Griffith seconded. 0 opposed, 0 abstained, all present in favor, motion passed.

HB 3205: Bonus Pay

Sarah Lochner: I am linking the CLHO website which has a one-pager posted on the topic. This bill excludes hiring and retention bonuses from the definition of compensation under the pay equity law. This has strong bipartisan support and organizational support (see one-pager in meeting materials for logos). AOC has also voted to support this bill. This is in recognition that Oregon is losing employees to other states that don't have this pay equity law. So, there is wide support for the time being to remove those bonuses from the pay equity considerations. The Legislative Committee voted unanimously to support HB 3205 at Priority 2.

Shane Sanderson: What was the evaluation plan when the pay equity law was passed? We've had a couple of situations where we had an opportunity to hire from out-of-state, but they went on their merry way when they couldn't negotiate a higher pay with us. So, is the law working the way it was intended?

Sarah Lochner: I don't have answers or data for that, but it seems that many people believe that the pay equity law had many unintended consequences even if they still agree with the concept. As a note, we will have a webinar on pay equity as part of the Leadership Development Program in May, and it is with the folks at Family Forward who helped pass the law. Laura can send out information on that.

Anthony Arton: My understanding is that Oregon is the only state that has this law.

Florence Pourtal: Can we invite our human resources people to this webinar? Also, when bonuses were put out for recruiting the mental health workforce, this law was put on hiatus for a while, so we know that is a possibility, as well.

Sarah Lochner: Yes, that hiatus for the mental health workforce has expired, and this law would apply broadly to more than just the mental/behavioral health workforce.

Motion: The CLHO Legislative Committee has recommended that the CLHO Board support HB 3205 at a Priority 2. Katrina Griffith seconded. 0 opposed, 0 abstained, all present in favor, motion passed.



Legislative Session Updates:

Sarah Lochner: CLHO's priority bill, HB 2773 for Public Health Workforce Incentives, had the -2 amendment approved and has passed out of committee and is on its way to Ways and Means. It had one no-vote, but that is likely a vote we can sway with some relationship-building (probably based on some confusion about the bill). We had a -3 amendment prepared that would add the tribes into the bill and add an additional \$15 million – we heard from the tribes the day that our bill was scheduled for the vote. Once the tribes review, this amendment can be added during Ways and Means since it doesn't change any policy, and we have Rep Sanchez as an ally for this.

Marie Boman-Davis: Can you review the technical fixes that were part of the -2 amendment?

Sarah Lochner: Yes, the changes in the -2 amendment were:

- It put the funds into a subaccount of the Provider Incentive Fund rather than a standalone account
- Removed private donations as a funding option
- Specified that all local public health employees are eligible
- It removed any reference to hiring preferences but kept the language about who we aim to serve (including AI/AN, BIPOC, veterans, LGBTQ, people with disabilities and/or IDD, rural, and underserved populations)
- Removed the tax subsidies component because OHA does not deal with those
- Directs OHA to administer the fund in consultation with local public health authorities
- Corrected the definition of LPHAs and references the ORS 431.003
- Specified the types of internships eligible for supervision reimbursement
- Clarified that all the benefits in this bill are not subject to the pay equity law
- Specifies report-backs to the Legislature in November 2026 and November of 2028 (Rep. Nelson specified that he would like REALD and SOGI data as part of that report back, which we agree with).

Sarah Lochner: We structured this to be one-time funding that could be spent over multiple biennium. That brings us to the next proposal: I am hoping to propose that the Legislature move any unspent Modernization funds into our WF Incentive Package. One of the major reasons that there are unspent Modernizations funds is because of barriers to hiring, so this shows that we are being transparent about our struggles and are bringing a solution. There is no official mechanism to do that according to Legislative Fiscal Office – unspent funds are just returned to the General Fund - but that is where I come in



as an advocate to push for whatever leftover unspent Modernization funds there are be used to seed this workforce incentive fund.

Katie Plumb: Do I understand correctly that it's not just LPHA unspent funds? It's what is unspent by LPHAs and OHA?

Sarah Lochner: Correct, OHA would cover any of their overages with the unspent funds. LFO shared with us that OHA just returned ~\$100 million, so that would be considered money that the Legislature can use elsewhere.

Wendy Zieker: Is it possible to have these funds carried over? This is a good proposal, but I'm new to this and it seems like that would be the easier method.

Sarah Lochner: The short answer is no, funds cannot be carried over. Anything unspent is reverted to General Fund as the larger pot. However, we can advocate for ways these General Funds can be used, and this suggestion is recycling the funds for public health in a way that is helpful and solution-focused in a budget-constrained environment.

Naomi Biggs: I just want to clarify for everyone that we would be advocating for the abstract concept of this advocacy, not a mechanism.

Motion: Anthony Arton made a motion to support that CLHO advocate for unspent Modernization funds be used to fund the Workforce Incentives Package – HB 2773. Mike Baker seconded. 0 opposed, 0 abstentions, all remaining in favor, motion passed.

Sarah Lochner: Along the same lines, what we've been hearing from everyone (including the Speaker's office) is that this is a "cuts" budget because of the large kicker. Even though Oregon has collected \$700 million over current service level, it will still be tight because this will need to cover the upcoming Medicaid redeterminations and the Governor's homelessness priorities, and other mandatory items along with returning the kicker to taxpayers. With this in mind, our Modernization ask for \$286 million is unrealistic, so we are looking for the approval from the Board today to lower CLHO's ask to \$150 million (when the time is appropriate in consultation with CFM). This will show that we are being sensitive to the current reality and are flexible in our asks. It also is still a significant investment to LPHAs (an additional \$50.2 million), and OHA/PHAB has provided the menu of options for each funding level, and the \$150 million level will be a good one to showcase to the Legislature. We are asking for this approval now since the time to lower the ask may happen in-between now and the next CLHO Board meeting.



Laura Daily: For the breakdown (pg. 23):

https://www.oregon.gov/oha/PH/ABOUT/Documents/phab/Public%20Health%20Advisory%20Board%20meeting%20materials_January%2012%2c%202023.pdf

Marie Boman-Davis: I also want to flag that it's challenging to actually know the LPHA amount going to locals because the regional funding will likely be taken out of that. So, I just want to flag that it is challenging to calculate.

Naomi Biggs: Do we have a breakdown of the FTE that would come with each amount?

Laura Daily: We have the updated funding formula, so we can plug in the amount going to LPHAs and get an estimate of what each county would get, but the number of FTE that would get us is dependent on each county and the type of positions.

Sarah Lochner: The spreadsheets and documents that OHA provided does show the breakdown of the work you all would do at each level, but not the FTE.

Florence Pourtal: I'm looking at the document on the PHAB website. The \$150 million is what would go to all entities – is that correct?

Marie Boman-Davis: So, my suggestion for coming up with an estimate of what LPHAs would receive is to look at the Governor's budget which \$50 million total for Modernization including a carveout for reproductive health. In an email from OHA, the amount going to LPHAs was about \$16.9 million in that scenario, so you can apply the funding formula and figure out what each LPHA will receive. And then if we get \$100 million, double that amount, or \$150 and triple that amount.

Joe Fiumara: Referencing the conversation earlier at the Conference, the money that supports the regional projects would also come out of the LPHA portion, so it is hard to estimate what LPHAs would get until we know the amount going towards regional projects.

Danna Drum: And Sara shared this morning, the amount going to the regional projects has been fairly stable, and so that would be accounted for in the amount you are already getting. Unless PHAB were to say the amount going



Florence Pourtal: I might not be remembering the scope of work we identified at each funding level. My understanding at the time the JLT+ went through that, we were only looking at the work that LPHAs would do with the funding they would receive. So, are we going to be asked to do the work we identified at the \$150 million level when LPHAs are only receiving \$52 million?

Marie Boman-Davis: It is my understanding that we would be able to revise our scope of work once the amount of funding is known, through our Conference structure. Is that correct?

Florence Pourtal: That makes complete sense. I'm just concerned that we are going to the Legislature right now with this package and that we'll be held to this work when LPHAs are only receiving a third of the funding.

Marie Boman-Davis: There's a crosswalk in the PHAB documents that outlines what work each entity would do in each funding scenario, and I think that is something to hold onto as we are going to the Legislature. And I think our lobby team is managing those expectations around what amount of work can be done at each level.

Danna Drum: Florence, is your concern that since CLHO would be advocating for \$150 that they would be held to that even if Modernization only receives \$50?

Florence Pourtal: I think I muddled the waters. I agree with what Sarah said initially with lowering the ask. My question was different – we are going to the Legislature talking about \$150 million and the work we will do at that level, but LPHAs will only be receiving about \$50 million in that scenario. So will we be held to the \$150 level work, or the \$50?

Sarah Lochner: I think the PHAB documents lay out what each partner will be doing (LPHAs, Tribes, CBOs, OHA) based on the funding the whole system receives at different levels, so we won't be held to anything beyond that.

Motion: Bob Dannenhoffer made a motion to give our lobbying team wide discretion in the Modernization budget request. Katie seconded. 0 opposed, 0 abstained, all present in favor, motion passed.

National Public Health Week:



Sarah Lochner: National Public Health Week is April 3rd through April 9th, and we are planning a major advocacy push during this week, so I will pass it to the Stuart Collective to talk about the activities we are planning.

Melissa Walton Hendricks: There are four pieces of the strategy Stuart Collective has developed:

1. Legislator meetings between County Commissioners and County Health Administrators – you may be receiving requests from us soon to participate in these meetings, and please participate if you can because these personal meetings and connections are very important.
2. Place an Op-Ed that connects the Governor's/Legislators' priorities around homelessness and housing crisis to public health – we are hoping to work with either Multnomah or Lane County to place this Op-Ed.
3. Place a media pitch to support NPHW messaging.
4. Daily social media posts, some from NPHW designated themes and some custom posts – please feel free to repost and interact with these.

Jessica Guernsey: Do you have a written document on the NPHW plan? And is the Op-Ed what I have already been asked to do?

Melissa Walton Hendricks: We asked Multnomah previously for a Letter-to-the-Editor, which is separate from this proposed Op-Ed. With this Op-Ed, we are hoping to tie Public Health directly with homelessness priorities and how prevention and public health services tie into this. We plan to have a draft to Sarah and Laura this week, and then we will work together with the target counties to get that sent. We can also send out some of our written materials as we have them finalized.

Jessica Guernsey: I would like to see an outline as soon as possible because the merger of topics is a can of worms in the Portland area. There's a lot of hysteria around what public health's role is in homelessness, and it may not be a needle we can thread.

Melissa Walton Hendricks: Right, and that is something we can revise if the target counties don't think we can thread that needle.

Agenda Go-Back: HB 2773:



Marie Boman-Davis: I would like to go back to HB 2773 amendment really quickly. On line 21, it says “provide culturally-responsive health services” and that language could be exclusive to our foundational programs. So I would ask that we change that language to include “and programs” to make sure we are not limiting ourselves.

Sarah Lochner: Thank you, I have noted that and will check in with OHA on whether that change should happen or if “services” provides enough flexibility.

Washington DC Lobby Day Update:

Laura Daily: On March 1st, I was able to join NACCHO in Washington DC to advocate for public health. I met with staff from Representative Bonamici’s office, Senator Wyden’s office, and Senator Merkley’s office. NACCHO prepped us on three key asks:

1. Request that they visit a local public health department to see the on-the-ground work (you may receive a request from us at some point if they decide to follow up).
2. Sustained and increased flexible funding for local public health departments.
3. \$100 million appropriated to the Public Health Workforce Loan Repayment Program (which was passed in 2022 but not funded).

I was able to provide some great examples of what local public health can do with flexible funding because of the work you’ve shared with us through the Workforce Report, the recent workforce data check-in, and the Modernization reporting, so thank you for providing those.

Kaiser Permanente Grant:

Sarah Lochner: Jennifer Jordan from Kaiser reached out to me in February to ask what it would look like if Kaiser provided a grant to help support local public health. I called several of you to check in, and I floated the idea to Jennifer of a CLHO Workforce Liaison that can be out in the community helping you all recruiting, attending job fairs, and building the pipeline. The caveat is that it must focus on the Kaiser Permanente service areas. We pulled together a small group of people (Naomi, Katrina, Marie, Jessica, and Jackson) to discuss this, and with Executive Committee approval, we applied for \$250,000 over a maximum of 3 years (probably 2-2.5 depending on the salary we offer the WF Liaison) to pilot this idea in Multnomah, Marion, and Polk. We heard back from Kaiser, and we are moving onto the next phase of the application process.



No questions or comments.

Strategic Planning:

Sarah Lochner: At the last PHAO meeting, there was some discussion about strategic planning in September and whether that should be for the Conference or the Coalition. Given that, I wanted to review today the difference between these two entities (see meeting materials).

The Conference is our formal relationship with OHA to make decisions and advise on public health matters. The Coalition is the advocacy non-profit, which is where Laura and I spend 90-95% of our time (see mind map). We were approaching strategic planning thinking that it was only for Coalition to understand what is the most valuable work, what areas of work we should be pursuing, and what goals we have for the next 3-5 years. With so many changes and so many new Coalition members over the last few years, it's important to check in and make sure we are providing the right support. The Conference Committees are led by the co-chairs, so I don't know what there is to

Florence Pourtal: It makes a lot of sense for Laura and you to have direction and strategy for the Coalition. However, I think an elephant in the room is the relationship between LPHAs and OHA and how we rebuild the trust. Another thing to address is who we are as LPHA – the realities are different in metro/large counties and small/rural counties, but there should not be a competition or us-versus-them mentality. It seems like we are talking past each other, and I think if we were to begin strategic planning as we are right now, we would not get anywhere. I think we need to ensure that we have some level-setting and ensure we are speaking the same language. There have been some comments about certain parts of the state being racist that I think are inappropriate, and it has caused some tense relationships. So, I just want to say I think we need to have some level-setting and relationship-building before strategy planning or we will only scratch the surface, and we don't need to scratch the surface anymore – we need to go deeper and make progress.

Sarah Lochner: Yes, I've had a few conversations with strategic planners, and this, addressing the elephants, will be a part of the process and pre-work.



Jennifer: I agree with Florence, and I think that some planning for the Conference would also be helpful speaking as a co-chair of one of the committees. As we are talking about “what does a work plan look like” and such, it would be helpful to have some strategy around that.

Sarah Lochner: I would need a lot more information on what that would look like, so please connect with me so I can pick your brain if you want strategic planning for the Conference.

Bob Dannenhoffer: I agree with Florence – last night we had a small group meeting with Dean and Rachael, and that went a long way in rebuilding some of that relationship. So I would encourage

Jessica Guernsey: Thank you for that, Bob – that’s great to hear. I don’t think there is an elephant in the room so much as there are different needs, and it seems like we are going in circles on some of these issues. I would be a little more provocative and suggest that we look at our structure and think about different ways of approaching this that meets everyone’s needs.

Florence Pourtal: I agree, Jessica, but I think there is still an elephant in the room. I do think the realities of rural health practice and urban practice are different, and having some sub groups to get at this and share back could be helpful. I also hope that there is more than one day for this, and I want there to be a space where people can really be heard and egos are aside and everyone’s reality and experience is just that, and it doesn’t need to apply to everyone in the group.

Naomi Biggs: Sarah, do you think you need a separate work group for this planning since we can’t dive deep into this today? Both for approaching the strategic planning and for the pre-work that needs to go into it?

Sarah Lochner: Possibly, but we also have several Executive Committee meetings for budget discussions, and we could begin discussing it there and decide if we need a separate workgroup.

Marie Boman-Davis: I would suggest that we look at the Coalition, where Laura and Sarah spend most of their time, and look at the guiding documents that frame the work of this organization before we work on the strategic plan. Those foundational documents could be a place to start and update rather than building strategic planning on documents that may not be working for us. The Conference is bigger and separate because it is connected to PHAB and OHPB, and the Coalition is a separate



organization that is serving Oregon public health in a unique way, and to Jessica's point, we should look at that structure and how it is serving everyone.

Florence Pourtal: Going back to Jennifer's comment about getting strategic planning support for the Conference – I agree that this is needed as a co-chair of S&I for many years, but I think OHA has to be involved. We could approach our work in the committees more strategically where we look at the PEs and revisions and work they need.

Sarah Lochner: That makes a lot of sense to me, and I wonder if that is something that OHA should lead rather than CLHO since it is the formal relationship. Does that make sense?

Danna Drum: I think that makes sense. I think we are experiencing a lot of requests for what OHA should be doing and when it should have been done, and we don't have the capacity to do it all at once. But I think this discussion of strategy should be done together, and some of it will be dependent on the work PHAB does as they restructure and think about their goals over the summer, so a lot of this won't happen right on July 1.

Sarah Lochner: So, what I'm hearing is that we move forward with the Coalition strategic planning, and then we work with OHA on a different day to map out what our strategy for the Conference is after PHAB does their work.

Danna Drum: I think some things could start prior to PHAB's work, but we would need PHAB's input on some of the items.

ORPRN ECHO: Jocelyn Warren will follow-up with people via email regarding this topic in the interest of time.

National Conferences: Laura Daily will follow-up with everyone via email regarding this topic in the interest of time.

Meeting adjourned at 1:33pm.