

## August 17th, 2023 Meeting of the Conference of Local Health Officials

Minutes recorded by Laura Daily (<u>video recording available upon request</u>) Reviewed by Secretary Philip-Mason-Joyner (8/28/2023) Approved by Board on September 21<sup>st</sup>, 2023

Chair Naomi Biggs called meeting to order at 09:30 AM PST and requested roll call. Vice-Chair Carrie Brogoitti conducted roll call:

## **Members Present (x if present):**

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

<sup>\*</sup>Member of the Executive Committee

**Public Health Division Staff Present:** Danna Drum, Cara Biddlecom, Andrew Epstein, Jamie Coleman, Nora Zimmerman, Collette Young, Cessa Karson, Tim Noe, Kirsten Aird, Sara Beaudrault, Dean Sidelinger, Rose Harding, Jennifer Woodward, Karen Rangan

Coalition of Local Health Officials Staff Present: Laura Daily, Senior Program Manager



Guests Present: Jessica Winegar (Grant), Bailey Burkhalter (Jackson, CD Co-Chair), Todd Noble (Linn)

Quorum established. Naomi reviewed the agenda and requested a motion to approve the July 2023 minutes.

**Motion:** Bob Dannenhoffer moved to approve the July 2023 minutes. Katie Plumb seconded the motion. 0 nays, 1 abstention (Marie, Washington), all remaining present in favor, motion passed.

**Appointments:** Naomi appointed Sarah Rea (Morrow) and Michael Derossett (Josephine) to the CD Committee.

**JLT Recap:** Naomi reviewed the JLT meeting that took place this morning. JLT will be providing better support to Conference Committees around funding formula discussions. JLT also discussed the Conference Bylaws, which will be discussed later in this meeting agenda.

PE 51-03 ARPA Workforce Funds: Andrew Epstein reviewed the proposed distribution of the remaining American Rescue Plan Act (ARPA) funds (about \$775,000). These funds, along with any remaining funds LPHAs currently have, need to be spent by June 30<sup>th</sup>, 2024. Proposed allocations from these unspent funds and total LPHA allotment from these new funds and initial funds combined are included in the meeting materials. Proposed allocations would go through the Public Health Modernization Funding Formula with the floor amount per county adjusted to \$7,500.

Discussion/Questions: Shane asked if there is a process where LPHAs can review their budgets and determine if they want the funding or not (if budgets are finished and amount is small, it may not be worthwhile) so it can redispersed. Andrew stated there was not set process or time period, but an LPHA can just let OHA know.

**Motion:** Florence made a motion to approve distribution of the ARPA funds via PE 51-03 through the funding formula as presented. Shane seconded. 0 nays, 0 abstentions, all remaining present in favor, motion passed.

**PE 43 CDC Bridge Access Program (COVID-19) Funding**: Bailey reviewed that the CDC Bridge Access program is to ensure that underinsured people can continue to access the COVID-19 vaccines without expense. CD Committee reviewed this and voted to recommend this to the Board. Funding formula and LPHA amounts is meeting materials. Bob added that the CD Committee was uncertain about using birth rate in a funding formula for adult vaccines but moved it through due to the urgency.



Discussion/Questions: Discussion about the rationale behind using birth rate for the formula – birth rate is what we've historically used for immunization funding formulas, and this funding was a surprise and had a tight turnaround, so there was no time to come up with something new. OHA does intend to look at the immunization funding formula with CLHO to come up with something better. Funding is for August 1<sup>st</sup> 2023 through December 31<sup>st</sup> 2024 and is for COVID-10 adult vaccine access in the President's budget for FY 23 and 24. Joe flagged that the President's budget has not yet been passed by Congress.

**Motion**: The CD Committee has brought a motion to approve this funding formula through PE 43 for the CDC Bridge Access Program. Jennifer seconded. 0 nays, 0 abstentions, all remaining present in favor, motion passed.

**PE 62 Overdose Prevention Funding Update:** Tim Noe reviewed that (as previously discussed) this funding was eliminated. OHA is working internally to continue funding this important work – the current solution is to include it in the State Block Grant through SAMHSA since there is a 20% set-aside for prevention. OHA will be sending out amendments soon and will be working with HPP to add this to the PE.

Discussion/Questions: This funding is only a temporary fix for the \$1 million gap for FY 24, so only LPHAs currently funded will receive funding, and OHA will search for other funding sources after that. This is not an expansion and does not go past FY 2024. Sarah Poe requested that OHA consider expanding this funding statewide since 10 counties in need of and overdose prevention coordinator. Tim added that OHA is looking for other funding sources and that the Coalition of Local Health Officials may be able to secure funding through the Opioid Settlement Board (though OHA will not be able to assist with this since they oversee this board and cannot influence their decisions).

**2023-25 Public Health Modernization Policy Option Package:** Cara and Sara provided an overview of OHA's Work Plan and Implementation of the Public Health Modernization investment for 2023-25 (presentation slides in meeting materials). Highlights include:

- Two new key deliverables: Statewide Health Equity Plan and the Statewide Public Health Workforce Development Plan
- OHA is developing position descriptions is waiting for these to be classified and approved (then will begin recruiting).
- OHA is continuing:
  - o Evaluation of the impact of the Modernization investments and reporting to the Legislature
  - Continuing the State Health Improvement Plan
  - Continuing and expanding support for Regional Epidemiologists
  - o Other work such as applying for PH Accreditation, supporting the PHAB, and quality improvement



OHA is also building up reproductive health infrastructure and sustainability investments.

Discussion/Questions: Suggestion to have the OHA Regional Epis attend the Climate and Health Community of Practice – Collette can follow up on that. Naomi suggested we move discussion about support of LPHA workplans for Modernization to the Friday LPHA Administrator call – Danna stated we may need to prioritize topics for these meeting. Regarding the Healthy Homes and Schools program – OHA has been able to hire a manager for this program to work with schools and other state agencies around health environments. Andrew is also planning some learning opportunities as LPHAs develop their workplans.

**Vital Records Workgroup:** Collette Young, Jennifer Woodward, and Karen Rangan reviewed the upcoming vital records workgroup. HB 2410 from the 2023 Legislative Session established a workgroup to review Oregon's vital records system with a report due January 1<sup>st</sup> 2025. The workgroup will include about 15 seats, and OHA is asking about 4-5 people from CLHO to participate by September 5th.

Discussion/Questions: The Coalition of Local Health Officials reached out to LPHAs last month to gather names and received interest from much more about 5 people. This outreach was premature because OHA and the Coalition had not discussed the structure of the workgroup, so OHA is requesting CLHO select 4-5 people from this list of volunteers. These 4-5 people should represent a wide array of experiences, sizes, and geographies, and should be people from counties that have vital records within the public health. The meetings will be public, and there will be other ways to participate.

**Conference Bylaws Update:** Naomi and Danna provided an overview on the update to the Conference Bylaws. JLT put together a small group to review the Bylaws. This group has been aligning them with statute and met with Shannon O'Fallon with DOJ to ensure this. The plan is to develop a separate MOU/MOA to discuss the topics and expectations for how items are brought to CLHO – these documents can be updated more flexibility. Bylaws should remain operational and aligned with statutory authority.

No discussion or questions.

**Conference Annual Meeting in October:** Laura reviewed the Conference holds its annual meeting in October. At this meeting, the six Conference Committees will provide reports on their work over the past year, upcoming work, and gaps in representation. Elections also occur during the annual meeting on odd-numbered years. The bylaws require that the Conference identify a nominating committee (must be at least three people) to identify candidates.



Discussion/Questions: Bob, Florence, and Jennifer volunteered for the nominating committee.

**PHAB Strategic Data Plan:** Rose Harding and Dean Sidelinger reviewed the recommendations from the PHAB Strategic Data Plan Committee – categories include data justice, data equity, and community engagement (<u>summary available in meeting materials</u>). This framework is broad to cover all areas of the Public Health Division and will guide the committee's work as they approach transforming Oregon's public health data systems and data collection methods.

Discussion/Questions: Question about what data sources this committee considered outside of BRFSS in developing this framework. Dean discussed that BRFSS was a start but with acknowledgment that a phone survey is not ideal and that the goal is to move towards OHA's Survey Modernization efforts to have community-led data. OHA is working on making technical assistance available to all partners across the public health system through the CDC Infrastructure grant.

**PHAB Modernization Funding Workgroup:** Naomi and Cara reviewed that this group brings LPHAs and CBOs together to address the inequities in distribution of funds. Discussions have included: what does it mean to be "local," how to ensure better coordination and collaboration between funded CBOs and LPHAs, using the Modernization funding formula as a benchmark for distribution, and how to have an application review and selection process that involves LPHAs.

**Opioid Settlement Prevention, Treatment, and Recovery Board:** Carrie reviewed that the Board has continued to receive panels to gather information and recently had a process review of how the Board is working. Carrie suggested to staff to host a public health panel and will follow-up on that.

Discussion/Questions: Naomi asked if OSPTR is a good place to advocate for the funding to fill the PH overdose prevention gap. Carrie said that could be an option though the Board has not established a set way to review these decisions. Lindsey asked if the Board will just be making one-off funding decisions or if the goal is to develop a methodology for this funding. Carrie believes the goal is to have a methodology – so far, the Board granted an emergency request for the clearing house and to support some legislatively-mandated items. Carrie believes that PH should have a strategy for how to ask for funding. Danna stated that this will need to be a conversation in the Coalition because OHA oversees OSPTR – OHA can provide data to assist with an LPHA request, but they cannot influence OSPTR decisions. Florence added that this could still be an opportunity to have a system-wide strategy for opioid prevention funding, so we aren't continually filling gaps and never expanding work. Naomi also added that this can be



an avenue for filling gaps that LPHAs can pursue separately but that we don't want to shut down other avenues for funding PE 62.

**Meeting Adjourned at 11:28 AM**