



## July 20<sup>th</sup>, 2023, Meeting of the Conference of Local Health Officials

Minutes recorded by Laura Daily ([video recording available upon request](#))

Approved on August 17<sup>th</sup>, 2023

Chair Naomi Biggs called meeting to order at 09:32 AM PST and requested roll call. Vice-Chair Carrie Brogoitti started roll call – Laura Daily took over due to microphone issues:

### Members Present (x if present):

|   |                                  |   |                               |   |                                      |
|---|----------------------------------|---|-------------------------------|---|--------------------------------------|
| X | Baker – Meghan Chancey           | X | 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*                  |
|   | Clatsop – Jiancheng Huang        | X | Josephine - Janet Fredrickson |   | Tillamook - Marlene Putnam           |
| X | Columbia – Jaime Aanensen        | X | Klamath - Jennifer Little     | X | Umatilla - Joseph Fiumara            |
| X | Coos - Anthony Arton             | X | Lake - Judy Clarke            | X | Union - Carrie Brogoitti*            |
| X | Crook – Katie Plumb*             | X | Lane - Jocelyn Warren*        | X | Washington – Folu Adeniyi            |
| X | Deschutes – Heather Kaisner      | X | Lincoln - Florence Pourtal    | X | Wheeler - Shelby Thompson            |
| X | Douglas - Bob Dannenhoffer       | X | Linn – Todd Noble             | X | Yamhill – Bill Michielsen            |
| X | Gilliam – DaiLene Wilson         | X | Malheur - Sarah Poe           |   | HO Caucus - Pat Luedtke*             |
| X | Grant – Trey Thompson            | X | Marion – Wendy Zieker         | X | CLEHS Caucus - Joseph Fiumara*       |
| X | Harney – Kelly Singhose          |   | Morrow – Robin Canaday        |   | PHAO - Lindsey Manfrin*              |

\*Member of the Executive Committee

**Public Health Division Staff Present:** Cara Biddlecom, Tim Noe, Andrew Epstein, Sara Beaudrault, Jamie Coleman, Erica Sandoval, Cessa Karson

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



**Guests Present:** Jessica Winegar (Grant); Bailey Burkhalter (Jackson, CD Co-Chair), Erika Zoller (Clackamas, A2CPS Co-Chair)

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

**Motion:** Trish moved to approve the June 2023 minutes. Jocelyn seconded the motion. 0 nays, Mike (Jefferson) abstained, all remaining present in favor, motion passed.

**Appointments:** No appointments.

**JLT Recap:** Naomi provided an overview of the earlier Joint Leadership Team meeting. Topics included concerns and next steps around medical examiner changes, PE 01 HIV Prevention Funds, Legislative updates, and an update on the work of the Conference Bylaws workgroup.

**PHAB Modernization Funding Workgroup:** Naomi reviewed that this workgroup met for a fifth time on July 18<sup>th</sup> and invited members of this workgroup to provide their insights. Mike, Jackson, and Shellie reviewed that there are discussions around how to define local, whether the Modernization funding formula for LPHAs could be used for this work, confusion about which CBOs are being funded going forward, and concern by the statement that CBOs might expand into MCH and home-visiting. Cara added that OHA will be bringing the workplan template to the next meeting to get at the specifics of alignment.

*Discussion/Questions:* This workgroup is focused on the additional Public Health Modernization funds for the 2023-25 biennium. It does not address the funds from the BM 108 tobacco tax from the last biennium. Total amount going to CBOs from all sources in the next biennium is unknown – Cara will find out that information.

**Ambulance Service Districts:** Cara reviewed that the Public Health Modernization Manual discusses LPHAs' responsibility to ensure oversight of ambulance service districts. Cara clarified that this is not a requirement OHA will hold LPHAs to since it is a statutory requirements of county governments in general.

*Discussion/Questions:* Members expressed gratitude for the information since they have been met with resistance when they have tried to approach their county leadership about



**School-Based Health Center Mental Health Expansion Grant (SBHC MHEG):** Mikah Rotman and Kate O'Donnell provided an overview of this grant. [Presentation and materials are available in the meeting materials](#). Funding for this was going through a bill that died during session due to the walkout, but it may come back in the short session. The program has submitted 2023-2025 PE/GA amendments with MHEG funding at 2021-2023 levels as placeholder. The next steps are to amend award amounts if the formula is approved by CLHO and to continue to assess for opportunities to increase overall MHEG budget. Erika added that the A2CPS voted electronically - 13 approved, 6 did not vote, and two administrators did vote.

*Discussion/Questions:* The counties that do not have a SBHC are also some of the largest geographically which means more transportation barriers and more need for SBHCs. These counties also frequently have higher rates of children on OHP, but enrollment level requirements for establishing a SBHC keep these counties from being able to establish one even when the will is there. Kate offered that OHA will be doing listening sessions to help them understand how to expand and invited the counties without SBHCs to participate. The unit is also piloting other models, including mobile units and telehealth and would welcome thoughts on how to do these equitably.

**Motion:** A2CPS Committee has made a motion and a second to approve the funding proposal for the SBHC MHEG. 0 nays, 0 abstentions, all remaining present in favor, motion passed.

**Proposal to Dissolve the AOPHNS Caucus:** Laura reviewed the [proposal in the meeting materials](#) to dissolve the Public Health Supervisors Caucus (previously the Association of Oregon Public Health Nursing Supervisors, AOPHNS, Caucus).

**Motion:** Bob made a motion to dissolve the Public Health Supervisors Caucus. Florence seconded. 0 nays, 0 abstentions, all remaining present in favor, motion passed.

**Program Element 62 and 70: Overdose Prevention:** Courtney Fultineer (Injury & Violence Prevention) described the changes to PE 62 and PE 70 approved by the HPP Committee ([track-changes versions available in the meeting materials](#)). The difference between 62 and 70 is that 70 is written for Douglas Public Health Network with "LPHA" changed to "grantee." HPP Committee voted in favor of these changes with 18 votes in favor, no abstentions or opposing.

*Discussion/Questions:* HPP changed the term from "stakeholders" to "interest groups" but the intent is simply to give LPHAs the flexibility to work with all partners. Jennifer added that HPP changed it because "stakeholders" is in the list of non-preferred words in OHA's guidelines. Group discussed and agreed to change it to "partners and collaborators."



“Harm reduction” was also described in more detail to give LPHAs flexibility to adapt methods to local context when harm reduction is not well-received in their counties. Regarding the language that LPHAs complete at least 75% of activities or be ineligible for the funds, this is standard in OHA documents, and HPP added language that OHA will work with LPHAs to adapt workplans as necessary to show that this is a collaborative effort. Florence suggested that we add this caveat to all PEs to demonstrate that collaborative relationship even further. Andrew and Jamie will work with OHA to add this to PEs across programs.

**Motion:** Jennifer moved to approve the changes to PE 62 and 70 changes from HPP and the amended language or “partners and collaborators.” Philip seconded. 0 nays, Sarah (Malheur) abstained, all remaining present in favor, motion passed.

**Overdose Prevention Funding Update:** Tim Noe reviewed that OHA is still looking for a way to cover the funding gap for overdose prevention for LPHAs. If no resolution is found by mid-August, OHA may have a way to provide bridge funding until a longer-term source is identified (same level as FY 23 funding). Cara added that OHA leadership supports the overdose prevention work going forward – the only pieces left in question are the technical/how pieces.

**Communicating Funding Updates:** Andrew Epstein reviewed that OHA would like feedback on how LPHAs would like to receive communication on funding changes (timeline, information to LPHA administrators and staff at the same time or not, etc.).

*Discussion/Questions:* Administrators generally prefer to get the information first because they can bring it to the appropriate staff in the right context, so staff are not stressed out (especially when funding is directly tied to staffing). Some administrators would prefer phone calls from PH Systems Consultants rather than emails. Early communication even in uncertainty is appreciated because then LPHAs can plan. LPHAs would also like to be informed when a funding source is up for renewal (as is the case with grant renewal deadlines). Andrew thanked everyone for the info and reiterated that LPHAs should reach out to him and Danna if information is not flowing correctly.

**Program Element 51: Public Health Modernization:** Andrew Epstein reviewed that the Legislature awarded \$50 million additional to Modernization. This works out to an additional \$16.9 million to LPHAs for a total of \$50.4 million to LPHAs. Because this amount is over \$40 million, the new Modernization formula kicks in ([see meeting materials](#)) – this new investment results in a larger amount for all LPHAs (but significantly more for smaller health departments because of the increased floor). Andrew will be sending out additional information and criteria for workplans. Changes to PE 51 were approved last month, and S&I will be meeting next week to discuss the workplan template and other helpful tools. For PE 51 -



02 Regional Funds, projects/positions are remaining the same per recommendation of S&I Committee (no new projects). One regional project is not continuing, so there may be additional funds for projects that are continuing. Budgets for PE 51-02 are due the same time as the budgets/workplans for PE 51-01 (to be submitted by fiscal agent). For PE 51-03 ARPA/workforce funds, those funds need to be spend by June 30<sup>th</sup>, 2024. LPHAs previously submitted budgets and workplans for this – if budgets are not changing by more than 25%, LPHAs do not need to submit a new budget. PE 51-05 CDC Infrastructure funds do not require a budget/workplan at this time – OHA has requested information on FTE and types of positions hired with these funds per CDC requirements, so thank you to all LPHAs who reach out.

*Discussion/Questions:* PE 51-05 does have guidance on the [OHA Modernization website](#) (will be updated in the next month). The table in this document includes PE 51-01, 02, 03, and 05 (04 was used for a specific event). OHA is working on some revisions, but this provides guidelines for allowable costs and such. OHA and S&I will also discuss the best methods for submitting workplans and sharing out data (tools like Smartsheet and Survey Monkey have had mixed results. To clarify, documents on CLHO website are for PE 51-01 only, not all PE 51. Members discussed the amount of funding going to NCHPD – because they cover two counties, they receive two base amounts which is something that CLHO decided to provide NCHPD. Bob added that PHAB debated the funding formula change, but the goal was to provide a base amount that would allow each county to hire at least one FTE. Florence offered that the context is very different now with the amount of fundings we are receiving, and it may be necessary to reconsider that approach. Mike, Jessica, and Shellie discussed that the work still must be done in two counties and that it is warranted to provide the two base amounts. Sara Beaudrault added that the next time this decision will be up for discussion will be in January 2024 when PHAB begin discussing the funding formula again.

**Opioid Settlement Prevention, Treatment, and Response Board:** Carrie provided an update on the OSPTR Board. At a previous PHAO meeting, CLHO members discussed suggesting a public health panel to the Board. Carrie has suggested it to the Board staff, and they will likely reach out to organize that. Carrie would like to have a group of individuals (state, local, health officer, local overdose prevention staff, etc.) identified for this and would like to discuss it at the next PHAO meeting.

**Public Health Advisory Board:** Sara Beaudrault reviewed that PHAB had an in-person retreat last week. They discussed some of the key accomplishments over the last two years, the connection to the Oregon Health Policy Board, and the role that PHAB members want to have in the system-wide health equity plan (which they are thinking of as more of a framework) and the system-wide public health workforce development plan.

**Meeting Adjourned at 11:23 AM**