



Conference of Local Health Officials

CLHO Health Promotion & Prevention Committee

Meeting Minutes

April 3, 2025

1:00 – 2:00 PM

Zoom Meeting

1. Overdose Mapping Tool – Overview and Feedback

- A new interactive overdose map has been released as a soft launch and became live in March. A finalized version is expected by mid-May.
- Features of the map include:
 - All Oregon counties are listed and arranged by quintile based on overdose data.
 - Emergency department locations are shown within each county.
 - Hovering over a county reveals overall and monthly overdose counts.
 - Users can select by month and year, but not specific dates, to protect individual privacy.
 - Census tracts can be overlaid to view EMS response data:
 - A count of 1–5 overdose events appears as a grouped category.
 - Tracts with more than 5 events will display the exact number.
 - EMS data is mapped using longitude and latitude, not ZIP codes. This reflects where a response occurred—not necessarily where the individual lives or whether they reside in Oregon.
- The map helps address gaps left by OD Map, which relies on law enforcement data that is less consistent and not city-wide.
- There has been a reduction in syringe exchange activity, but an increase in Naloxone distribution. The map helps identify areas with increased overdose activity.
- Demographic data such as age or race is not currently available but may be added in future phases. The Essence team is analyzing Jackson County data more deeply.
- This map is not being shared with the media yet. Feedback is being gathered from smaller working groups.

2. Tobacco Cessation – Challenges and Opportunities



A. Behavioral Health Integration & Billing

- There is a request for billing codes to help behavioral health providers deliver and bill for tobacco cessation counseling.
- Providers need support understanding how to deliver and document cessation services effectively.

B. Cessation in Recovery Contexts

- A staff member participated in the Big Trail project, but enthusiasm was limited to CEOs, with frontline staff less engaged.
- There is interest in data and evidence regarding:
 - Mortality rates for individuals in early recovery.
 - Comparative outcomes of quitting tobacco versus alcohol.
 - Information to support the message that quitting tobacco is possible and beneficial.

C. Cross-County Learning and Collaboration

- There is interest in learning from other counties' cessation efforts to share with staff and build a collaboration network at the manager level.

3. Quit Line – Effectiveness, Access, and Equity

A. Referral Challenges

- Mental health departments have raised concerns about referring patients to the Quit Line:
 - Medical directors question its effectiveness.
 - Clients often do not answer calls from unknown numbers, and no voicemails are left.
 - Providers don't understand the follow-up process and want clearer information on how and why the process works.

B. Equity and Cultural Sensitivity



- An assessment in Multnomah County found that Quit Line services may increase smoking in some cultural groups due to mismatched approaches.
- There is a request for more culturally specific cessation strategies to support diverse communities effectively.

C. Youth and Community Connections

- There is a need to improve access to Nicotine Replacement Therapy and expand cessation services for adolescents.
 - Practitioners are looking for community-based partners to help bridge gaps in care and outreach.
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4. Community-Based & Clinical Engagement

- Providers note difficulty in motivating individuals to engage in cessation programs.
 - Outreach efforts to treatment facilities and community corrections have not been successful. Tobacco cessation remains a low priority compared to other health and social issues.
 - One community-based organization is currently offering virtual and in-person cessation classes, which may be a useful model to scale.
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5. Mental Health Considerations in Cessation

- Psychiatric nurses have been identified as unexpected cessation advocates due to their ability to explain how smoking interferes with medications.
 - Individuals with chronic mental health conditions often need more time and support to quit successfully.
 - Involving more therapists and behavioral health providers in cessation efforts may be helpful.
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Next Steps & Action Items

- Share billing code resources and provide training support for providers.
- Gather and share Quit Line data, including success rates and follow-up best practices.
- Identify and highlight county-level cessation strategies to support peer learning.
- Develop or identify culturally specific cessation tools.
- Explore strategies to increase Quit Line engagement, such as text-based follow-up or recognizable caller IDs.
- Continue feedback loops on the overdose mapping tool as it moves toward final release in May.

TPEP Funding & Budget Updates

- **Funding Decrease:** TPEP funding will decrease from 2023–2025 to 2025–2027, which reflects progress from Policy 108 and successful local tobacco prevention efforts.
- **One-Time Carryover:** The 2021–2023 funds were carried over into 2023–2025, making the 2025–2027 budget appear significantly lower.
- **System-Wide Impact:** The funding reduction will affect county TPEP programs, public health equity grants, tribal programs, and other local initiatives.
- **Equitable Reductions:** The goal is to apply funding reductions evenly across programs.
- **Support to Counties:** The state TPEP team is actively engaging with counties to ensure support and alignment with workplan priorities.
- **Funding Limitations:** While there's intent to fund at the highest levels possible, not all requested funding levels can be met. The focus remains on covering key workplan activities.

Budget Communication & Timeline

- **Urgency:** Official communications about funding are expected around **April 3–4, 2025** to meet tight budget processing deadlines.



- **Workplan Review:** Continued discussions will be held to align resources with workplan needs. Programs are encouraged to reach out for clarification or to highlight missing elements.
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Federal Regulatory Updates

- **FDA & Vaping Products:** The Supreme Court upheld the FDA's authority to regulate flavored vaping, but marketing-related decisions are still pending in the 5th Circuit Court. Future regulatory efforts remain uncertain.
 - **OHA to Provide Updates:** More information will be brought forward at the May meeting.
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ADPEP Funding

- **Clarification:** Despite confusion, ADPEP programs will continue to be funded as per the approved 2025–2027 budgets.
 - **Base Formula Return:** Funding will revert to the base funding formula for the next biennium, barring any budget changes.
 - **State Infrastructure:** Ongoing analysis of how changes to state infrastructure may impact programs.
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Legislation & Policy

- **Addiction Primary Prevention Bill:** Scheduled for **April 9 or 16**. Programs are encouraged to submit **letters of support as private citizens** for faster turnaround.
- **Tobacco Flavor Ban Update:**
 - Full ban lacks enough votes.
 - Bill to be amended to restrict flavored tobacco sales to ~235 state-sanctioned stores.
 - Counties can enact their own bans locally.
- **OLCC Amendment (SB 2282):**
 - Proposes annual minor decoy inspections at permitted stores.



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- Mandates clerk training and fines for underage sales.
- **Work Session Scheduled:** April 8, 2025. Language and amendments to be shared with cochairs.
- **Additional Considerations:**
 - Product placement regulations were discussed.
 - Flavored **cannabis** products may still be sold in cannabis stores, unlike flavored tobacco.
 - Clarification may be needed on **self-service product rules**.