



Conference of Local Health Officials

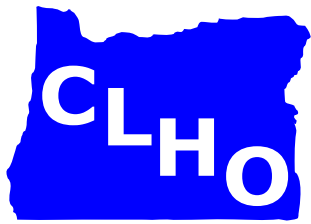
## CLHO Prevention and Health Promotion Committee Agenda & Minutes

February 1, 2024

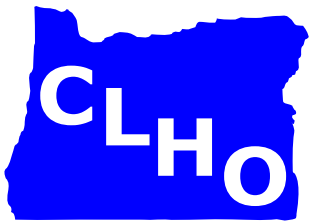
1:00 –2:00 PM

ZoomGov Meeting

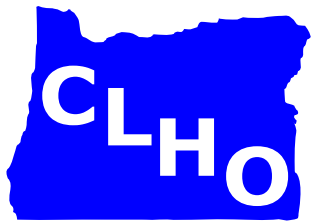
Agenda Item	Detail	Action Item	Responsible Party
Welcome, Introductions (as needed) and roll call	Quorum is 50% +1 of committee membership	Roll Call is attached.	Elisabeth Maxwell & Jennifer Little
Review of minutes	Review	The January minutes were approved.	Elisabeth & Hannah
Fentanyl Toolkit Discussion for Schools	Discussion	<p>Molly Haynes and Brylle Digman presented a discussion for LPHA's Input on the Fentanyl Toolkit for Schools. The fifteen minutes will not be enough time to gather feedback from everyone, so committee members can email or set up time to provide additional feedback. Feedback will be taken for the next month.</p> <p>OHA and ODE decided to update the toolkit after the passage of SB 238. The target audience is school administrators, teachers, and other school staff. The emphasis of the toolkit is education and awareness and school preparation and response.</p> <p>Sarah wanted to make sure the kit provided tips for how parents discuss this with their children. What do parents and school staff look for as children move towards experimentation and addiction? Molly said they are hoping to have resources linked in the report that will allow updates in the future.</p> <p>Susan suggested that the introduction to the toolkit point out that the handouts and presentations alone are not enough to satisfy a requirement. The effort must include larger roles and elements like interaction with parents and legislation. Public health should partner with the schools to disseminate information and training.</p>	Molly Haynes & Brylle Digman



		<p>Jill recommended linking the schools back to the ODE and the state school standards website.</p> <p>Hannah would like to see the OHA grantee list for the BHRN (Behavioral Health Resource Network) that provides youth services for substance use. Belinda said that middle and high school students are receiving a counterfeit pill training through Clear Alliance. It includes “Song for Charlie” and “One Pill Can Kill.” High schoolers are also receiving the Opioid Rescue Kit Medication training. After completing the training, students can pick up Narcan at the health or prevention departments.</p> <p>The possibility of having an audio format for busy parents was recommended by Jamie. Brylle will research the possibility of this resource. Concrete tips for parents and adults that incorporate practical ideas was suggested by Lindsey. These would include ideas like locking up certain prescriptions and throwing away ones that are no longer used.</p> <p>Molly said that the toolkit will not be disseminated for several months, so there is plenty of time to get feedback to her and Brylle. Please contact them by email at: <a href="mailto:molly.haynes@oha.oregon.gov">molly.haynes@oha.oregon.gov</a> and <a href="mailto:brylle.digman@odhsoha.oregon.gov">brylle.digman@odhsoha.oregon.gov</a> You can also schedule time to meet with them if a more in depth discussion is needed.</p> <p><a href="#">Fentanyl and Opioid Response Toolkit for Schools”</a></p>	
OHA Communications Guidance for Overdose Reporting	Discussion	<p>Courtney presented part two on the communications guidance for youth overdose reporting. She is hoping to get committee feedback and possibly set up an ad hoc committee to discuss further. The new youth overdose notifications and the OHA guide are requirement of 2023 HB 2395 legislation.</p> <p>District Medical Examiners are now required to report suspected overdoses among individuals 24 and younger to local mental health authorities (LMHAs) are allowed to implement postvention activities following these notifications. Courtney reviewed the process for</p>	Courtney Fultineer



		<p>required and allowable activities using the Notifications Flowchart, which is included as an appendix in OHA’s Communications Guidance document. OHA was required to develop this document per 2023 HB 2395.</p> <p>OHA’s Communications Guidance document includes:</p> <ul style="list-style-type: none"><li>• Overview of suspected youth overdose death notification requirements for District Medical Examiners and local mental health authorities</li><li>• Best practices and recommendations</li><li>• Resources</li><li>• Notification flowchart</li><li>• LMHA contact list</li><li>• Optional communications template</li><li>• FAQ’s</li></ul> <p>The next steps will include feedback from LPHA’s and LMHA’s and tribal partners on the current version of the Communications Guidance document. Katie asked how many LMHA’s were using the process. Courtney said that there is no dictated oversight for compliance and that Multnomah County has been the only county to report youth overdose deaths to OHA.</p> <p>Sara wanted to know who to contact with OHA for changes to the resource guide. IVPP has a general email list to send changes at: <a href="mailto:IVPP.General@odhsoha.oregon.gov">IVPP.General@odhsoha.oregon.gov</a></p> <p>Hannah asked if a subcommittee with mental health authorities had been formed to review the guide. Courtney is presenting this topic at the February 22 AOCMHP meeting and will let the CLHO HPP members know about the outcome. Jamie questioned how the guidance document addresses decedent privacy concerns related to sharing private or protected health information. The guidance documents require encrypted emails be used and redaction for any information that could be identifiable. The health officer asked that processes be developed through the legislature to clarify legal boundaries. OHA has worked with DOJ to clarify legal boundaries in the reporting document. DOJ recommended that counties consult with their legal boards to clarify local jurisdiction.</p>	
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		<p>Members that would like to participate in an ad hoc subcommittee to thoroughly review the guidance should email Courtney at:  <a href="mailto:courtney.fultineer@oha.oregon.gov">courtney.fultineer@oha.oregon.gov</a></p>	
TPEP Supplemental Funding Proposal	Discussion	<p>Ophelia gave an overview of the TPEP supplemental funding proposal. Her goal was to receive committee feedback and vote to move the proposal forward to Big CLHO. She gave a recap of how the funding proposal had been approved and reviewed how money would be allocated and dispersed. CLHO HPP had decided that the 2023 – 2025 biennium money be reserved for flexible spending to support and/or expand approved workplan strategies.</p> <p>In January, the funding proposal went to Big CLHO and was bumped back to the committee to strategize the proposal. At the Big CLHO meeting the importance of coordinator discussing the proposal with their local Public Health Administrators was discussed.</p> <p>The two new proposals include:</p> <ol style="list-style-type: none"> <li>1. Divide funding equally across the 35 grantees. If all grantees opt-in, this would per \$11,400 per grantee, but could be up to \$18,000 if only funding the 22 grantees that initially expressed interest.</li> <li>2. Allocate a base funding of \$5,000 plus a per capita allocation according to county population. Money would be put back into the pot from counties that opt out.</li> </ol> <p>Katie mentioned that there was not sense from administrators at Big CLHO as to many counties that were opting in on the proposal. Some administrators believed they had not been made aware of funding proposal. Jennifer said there was a question about whether the proposal needed to go to Big CLHO. Ophelia said that the CLHO HPP chair could recommend the approved proposal at the February Big CLHO meeting, where Big CLHO would approve/deny the measure.</p>	Ophelia Vidal



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		<p>Hannah said that Malheur population varies because of proximity to Idaho and believes the county is hurt by funding based on per capita. Columbia County has the same issue as Malheur, according to Suzanne. She would support proposal one because the per capita allocation would be detrimental to their money. She believes that part of the communication issue with TPEP funding and the administrators is that there has been a lot of staff turnover.</p> <p>It was determined that the committee was not ready to choose the funding option, and that the discussion and voted would be tabled until the March meeting.</p>	
Next Meeting 3/7/2024			