**Systems and Innovations Committee Agenda**

June 22nd, 2022 – 1 to 2 pm

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1605421048?pwd=OHkvZUp3cERjd3Q1alN5RWo5SmswQT09>

Meeting ID: 160 542 1048

Passcode: 737322

1 669 254 5252

In Attendance: April Holland, Andrea Krause, Amber Roche, Sarah Zia, Shellie Campbell, Vanessa Becker, Alex Coleman, Jessica Dale, Brian Mahoney, Shane Sanderson, Rebecca Chavez, Laura Daily, Katie Plumb, Nahad Sadr-Azodi, Sara Beaudrault and Ilana Kurtzig

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| --- | --- | --- | --- | --- |
| **Agenda Item** | **Detail** | **Action Item** | **Presenter** | **Time** |
| Welcome, Introductions (as needed) and roll call | Quorum is 50% +1 of committee membership* Quorum met
 | Ensure you have quorum | Jessica | 5’ |
| **Committee Agenda Items**  |
| Approve May minutes | * Approved with no edits
 | Discuss and approve | Jessica | 2’ |
| **OHA Agenda Item**  |
| Introduce new members (as needed) |  | Discuss | All | 5’ |
| CBO/LPHA roles and responsibilities | Review the LPHA piece of roles and responsibilities document considering the [PH modernization manual](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwiqoZPv1L_4AhVUIkQIHaRlCE0QFnoECAoQAQ&url=https%3A%2F%2Fwww.oregon.gov%2Foha%2Fph%2FAbout%2FTaskForce%2FDocuments%2Fpublic_health_modernization_manual.pdf&usg=AOvVaw09LycfqWnS7-BZa5Kat5Uk) as a resource | Review | All | 20’ |
| **Notes*** Document outlines CBO, LPHA and OHA Roles and how the unique responsibilities align
* Developed by a workgroup of HA administrators and staff and leaders from some CBOs. Intended to be a place to bring governmental public health and community health systems together.
* Document is intended to be a resource document that can guide how future discussions and issues move forward, and to identify complementary and overlapping work.
* JLT ask of CLHO S&I is to make sure LPHA parts feel complete and are an accurate representation, and to synthesize into a streamlined document.
* Suggestion that a % needs to be applied by the Legislature to address LPHA, CBO and OHA funding.
* National, state, local policy and planning
* Under the” OHA section” there is language for bringing state and local experience context into the national conversation. Add “Bring Local context to national conversations on PH system and policy development”. LPHAs do this through CLHO or national associations or with OHA partners.
* Make sure all items start with a verb.
* “Expand BIPOC and Tribal public health workforce” is very specific. Consider using OHA language for implementing local equity strategies.
* Unique Roles and interconnected “Overlapping Roles”
* In what ways is this document useful for LPHAs?
	+ In working across partners, especially when all partners getting the same information. There may be local variations, but this is a good starting place for local partners.
* Goal of PH Modernization is consistency
* (add) in every county, tailored to local context. “Helps provide delineation of responsibilities”
* In what ways can we make work complementary to get a bigger impact?
* List in the document “how to make work complimentary”
* Ways to coordinate and to be complimentary
* Comprehensive Training
* Support people without formal training
* AmeriCorps, Vista etc.
* Building and sustaining PH Workforce
* (add) “Work towards a common understanding of local priorities and how local agencies work together with communities that they serve”
* Unique OHA contribution (add) “Build relationships with programs, Higher Ed and HECC”.
* Collaboration
* Suggestion for OHA to continue to provide public health system training to CBOs. The work of individual CBOs varies greatly, but for the most part LPHAs provide similar services and programs. This should be ongoing, and it should be complemented with local trainings. Need to build foundational understanding of what we’re working toward.
* CHAs and CHIPs, opportunity to work with new CBO partners.
* Common threads to make the document more concise
* 1-pager, aim for 3-5 ways we collaborate that are cross-cutting.
* “Unique Roles” for PH, LPHAs and CBOs
* “Collaborative Roles”
* Are there trends across this document that could be condensed.
* The group will go through as a “goal” and communicate via email by the next meeting to make the document more concise
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| F/U on communication feedback with OHA | What do we do with the feedback we heard last month? | Decide | All | 15’ |
| * Communication email feedback
* Common themes
* Commitment of committees; when asked for feedback, LPHAs show up.
* Information feels very one-directional from OHA
* Within the context of COVID, information moved very quickly and LPHAs were very committed to provide input when OHA sent something out asking for feedback
* More positive examples of good collaboration between LPHAs and OHA. Good, combined outcomes of state and local (governmental PH and CBO)
* Difficulty knowing who to reach out to, this was a challenge, due to quick turnaround and new staff
* Mechanisms for Health Administrators but not for Local Health staff to get needed information
* Include local content in messaging from OHAs
* Role confusion; Clear were not defined
* Confusion, lack of communication or lack of knowledge of where decisions are being made
* Need clear mechanisms for health administrators to be kept aware of CLHO committee discussions
* Orientation about onboarding
* New administrators to tailor the information to new staff
* “What is CLHO?” CLHO staff provide training for new administrators but not staff.
* Create a document for new staff to understand what CLHO is
* Laura Daily will send out the onboarding document to the group
* Checklist for administrators to use when assigning someone to a committee. Expectations, roles, communication, etc.
* Create a document of what CLHO does
* There is space on the website for committees to post minutes from regularly scheduled meetings
* 2-way communication style-reach out to HPCDP to find out what they did. Reach out to program to learn about what they’re doing?
* “Office Hours”
* Send out a “last call” for committees that CLHO S&I haven’t heard from
* Next Steps: In no additional feedback….
* Syntheses of the recommendations
* Onboarding
* Office hours-regular communication
* Roles and decision making
* With examples that committees shared with CLHO S&I
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| Local Modernization Plan | Review the [ORS](https://www.oregonlegislature.gov/bills_laws/ors/ors431.html) about the planWhat is the product we are working towards? Template? Guidelines? Both? Other?What will be useful for LPHA to come up with this broad modernization plan for the county?Discussion postponed until July | Discuss and decide | All | 20’ |
| Wrap-up and next meeting | Discuss next meeting dateNext meeting:* Will reach out to committees for additional feedback
* Orientation document and Office Hours: 1-pager
* Brainstorming: reviewing the ORS for local modernization plans

Expand the next meeting to 1.5 hours to allow time for discussion  |  | All | 3’ |
| **Next meeting: July 27th, 2022 - 1 to 2 pm**  |
| **Co-Chair**Florence PourtalLincoln County Public Health Director541-265-0405fpourtal@co.lincoln.or.us  | **Co-Chair**Jessica DaleKlamath County Public Health – Assistant Director541-885-2434jdale@co.klamath.or.us  |
| **Public Health Division Liaison**Sara BeaudraultPublic Health Modernization Lead971-645-5766 - Sara.beaudrault@dhsoha.state.or.us  |