

## CONFERENCE OF LOCAL HEALTH OFFICIALS EXECUTIVE COMMITTEE

April 21, 2005  
Salem, Oregon

**Agencies represented:** Tom Eversole (Benton Co.); Alan Melnick, Marti Franc (Clackamas Co.); Don Schreiner (Clatsop Co.); Marilyn Carter (Douglas Co.); Mark Orndoff (Jackson Co.); Karen Gillette (Lane Co.); Jan Kaplan (Lincoln Co.); Anne Peltier, Frank Moore (Linn Co.); Gary Oxman, Dave Houghton, Jan Wallinder, Lila Wickham (Multnomah Col.); Genni Lehnert (Umatilla Co.); Lisa Ladendorff, Dave Still (Union Co.); Kathy Schwartz (Wasco-Sherman Cos.); Roberta Hellman (Washington Co.); Matt Jaqua (Yamhill Co.); Susan Allan, Katy King, Robin Peterson, Annick Benson, Victor Fox, Tom Engle, Paige Sipes-Metzle, Bob Nystrom (DHS/HS); Gordon Fultz (AOC/CLHO); Linda Fleming (CLHO)

The meeting was called to order by Alan Melnick, Vice-chair, with seven Executive Committee members present. Marilynn Sutherland was absent; Gary Oxman arrived later in the meeting.

Matt Jaqua moved, Jan Wallinder seconded: approve the minutes (passed unanimously).

### Changes/Additions to the Minutes

- Defer status update on facilitator for organizational design worksession
- Defer status update on a focus group for the “Operational Definition of a Functional Local Public Health Agency
- Add IS request from HIV Program
- Add update on Garrett Lee Smith application
- Add discussion of a mutual survey of local/state public health agencies
- Add report from Preparedness Leadership Team
- Add report from Funding Formula Committee
- Add report on flu vaccine evaluation
- Add discussion on CLHO Geriatric PH Committee
- Add discussion of process to review program elements for the contract

### IS Request from HIV Program – Robin Peterson

Robin Peterson is the Ryan White CAREWare Project Manager. CAREWare is the software package needed to meet state reporting requirements. The project is currently looking toward an update of the software package to be completed between August and November 2005. To plan the upgrade, project staff need to know by May 13<sup>th</sup>

1. Would local agencies like DHS staff to install the upgrade for their users or would they prefer to do the installation themselves?
2. Would local agencies like their users to receive hands-on support from DHS using a remote desktop support tool (such as WebEx)?

Robin presented three options for supporting local software users:

1. Desktop sharing program running locally.
2. Web share remotely.
3. Telephone support only.

Project staff recommended Option 1 as being most effective. CLHO IS Committee recommended that support be offered, but not required by every county. The decision should be made locally on a county by county basis.

**Kathy Schwartz moved, Tom Eversole seconded: Support the CLHO IS recommendation that technical support be offered for the three options and counties decided on a county-by-county basis (passed unanimously).**

**Process for identifying what each county wants: A simple check-off questionnaire will be sent to each county administrator and HIV Coordinator requesting they indicate which option their county prefers.**

Linda Fleming is to ask Ellen Larsen to report at the May meeting on the IS Committee strategic plan and what's happening. Susan Allan will also ask Susan Strohm, DHS IS Coordinator, to also be present.

#### LGAC – Anne Peltier

Anne's report was very brief. The primary focus at LGAC was on two documents: *Update from the 2006 Presidential Proposed Budget* and *Analysis of the Highlights from the 2006 Presidential Proposed Budget*.

#### Public Health Code of Ethics – Alan Melnick

Alan presented two documents for review: *Principles of the Ethical Practice of Public Health* and *Skills for the Ethical Practice of Public Health*. Alan and Susan Allan concurred that the information in the Code documents is useful for presentations and public health decision-making. Some states have adopted the Code as policy.

“Ethics” are based on the WHO definition of health and social justice philosophies.

**Process: The Executive Committee will review the Code documents and identify where they might fit into the organizational design discussions, and consider a presentation similar to that described as being given at NACCHO at a joint OPHA/CLHO meeting in the fall.**

Linda Fleming was asked to put a discussion of the review on the June agenda.

#### Public Health Survey – Susan Allan

Susan Allan suggested a quick, simple, reciprocal survey be conducted of state and local public health agencies that would identify what's going well, what's not, what one thing the respondent(s) would like to see happen. It would be used as a lead-in to a more indepth conversation between the state and locals.

Linda Fleming and Tom Engle were identified to collate and review the information to capture the “robust” themes and statements.

Tom Eversole moved, Anne Peltier seconded: support the survey suggestion (passed unanimously).

#### Garret Lee Smith Grant Application – Frank Moore

A grant writing team of Lisa Millett, Donna Noonan, Gina Firman, Frank Moore, and others have been meeting to develop criteria and other information necessary to write the grant proposal. Considerations include identifying the target population, what level of impact is realistic with the dollars available, and what approach would get the most results (e.g. – regional?). Concerns have been expressed that due to lack of clarity, complexity of the application, and timelines, maybe Oregon will not be able to meet the application deadline. Frank is strongly encouraging that Oregon and the grant writing team move forward. The application is due May 25<sup>th</sup>.

There are several concerns to be addressed and clarified. There is disagreement as to whether the funds can be used for treatment. Mental Health providers are concerned that the pilots will generate a need for treatment. Frank Moore is advocating that some dollars be focused on treatment.

How to identify the service areas will require clear, concrete criteria and a collective agreement between public health and mental health on rating and determining sites. With this in mind, Frank stated it has become clear that the writing team doesn't clearly understand the role of public health and mental health in suicide prevention at the local level. Linda Fleming suggested that the writing team may be incomplete in membership and representation of the disciplines and recommended that a Public Health Nurse (CLHO MCH/AOPHNS) representative be added to present the Public Health/epidemiological perspective. After discussion, Jan Wallinder agreed to participate on the writing team.

Frank Moore is suggesting that the target population be the 17-24 year old age group and that a contiguous area (regional approach) would work well with the funds available. In addition, the selected area should also demonstrate a connection with the education efforts targeted with some of the funds.

#### Social Marketing Project – Lila Wickham

Lila reported on the evolving themes from legislator feedback.

- Legislators got a clear picture of Public Health.
- Legislators liked the succinct packet.
- Legislators liked having a resource for future Public Health connection.
- There are different levels of sophistication in the state identifying the need for mentoring, etc.

Suggestions for future contacts included using a team approach and/or taking a lobbyist or someone with you when making legislator visits.

Administrators provided feedback on their visits and response.

As part of the discussion and based on concerns about misunderstandings related to Family Planning and abortion services, Katherine Bradley encouraged members to **talk to their legislators about the \$1.6 million needed to be reinstated for FPEP and the leverage it provides for federal dollars.** Family Planning dollars do not pay for abortions; do not pay for scheduling, transportation, or otherwise assisting with abortion services. The only abortion activity is related to the federally required information on all pregnancy-related options.

Lila Wickham will write a “partnership letter” from CLHO and the Food Bank thanking those legislators that sent back their evaluation card.

#### Changes in CDC Funding/Guidance for BCC – Tom Eversole

CDC has concerns about Oregon’s BCC Program related to productivity, quality assurance, and expense per woman served. In addition, the federal grant is scheduled for reduction as part of larger conversation in Congress: What are they getting for their investment in health promotion? The CDC budget has been decreased by over \$460.0 million and they have been asked by Congress to demonstrate effectiveness with performance measures.

Paige Sipes-Metzle stated that DHS/HS will be getting a 20% reduction in BCC funds and they have to explain to CDC how they arrived at their service and support costs. The grant application is due in 2006 for a five year renewal. They are starting their preparatory steps now and trying to resolve outstanding issues.

Linda Fleming suggested that part of the CDC questions are because Oregon is one of the few states running a decentralized program. Paige Sipes-Metzle agreed and stated they will have to address the questions about centralized vs. decentralized. The program will be collecting data, preparing a report, etc., to respond to CDC’s questions.

In discussing the BCC budget, Paige Sipes-Metzle stated 79% of current funds go to screening and 21% to administration. The program may not experience any service cuts with the 20% reduction. DHS/HS will closely review the budget for possible adjustments.

#### Five-a-Day Steering Committee – Tom Eversole

Linn Co. has volunteered Karen Burrell to represent CLHO.

#### Heart Disease and Stroke Prevention Coordinating Council – Tom Eversole

DHS and others are establishing this council to develop a statewide Heart Disease and Stroke Prevention Plan. Tom Eversole will check with Wendy Rankin for possible interest in serving on this council.

NOTE: CLHO Chronic Disease has responded to the PAN Grant. The proposal will go to Funding Formula Committee should it be funded.

#### PHPLT and Expenditure Status Update – Dave Houghton and Susan Allan

Susan Allan reported that while most of the underexpenditures in BT are in the State's allocation, nine counties are underspent in this year's BT grant. While the underexpenditure is less than previous years, Susan stressed how important it is to expend funds on schedule. To not do so, reflects badly on the statewide effort with the federal funders.

Susan suggested that as we move into next year, CLHO/DHS review how they do reallocation of unexpended funds. A CLHO role needs to be identified in monitoring expenditures and helping counties to expend funds to assure statewide preparedness.

Dave Houghton reported that PHPLT has agreed to identify priorities for state/local public health preparedness in the upcoming year based on review of:

- *Public Health Preparedness county Assessment Project, Final Report, Executive Version, March 21, 2005* from Milne and Associates, LLC.
- Any available Regional Exercise After Action Report(s).
- The PHPLT modified measures in the CDC Performance Goals Workbook for Preparedness.

The framework for establishing priorities consists of

1. Mutual understanding of the difference among Formal Organizations, Preparedness Organizations, and Response Organizations.
2. Systems importance, impact, and development.
3. The PHPLT-adopted concept of operations.

Dave presented a written description of the PHPLT-adopted concept of operations. The concept includes understandings/assumptions and a general concept of operations based on four levels of operation. (Contact Dave Houghton at [david.b.Houghton@co.multnomah.or.us](mailto:david.b.Houghton@co.multnomah.or.us) for a possible electronic version of the two-page report.)

Dave reported on the current status of priority identification. Two of three planning meetings have been completed, with the final one scheduled for April 28<sup>th</sup>. A vision-based approach to developing priorities is the primary method of identification. The vision scenarios include avian influenza, a chemical spill, and an earthquake. The elements from these scenarios will lead to both short and long term priorities.

Examples of priorities include rapid communication with providers statewide; clearly defined authority and responsibility in a NIMS-based response organization for a public health incident, with clear understanding of who is in command and who supports; planning for response to serve special needs populations; etc.

Susan Allan commented and expanded upon the importance of building and supporting the effort, using scenarios of what really happens locally, and looking at scenarios we haven't focused upon before (e.g. – chemicals and radiation). Scenarios give a better picture to other agencies and partners as to what's been done in Public Health Emergency Preparedness Planning; why we do it; what the Public Health role is, etc.

DHS/HS is looking at how they can change the funding allocation. Currently the program is funded by Focus Area in specific program areas/offices. The new approach would be to have the dollars follow the plan, not the organizational structure of DHS/HS.

#### Funding Formula Committee – Kathy Schwartz

Matt Jaqua has resigned from FFC. Kathy Schwartz requested that Rick Hallmark, Coos Co., be appointed in his place. Consensus agreement by the Executive Committee.

#### SBHC Certification Revisions – Bob Nystrom, Anne Johnston

SBHC certification was first initiated in 2000. Every odd numbered year there are site-based updates on the certification; even numbered years are administrative updates.

Changes to the initial certification document were identified in 2003, but due to budgetary issues, the process was not completed. The program proposes to move forward with those changes now. The six proposals for change in the document include

1. Encourage sites to be a member of the SBHC Network.
2. Health Assistant qualifications and role specifically clarified. Clerical staff may not work in medical triage without a license.
3. Medical Director participation is clarified.
4. Quality data is required.
5. Risk factor guidance is provided.
6. Lab certification is clarified.

Jan Kaplan moved, Jan Wallinder seconded: move to approve (passed unanimously).

#### Flu Vaccine Evaluation – Tom Engle

Tom Engle presented a written overview of the process and intent of the evaluation. The intent is to assess how well the activities of public health entities in Oregon met the challenges of the flu vaccine shortage. The evaluation will guide the development of strategies for future crises that require decisions and actions related to procurement, allocation, and distribution of health resources. It will also serve to document what happened during this season, and what aspects worked well and what aspects could have been improved.

Seven areas of interest have been identified for the evaluation, along with nine information areas that will document the timeline, rationale, partners, decisions, and actions taken related to the season. Data collection will focus on WHO to ask and HOW to get information. The plan is to convene and complete four focus groups by the end of April; complete approximately twenty-eight interviews May 2-13<sup>th</sup>; send out seven-hundred-fifty surveys in two mailings during May.

A final report will be written that synthesizes the qualitative information with the quantitative information and provides context with the nine information areas.

#### Process to Review Program Elements – Tom Engle, Karen Gillette

The key points of contact for program staff related to program elements in the contract will be the technical program committees. DHS/HS staff will negotiate with the appropriate committee; the committee will forward recommendations to CLHO Executive Committee for approval; approved recommendations will be forwarded to DHS Contracts and Department of Justice. Relatively non-substantial changes at that level will move the contract out without further CLHO review; substantive changes will result in moving the contract back to CLHO for further review and negotiation.

The program elements will have all the citations when they are presented to the committee(s).

Questions: contact Tom Engle and/or Karen Gillette.

#### CLHO Geriatric Public Health Committee – Tom Engle

Tom has been in contact with Megan Hornby, DHS/SPWD, and recommended a group to work on elderly and geriatric issues be formed. Linda Fleming reminded those present that she and Gina Firman had been asked to convene a joint CLHO/AOCMHP committee to look at seniors and health aging issues. With the legislative session and high profile issues for AOCMHP, Gina and Linda had been unable to make that happen. Linda also stated that Marilyn Sutherland had expressed interest in establishing a group that consisted of members other than public health; she specifically mentioned Seniors/People With Disabilities (SPWD) and Triple A agencies.

After discussion, Linda Fleming and Tom Engle were asked to look further into the possibility and need for such a group.

#### Emerging Issues/Future Agendas

Gov. Kulongoski has named April 26 as Environmental Health Specialist Day.