

Public Health Advisory Board meeting minutes Nov 9th, 2023, 3:00-5:30 pm

Attendance

Board members present: Bob Dannenhoffer, Veronica Irvin, Cara Biddlecom, Dean Sidelinger, Jocelyn Warren, Marie Boman-Davis, Meghan Chancey, Sarah Present, Jackie Leung

Board members excused:

OHA Staff for PHAB: Tamby Moore, Sara Beaudrault, Victoria Demchak, Rose Harding, Eugene Pak, Katelyn Niel, Nandini Deo, Nettie Tiso.

Welcome, board updates, shared agreements, and agenda review

- PHAB members, subcommittee and workgroup members and staff introduced themselves.
- Cara Biddlecom gave updates about the OHA opioid overdose and polysubstance use listening sessions.
- Cara also announced the appointment of Dr. Sejal Hathi as the new Director of the Oregon Health Authority.
- Bob Dannenhoffer asked whether there were any updates on the Public Health Director position.

- Cara answered by saying that there are plans to start the recruitment process for the Public Health Director position soon.
- Sara Beaudrault gave updates about the new members of the Oregon Health Policy Board. The Oregon Health Policy appointed two new members, Dr. Rosemarie Hemmings and Dr. Tony Germann.
- It was also noted that the Oregon Health Policy Board is currently recruiting for 2 new positions.
- Sara B. gave additional updates about the required training for board members. The two trainings required to complete are trainings about information security and harassment and discrimination.

Accountability Metrics Subcommittee updates

Presented by Sarah Present

- The Accountability Metrics Subcommittee met with the Strategic Data Plan workgroup and discussed ways that the Strategic Data Plan can will be able to inform accountability metrics through new data collection.
- It was noted that there has been a high involvement of LPHAs recommending metrics to be considered.
- Finalized indicators are continuing to be worked on and finalized process measures could be presented at the next PHAB meeting.

Health Equity Policies and Procedures updates

Presented by Veronica Irvin

- A recommendation from the Oregon Health Policy Board's Health Equity
 Committee was made to the draft of PHAB's Health Equity Policies and
 Procedures, this update being that the policies and procedures include
 datapoints that demonstrate the impact of systemic racism on health
 outcomes.
- Due to the work encompassing this recommendation, the vote on the updated PHAB's Health Equity Policies and Procedures will not occur until the next PHAB meeting in December.

Public Health Modernization Funding Workgroup updates

Presented by Cara Biddlecom

- Cara B. announced that all tasks and deliverables of the Public Health Modernization Funding Workgroup have been finalized.
- Topic 1 Between May and August 2023, PHAB public health modernization funding workgroup members gained a baseline understanding of the current CBO Health Equity grant Program. Questions and responses were compiled and shared with all workgroup members and posted publicly.
- Topic 2 On August 18, The PHAB Workgroup agreed to the following approaches ensure equitable distribution of public health modernization funds for CBOs through the new 2023-2025 request for Grant Applications.
 - Use LPHA public health modernization funding formula as a guide to inform equitable distribution of CBO regional and county funding.
 - Suggest a minimum biennial base funding level for CBOs so that CBOs can build staffing and infrastructure. Also establish a cap on CBO award amounts.

- Expand the list of underserved priority counties for the 2023 CBO RFGA considering both number of CBOs operating in the county and per capita investments. Ensure CBOs are funded to provide services in every county, excluding statewide CBOs.
- Begin with prioritizing CBOs that are serving locally for selection,
 based on the definition of local included in the RFGA. This does not preclude funding for regional or statewide CBOs overall.
- Topic 3 On Oct 16, the workgroup agreed to the following statewide strategies to improve coordination between CBOs, LPHAs and OHA.
 - Convene a first meeting with newly funded Public Health Equity CBOs, the LPHA and OHA. From there, work to determine the most appropriate ongoing collaboration spaces for those partners, based on the work (may be an existing meeting or something new; may include breakouts for program specific coordination). Encourage periodic in-person meetings.
 - Offer memoranda of understanding (MOUs) as a tool to align CBO and LPHA work, but not require MOUs.
 - OHA staff will align with CBO and LPHA progress reporting as it makes sense to do so, and in alignment with CBO and LPHA work plan templates.
 - OHA will offer training and technical assistance opportunities for CBO, LPHA and OHA staff.
 - OHA will work with LPHA Administrators to determine if the CBO contact list can continue to be used to share CBO-specific updates.

- Topic 4 Workgroup agreed to the following methods for LPHA involvement in CBO awardee decision-making.
 - Each CBO grant application will be reviewed by two LPHAs:
 - One from a similarly sized LPHA not located in the region.
 - One from the LPHA in the CBO is proposing to work.
 - If a LPHA cannot contribute a reviewer, then OHA will request a neighboring county, or a county also listed in the applicant's service area participate in the review.

Health Equity Framework Project updates

Presented by Nandini Deo and Katelyn Niel

- Workgroup Recruitment Status
 - The team is recruiting and confirming members by November 22nd.
 - o The workgroup will include:
 - 2-4 PHAB members
 - 1-2 OHA members
 - 2-4 CBO members
 - 1-3 Tribal members
 - 1-3 LPHA members.
- Workgroup Timeline
 - Workgroup recruitment in Nov 2023; Workgroup kickoff meeting on Dec 12, 2023; Workgroup meetings will end and Deliverable 1 (Role Guidance) will be due May 2024.

Workgroup Structure

- Meeting cadence will be 2 times a month.
- Meeting duration will be 2 hour each meeting, a total of 4 hours a month.
- There will be 1 facilitator, 1 co-facilitator and 1 notetaker that will be the internal project team helping with creating and finalizing deliverables.

Project Status

- The project charter and the plan are currently being finalized and the internal project team is also being finalized.
- Jocelyn Warren asked what the goal of the Framework project was.
- Katelyn Niel answered by explaining that the project was in the first phase which encompasses defining roles for the public health system in reaching health equity goals set for 2030.
- Jocelyn W. asked if project would be connected to the SHIP.
- Katelyn N. answered by saying that the focus of the project right now was to get members of the workgroup are speaking to each other internally so that further connection can be made.
- Sarah P. asked how the recruitment process for the project workgroup is recruiting members.

 Nandini Deo answered by saying that invitations are being distributed to LPHAs, CBOs, and Tribal Members as well as recruitment through internal workgroups.

Public Health Workforce Workgroup Updates

Presented by Sara Beaudrault

- It was noted that recruitment for the Public Health Workforce Workgroup is currently underway.
- The first meeting for the workgroup is projected for early December.
- The first phase of the workforce project will be through a contractor that will perform a meta-analysis of existing public health workforce data and compiling reports with said data.
- The second phase of the workgroup will be development of recommendations.
- Veronica Irvin asked about what kinds of organizations were being recruited for this workgroup.
- Sara B. answered that the workgroup was recruiting for LPHAs, CBOs, Tribal Members, and potentially members of Academia.

October Meeting Minutes Approval

 Bob D. motioned to approve the meeting minutes for the October PHAB meeting and Marie Boman-Davis seconded this motion. The meeting minutes were approved with a single abstention from Meghan Chancey.

PHAB Strategic Data Plan Vote Presentation

Presented by Veronica Irvin, Victoria Demchak, Dean Sidelinger, and Marie Boman-Davis

- Purpose of the Strategic Data Plan Subcommittee
 - Engage with content and recommendations from Oregon culturally specific reviews of public health survey data.
 - Develop a set of strategies and activities to improve accessibility, accuracy, and usability of data.
 - Support ongoing accountability.
 - Deliverable: Recommendations to OHA PHD for strategic data initiatives (aka "Strategic Data Plan")
- Timeline of Strategic Data Plan Sub-Committee
 - 2021: Committee convened to develop recommendations on a governmental PH strategic data plan.
 - 2022: Committee receives guidance from community specific survey modernization reports and presentation.
 - 2023: Developed definitions and recommendations for the strategic plan.
- Deliverable

- Recommendations for strategic data initiatives to support OHA PHD's ongoing implementation of strategies toward data equity, data justice and community engagement:
 - Definitions developed with community partners and public health leaders.
 - Priorities for OHA PHD's anticipated data investments.
 - Practices for data collection, use and analysis.
 - Report progress to PHAB
- How would OHA PHD use these recommendations?
 - Periodically report to PHAB and SDP subcommittee on OHA PHS efforts to use strategic data plan to advance adopted priorities.
 - Share in other internal spaces across PHD/external partner spaces where there is opportunity and interest in alignment in planning, implementation and reporting on data activities.
 - Periodically report to PHAB and SDP subcommittee on OHA PHS efforts to use strategic data plan to advance adopted priorities.
 - Share strategic data plan to Science and Epidemiology Council
 - Comprised of leadership from across all PHD centers, plus E&I.
- What does these mean for PHAB Marie Boman Davis
 - Receive biannual update of PHD's progress including the following:
 - How is OHA engaging or investing time and resources in community participatory research, qualitative research, or community engagement.
 - What are the existing and prospective opportunities for collaboration with statewide and regional data collection and analysis systems, including health care?
 - Review process measures developed by OHA PHD staff.
 - Reflect on PHAB's progress towards data equity and data justice.

- PHAB Health Equity Policy and Procedure:
 - What health inequities exist among which groups? Which health inequities does the work product, report, or deliverable aim to eliminate?
 - The Strategic Data Plan does not address specific health inequities among specific groups. Rather, it provides recommendations to address inequities exacerbated by current and historical harmful practices through data justice, data equity, and community engagement principles.
 - How does the work product, report or deliverable engage other sectors for solutions outside of health care system, such as in the transportation or housing sectors?
 - The plan does not directly engage other sectors but supports the public health system's role; to establish cross sector partnerships for policy change. Implementation of the Strategic Data Plan recommendations will position public health agencies and diverse community partners to align data practices and cross sectoral policy initiatives with data justice and equity principles.
 - How was the community engaged in the work product, report or deliverable policy or decision? How does the work product, report or deliverable impact the community?
 - Strategic Data Plan recommendations are informed by the survey modernization work conducted in 2019-2020 by culturally specific project teams with community members, leaders, researchers and organizations.
 - Survey modernization is one example of efforts occurring across OHA to improve disaggregated data on community and to develop categories that better define individuals as they define themselves.
 - Communities will benefit as Strategic Data Plan recommendations are implemented because they will have access to more robust and representative data provided by

OHA and because OHA will have more accurate and complete data to inform how resources are allocated to communities.

- Request to PHAB and Voting
 - Request: Accept the Strategic Data Plan that includes recommendations for strategic data initiatives and regular progress updates to PHAB.
 - Voting members and their votes:
 - Sarah Present Yes
 - Jackie Leung Yes
 - Bob Dannenhoffer Yes
 - Meghan Chancey Yes
 - Marie Boman-Davis Yes
 - Jocelyn Warren Yes
 - Veronica Irvin Yes
 - The Strategic Data Plan was passed.

New Member recruitment, member onboarding, and member discussion

- Veronica I. announced that the PHAB are recruiting for new members and asked members to potentially help with recruitment for 5 open positions.
- It is expected to fill these positions by January.
- Bob D. asked whether the new member appointment will push the quorum requirement to 17 since there will be 5 new positions being added to the current number of subcommittee members.
- Sara B. said that she would investigate this and confirm the quorum status.

- Veronica I. moved the discussion forward and asked members questions about member onboarding.
 - What do you wish you had known or had when you joined PHAB?
 - What are your suggestions for successful onboarding?
 - O How can we build connections among members?
- She noted that for herself, she felt that understanding how the PHAB is associated with the Oregon Health Policy Board was helpful and that explaining this association to potential members would help with member onboarding,
- Sarah P. mentioned that educating potential members on the level of responsibility that PHAB have within the scope of public health (namely governmental public health) could help with onboarding. She also noted that educating members on the difference of Public Health Modernization and the State Health Improvement Plan and their respective processes would be important.
- Bob D. added that educating potential members on the exact functions of the PHAB would be important as miscommunication of what the board is capable of, especially the capabilities as an advisory board, is possible. He also mentioned that educating potential members on the acronyms used by members would be helpful.
- Jocelyn W. asked what potential members would be told about Public Health Modernization. She mentioned that the definitions and processes behind Public Health Modernization have changed considerably since it's inception and wondered what information about Public Health Modernization would be transferred.

- Jackie Leung suggested that new members be assigned a partner from the PHAB to help with onboarding members.
- Sara B. answered Jocelyn W. by saying that the information that will likely be explained to new members about Public Health Modernization would be information about the process in the current biennium.
- Marie Boman-Davis suggested in person time would be helpful for new members to get associated with each other.
- Veronica I. commented that a retreat would be possible.
- Meghan C. asked whether this potential retreat would only take place in the Portland Metro Area.
- Sara B. answered that the retreat is not fixed to the Portland Metro Area and could potentially be elsewhere.
- Sarah P. suggested that in-person time could be had at the OrEpi conference if members were already attending that conference.
- Marie Boman-Davis mentioned that it would be advisable to draft some options and go over them when the new members are confirmed as not to potentially predetermine the retreat prior to new member considerations.

Public comment

 Laura Daily with the Coalition of Local Health Officials advised that for the member onboarding process for the PHAB that directing new members to a webinar about the capabilities of the Oregon Public Health system, that was produced in collaboration with OHA, OHSU, and CLHO, would be helpful. She inquired about whether the Workforce Development Plan Workgroup would have spaces to collaborate with organization such as CLHO and Oregon Center for Nursing as organization like this have large system overviews of the Public Health workforce. She also suggested appointment of a county commissioner would also be beneficial for the workgroup.

Adjourn

• Meeting adjourned at 4:30 pm.