Public Health Advisory Board (PHAB) March 6, 2015 Portland, OR Meeting Minutes

Attendance:

<u>Board Members Present:</u> Josie Henderson, Brooke Kyle, Jeff Luck, Pat Luedtke (by phone), Tran Miers (by phone), Loreen Nichols, Joanne Noone (by phone) <u>Board Members Absent:</u> Shawn Baird, Jim Coffee, Joe Ichter, Alejandro Queral <u>OHA Public Health Division Staff:</u> Jayne Bailey, Isabelle Barbour, Sara Beaudrault, Cara Biddlecom, Tom Eversole, Renee Hackenmiller-Paradis, Katrina Hedberg, Rosa Klein, Priscilla Lewis, Megan Rushkin, Brittany Sande, Michael Tynan, Steve Wagner

<u>Members of the Public</u>: Bethany Imhoff, Pac/West Communications; Kathleen Johnson, Coalition of Local Health Officials

Opening:

The meeting was called to order, board members were welcomed, and introductions were made.

Changes to the Agenda & Announcements

Loreen Nichols – The Multnomah County Board of Commissioners voted to ban the sale of e-cigarettes to minors and to bring e-cigarettes under the Indoor Clean Air Act.

Pat Luedtke – The State of Iowa has a statewide public health conference every year and Pat has been asked to speak at it this year. They were the first state to come out and say they would be the "healthiest state," but Oregon also has a healthiest state initiative. Pat asked board members if there is something he can do to "take the fight" to Iowa and asked board members to let him know if they have any ideas.

Josie Henderson – The Oregon Public Health Association has their Capitol Visit day on April 9th during Public Health Week. Everyone is invited.

If any board members know of someone who is interested in serving on the PHAB they should encourage them to apply. There are currently 4 vacancies on the Board. Applications need to be submitted to the Governor's Office of Executive

Appointments. If board members need further information about recruitment they can contact Brittany Sande.

Approval of Minutes

(Handout: DRAFT PHAB Meeting Minutes, December 2014)

A quorum was not present so the Board was unable to vote on the approval of the December 2014 minutes. Approval of the December 2014 minutes will be revisited at the June 2015 meeting.

Future of Public Health Services Task Force and Statewide Health Improvement Plan

- Michael Tynan, Policy Officer, PHD

(Handouts: Modernizing Oregon's Public Health System: Executive Summary; Task Force on the Future of Public Health Services: Recommendations to Modernize Oregon's Public Health System; Updating Oregon's State-wide Health Improvement Plan (SHIP), 2015)

Future of Public Health Services Task Force:

Two bills have been introduced this legislative session related to the modernization of public health, HB 3100 and SB 663. HB 3100 is the one that is likely to move (Note: since the PHAB meeting was held in March, SB 663 has been amended and is now a bill that deals with tobacco retail licensure). These bills would operationalize the Task Force report.

The Task Force recommended a series of things, but the major change for the public health system is that there would be foundational capabilities (i.e. skill sets) that should be available across the public health system. There are also foundational programs recommended for the system in four pillars: communicable disease; environmental health; prevention and health promotion; and access to clinical care. The bill memorializes those into statute and directs the public health system to define what the "core" programs look like.

The Task Force also recommended that sustainable and sufficient funding be identified by the Legislature to support the foundational capabilities and programs. HB 3100 would adopt the foundational capabilities and programs and direct the system (state and local public health working together) to define the "core of the core," do an assessment across the system to figure out what is a state-based, local or shared function, and come up with a possible cost to fund the system.

Michael briefly discussed the changes that would be made to PHAB with the passage of HB 3100, including changes to board membership and the role/duties of the Board.

The Board requested a special meeting with Public Health Division (Division) staff to learn more about HB 3100 and engage in further discussion. *Action Item:* **Michael and Rosa will work to put together a webinar on HB 3100 that PHAB members can attend if they want to.**

Statewide Health Improvement Plan (SHIP):

Public meetings were held in communities around the state to seek input on the plan and what the priorities should be. Based on the feedback at the community meetings and guidance from Division leadership, the current plan is for the 2015 – 2019 SHIP to focus on the following areas:

- Prevent and Reduce Tobacco Use
- Slow the Increase of Obesity
- Improve Oral Health
- Reduce Harms Associated with Substance Use
- Prevent Deaths from Suicide
- Eliminate the Burden of Vaccine Preventable Diseases
- Protect the Population from Communicable Diseases

The Division is now working to define the next layer, i.e. what are the population interventions, the health system interventions, equity interventions and the Health in All Policies interventions needed for the state to achieve these goals.

It's important for PHAB to be aware of this work because the Division wants to ask the PHAB to be the body that the Division reports back to and holds the Division accountable for each of the areas. Further discussion can happen at a later PHAB meeting, including overview of the metrics that the Division has identified, and the goals and interventions for each of the areas.

Legislative Update

- Rosa Klein, Legislative Coordinator, PHD

The Division is doing a lot of work around marijuana this legislative session, including providing a lot of data related to the Oregon Medical Marijuana Program.

The e-cigarette bill has passed the House and now heads to the Senate. This bill would, among other things, prevent the sale to minors and ban the use of e-cigarettes wherever the Indoor Clean Air Act applies.

The Division has also been working on its own bills: SB 227, Traumatic Brain Injury (TBI) registry; and SB 228, Radiation Protection Services fees. SB 227 has passed the Senate and now heads to the House, and SB 228 has been referred to Ways and Means.

Other issues that the Division has been working on this session include School-Based Health Centers and school immunizations.

PHAB 2015 and Board Business

- Jeff Luck, MBA, PhD, PHAB Vice Chair

Alejandro Queral, PHAB Chair, and Jeff Luck, Vice Chair, proposed to Division leadership that the PHAB take a more active advisory role in providing input to the Division, rather than just receiving information at its quarterly meetings. Their proposal was well received by leadership, and board members had no questions or further discussion.

In order to maximize the time that board members have together, there may be instances where board members are asked to review materials in advance of the quarterly meetings in order to be prepared for discussion. There may be an opportunity to form subcommittees on specific topics as the Board delves into more of an advisory role.

Jeff Luck, acting on behalf of the Chair, appointed Loreen Nichols to serve on the PHAB Executive Workgroup.

Public Health Division Update

- Priscilla Lewis, Deputy Director, PHD

Priscilla presented a PowerPoint presentation to the Board, entitled "Leading Forward to the Future." Slides are available upon request.

Division leadership recently held a strategic planning retreat. Priority areas for the Division have been identified in terms of the SHIP. The Division recognizes the importance of understanding that each area of the state will have different needs related to the priority areas and the Division will work with county partners to understand and improve those areas.

Internally, the Division has recognized that there is a lot of work that needs to happen in order to be ready for public health modernization. A great deal of the retreat was spent on how to ready both the Division and individuals for that work. Part of this work includes really understanding what the Foundational Capabilities mean and how the Division's sections contribute.

All of this is being done to operationalize the "vision" of a modernized public health department. The Division is relying on short-term tools (Foundational Capabilities work; Foundational Program work) and long-term tools (PHD Strategic Plan; PHD Cross-Division Councils), as well as staff and partner expertise.

Several cross-division councils are being formed and include: Policy; Communications/Web; Finance/Business Operations; Quality Improvement; Community Engagement; Medical/Epidemiology; Human Resources; Informatics/Information Technology; and Statewide Public Health Initiatives. As modernization of public health is implemented, the councils will be charged with integrating appropriate policy and practice changes into organizational culture and practice. The councils will be rolled out in waves throughout 2015.

- Jayne Bailey, Fiscal Officer, PHD

Jayne presented a PowerPoint presentation on the Governor's Budget 2015-2017. Slides are available upon request.

Key components of the Governor's Budget for the Public Health Division include: maintaining support of local public health departments; investing in support for planning and operational readiness to prepare, respond, and mitigate public health disasters; investing in the Future of Public Health Task Force recommendations; investing in the Patient Safety Commission (as pass-thru dollars); supporting fee increases included in the Agency Request Budget (ARB); and has a \$1.7M General Fund increase for 2015-17 over 2013-15. The total Public Health Division budget included in the 2015-17 GB is \$528.7M.

The presentation included a further breakdown of key components of the GB for each of the Offices/Centers within the Division, as well as a summary of proposed ARB 2015-17 Policy Option Packages.

- Katrina Hedberg, MD, MPH, State Health Officer and State Epidemiologist, PHD

Katrina shared with the Board some of the work that is being done around marijuana. The regulatory aspect of what the Division does has been outlined in statute relating to the medical program. But the state is now working on looking at learning more about what the public health impact of marijuana is, particularly as recreational use becomes legal. Oregon has been having conversations with Washington and Colorado, where recreational use is already legal, to talk about how to approach some of the public health issues around legal marijuana. One approach that Colorado has used that Oregon is in the process of rolling out is the convening of a Scientific Advisory Committee, which will pull together experts to work on some of the public health issues that are raised.

If PHAB members are interested in serving on the Scientific Advisory Committee or participating in this process, they can contact Katrina. The Division is looking to include people who have expertise in not only metrics, but also addiction, local public health, surveys, and including a broad range of people who can advise around the scientific issues that will come up.

Accreditation Update

- Danna Drum, Performance Manager, PHD (Handout: Accreditation Action Plan)

The handout provides an outline of the areas that the Public Health Accreditation Board and the accreditation committee wanted the Division to develop an action plan on. In some cases, after talking with the Public Health Accreditation Board, they said that if the Division feels like it has better documentation that demonstrates that it is doing what was outlined in a particular domain or standard that it could resubmit documentation. There are a couple of areas where the Division will resubmit documentation if the action plan is approved.

If the accreditation committee approves the action plan, most of the work will be completed by the end of the summer, but because of some of the timing around the quality improvement project, all of the work may not be completed until December. The Division will report back in terms of what's been completed and then the accreditation committee will render a final decision on accreditation.

Communicable Disease Update

- Paul Cieslak, MD, Medical Director, Acute & Communicable Disease Section, PHD Paul provided an update on communicable diseases in Oregon, including Ebola, measles, chicken pox, and meningitis. Ebola – The risk to the average US citizen is low. Hospital systems in Oregon are making preparations to care for Ebola patients should the need arise. The Division is routinely getting notified by the Centers for Disease Control and Prevention (CDC) about "persons under monitoring" who have traveled from African countries where Ebola is still circulating, and local health departments follow them daily throughout the 21-day monitoring period.

Measles – Measles has been rare in Oregon in recent years, but in 2013 and 2014 there were a total of 11 cases after averaging 1 per year for many years before that. Nearly all of the cases have been in unvaccinated persons. One of the cases this year was associated with the breakout at Disneyland.

Chicken Pox – In Jackson County, there were 21 cases of chicken pox from November 22 to January 2 at one school. There was also an outbreak in Lane County at one school. In the wake of these breakouts, the Division has amended its administrative rules to clarify the ability to exclude susceptible but exposed students from school for an incubation period.

Meningitis – There was an outbreak in January and February at the University of Oregon in Eugene. With a newly available vaccine, vaccination was recommended to all undergraduates and to graduate students who were living in on-campus residence halls or in fraternities or sororities. The U of O and Lane County public health staff ran multiple vaccination clinics on campus with the goal of vaccinating 22,000 students.

Paul also talked a little about the work that the Division is doing in the area of healthcare-acquired infections and the surveillance that the Division is doing related to some of those infections. A lot of the hospitals are required by accreditation facilities to report various conditions through the National Healthcare Safety Network to the CDC. Oregon also has a law that allows it to mandate reporting so that the Division has access to the data that is reported to the CDC.

Public Comment Period

No public comment was given.

<u>Closing:</u>

The next Public Health Advisory Board meeting is:

June 12, 2015 9:00 a.m. – 12:30 p.m. Portland State Office Building 800 NE Oregon St., Room 1B Portland, OR 97232

If you would like these minutes in an alternate format or for copies of handouts referenced in these minutes please contact Brittany Sande at (971) 673-1291 or brittany.a.sande@state.or.us.