

**Public Health Advisory Board (PHAB)**  
**September 24, 2010**  
**Portland, OR**  
**Meeting Minutes**

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**Attendance:**

*Board Members Present:* Thomas Aschenbrener, Shawn Baird, Betty Bode, Tina Castañares, Tom Eversole, Barry Kast, Kathleen O’Leary, Bill Perry, Alejandro Queral, Bob Shoemaker, Steve Westberg

*Board Members Absent:* Tran Miers, Mike Plunkett, Rick Stone, Liana Winett

*OHA Public Health Division Staff:* Katherine Bradley, Tom Engle, Katrina Hedberg, Katy King, Mel Kohn, Brittany Sande, Gail Shibley

*Members of the Public:* Beryl Fletcher, Oregon Dental Association; Mary Lou Hennrich, Community Health Partnership; Matt Krebs, Pfizer Inc; Diane Lund, The Lund Report

**Opening:**

Chair Aschenbrener called the meeting to order, welcomed board members and invited introductions.

**Changes to the Agenda or Announcements**

Tom Eversole – In regards to discussions that the board has had on the idea of a world class public health system, PHAB should be part of a group that might articulate what that is or what one would look like. Thomas Aschenbrener and Tom could get together and discuss what that strategy might be and share with the board by email, and could also see if there are individuals that would like to engage in a process to develop some thinking around this topic and bring it to the full board.

Tina Castañares – Wanted to touch back and follow-up on the discussion from the last meeting about the workgroup around the sugar-sweetened beverage tax. According to Katy King, the workgroup has not been convened yet and the board members that volunteered to participate on the workgroup will be notified when the group does convene.

Alejandro Queral – Wanted to follow-up on the discussion about the creation of topic areas or summits on those topic areas from the core issues review in the minutes from the last meeting. In particular, if an agreement was reached in PHAB’s role in the creation of topic areas and summits around those topic areas.

If not, he wants to make sure that the board doesn't lose that idea if this is something that it wants to pursue. **This will be discussed further at the board retreat in December.**

### **Approval of Minutes**

(Handout: *PHAB Meeting Minutes, June 2010*)

Tina Castañares moved that the June 2010 minutes be approved as recorded; Bill Perry seconded the motion; board members voted in favor with no opposition or abstentions; minutes are approved and will stand as written.

### **Approval of Amended Bylaws**

(Handout: *PHAB Bylaws, revised June 15, 2010; ORS 431.195*)

Due to the passage of HB 2009 in the 2009 legislative session, the statute describing PHAB has been amended and the board's reporting obligation has changed from the Director of the Department of Human Services to the Oregon Health Policy Board. Bob Shoemaker worked with Shannon O'Fallon, Assistant Attorney General, to make the necessary amendments to the PHAB bylaws. However, due to some clarification needed on the amendments, **the board will have a chance to review a corrected version of the amended bylaws and will approve them at the December meeting.**

Note: The statute was amended as a result of HB 2009 incorrectly. The statute should say that the PHAB advises the Director of the Oregon Health Authority, rather than the Oregon Health Policy Board. This change will be a part of a clean-up bill in the 2011 legislative session. Therefore, the board will need to take a look at this again at either the June or September 2011 board meeting, when the bylaws will need to be amended again as a result of any legislation that may pass during the upcoming legislative session.

The board engaged in discussion about who they think their reporting obligation should be. **Further discussion on this subject will continue at the December board meeting.**

### **Nominating Committee for Board Chair and Vice Chair**

Tom Eversole declared his interest in being considered for the role of PHAB Chair. Betty Body declared her interest in being considered for the role of PHAB Vice Chair.

Thomas asked board members if anyone was interested in serving on the nominating committee for Chair and Vice Chair. The committee will poll the

board to see if there are other people interested in one of the roles, meet to have conversation about where the board is going as an organization and who would be the best candidates to fill the roles, recruit board members that they think would be good candidates that haven't declared their interest, and **will present their findings and recommendations to the board at the December meeting. Board members will vote for Chair and Vice Chair at the December meeting.** Tina Castañares, Bob Shoemaker, and Barry Kast volunteered to serve as the nominating committee. Thomas asked Bob to chair the committee and coordinate the communications.

### **Public Comment Period**

Mary Lou Hennrich – The U. S. House of Representatives is working on moving the Child Nutrition Reauthorization bill. This is the school lunch and school breakfast bill that has been passed by the Senate. There has been some controversy surrounding this bill because in order to get it to pass the Senate, there was some moving around of money in order for schools to be able to provide healthier food. A piece of the package was to cut back on the increase that had been put in for the Supplemental Nutrition Assistance Program (SNAP). That money was to continue for three years, but some of the increase to SNAP has been scaled back. This has caused the hunger advocates and the nutrition and child health advocates to fight against each other, and is a divisive issue in Oregon's hunger community and nationally. This child nutrition reauthorization needs to happen and if it doesn't happen in this Congress before the October recess, the prediction is that when they come back it won't make it. Congressman Earl Blumenauer has been lobbied heavily by the hunger advocates and he's holding out and saying he will not vote to pass the child nutrition reauthorization. Mary Lou asked the board to contact Tyler Frisbee, Rep. Blumenauer's assistant that is working on this, to urge him to tell Rep. Blumenauer that this bill should pass.

### **Public Health Division Update – Dr. Mel Kohn, Public Health Director, OHA** **Public Health Division**

Dr. Kohn began by talking about the budget crisis that the state is facing. Oregon has received substantial help with federal dollars that have come in, at least for this biennium. The federal dollars have primarily been for education and the Medicaid program. Because of the ripple effect that has, the Department has been able to not have to cut in some other areas like public health as heavily. However, just over \$500,000 will be cut from public health. Since less than 10% of the Public Health Division's budget comes from general fund, it's less of an impact than if the Division was funded more by general fund. The Division will engage in discussions with CLHO on the impact of these cuts on local public

health.

Other revenue forecasts will be coming in this biennium. It is likely that more cuts will have to be put forth. As part of the typical budget development process, each division has to put forward a 25% reduction list. Hopefully divisions won't have to go to a 25% cut, but the reduction lists go to the Governor's office to give them an idea of the agency recommendations of where they might think of shifting dollars. In December the Governor's Recommended Budget will come out, and ultimately the Legislature will make its decisions.

In late July, a Request for Proposal from the CDC appeared for improvements in public health infrastructure. The Public Health Division had three weeks to write it. There were two components: 1) driven by formula (every state would get an amount based on population) and Oregon was set to receive \$200,000/year for five years to set up an office of quality improvement; and 2) a competitive grant of up to \$2.7 million/year for five years. PHD pulled in CLHO, the Health Improvement Plan Committee, the Oregon Health Policy Board, and Oregon State University to assist in the grant writing process with the help of a grant writer from Multnomah County. Oregon was awarded almost \$1.9 million/year for five years. There is now a lot of work to do to implement this.

In the first year, the work will be around assessment and planning and will very quickly get into action. Given the compressed time frame for putting this together, the Division needs to get a lot of input from local public health and groups like PHAB about what should be done and how this should play out. As things get going, the Division will bring information back to PHAB and CLHO to see how to make sure that what is being done is meeting the needs out there. **There was some discussion by the board members about devoting time at the December retreat to weigh in on this.** Talking points from the Division were requested by board members for when questions about this are asked of them because it is often hard to explain when money is coming to public health and cuts are being made. Once Dr. Kohn finds out what the Division is funded for, he will talk with communication staff to determine what the right way to message it is.

**Update on National Association of Local Boards of Health (NALBOH) Conference – Tom Eversole, PHAB Vice Chair and Katy King, Government Relations Manager, OHA Public Health Division**

*(Handouts: NALBOH 2010 State Board of Health Survey – At a Glance; Points to Ponder: The Future of PHAB)*

Tim Tegge, Director of Membership and Affiliate Relations for NALBOH and Dr. Ginger Fenton, Project Director of Research and Evaluation for NALBOH, joined by phone to share information on the National Association of Local Boards of Health and the annual NALBOH conference that Tom Eversole and Katy King attended in August.

A lot of the conversation at the conference was around accreditation at the national level and what kind of a role that will play, and how boards of health at the state and local level will be involved.

Tim Tegge began by giving the board a quick history of NALBOH and shared information about the recent conference. The conference was designed as a way for NALBOH to learn what it can do to support the unique needs of state boards of health, including advisory boards. The conference also provided opportunities for members to interact with their peers from other states and was designed around networking opportunities that fostered interaction. NALBOH is looking forward to creating new ways to support the unique needs of state boards of health.

Dr. Fenton discussed the results of a survey that NALBOH did to see how they could better serve state boards of health and to provide updated data on the status of state boards of health in the United States. See handout of survey summary for more information.

Tom Eversole shared with the board his “points to ponder” that he put together for PHAB as a follow-up to the conference. He asked board members to think about what PHAB’s role is and what value PHAB brings to Oregon’s public health system or what it could bring. He also asked board members to think about how to fill in gaps around the different governing groups, and enhance the functions that each of the groups might be doing.

Alejandro suggested that there needs to be a way for the board to know what it means to be advisory and to know what happens to the board’s advice that it gives. He pointed out that going from meeting to meeting, there is no way of following up on what happened to recommendations that the board gave. The process is very informal and there should be some mechanism for knowing if the board’s advice was used, if it was followed up on, and why or why not. The board has reached a point where it would be great to find a system that formalizes and tracks and monitors what the board is recommending, and what happened to those recommendations. Specifically, what the board is doing, whom it is trying

to influence, and around what. **Further discussion on this topic will be held at the December strategic planning retreat. Part of the discussion will also include state board of health relationships to local boards of health.** There is a leadership role that PHAB might be able to play, particularly engaging local boards of health, commissioners, or elected officials.

**Resources and Opportunities for Working with the Centers for Disease Control - Thomas Aschenbrener, PHAB Chair**

Thomas and Tom have an appointment with Dr. Judith Monroe at the CDC, to talk with her about opportunities that Oregon has to get resources from the CDC. Thomas asked the board if they have thoughts and ideas that Thomas and Tom should put on their agenda to have a conversation with Dr. Monroe about.

The board engaged in conversation and came up with ideas such as: community health workers; a follow-up on a project using paramedics partnering with local organizations and state health to provide vaccinations to homebound persons; nontraditional partnerships (education, transportation, anti-poverty) and the opportunity to expand the definition of who the constituents of public health are, providing indicators of where resources need to be allocated rather than allocating resources to see if there is a result; how governmental public health works as a system together to reach out to a variety of partners both traditional and nontraditional, in a way that reinforces the capacity and skill of the governmental system to the partners it reaches out to; and accreditation and what the relief of being accredited will be for local public health departments .

**DEQ and PHD Coordination to Promote Healthy Environments – Dick Pedersen, DEQ Director**

*(Handouts: Information on the DEQ including history, projects and programs, administrative profiles, toxics reduction, committees and work groups, and the Environmental Quality Commission; DEQ 2009 – 2011 Legislative Approved Budget; “Oregon DEQ: A Statewide Snapshot of Our Work”; Org chart of the Office of Environmental Public Health, OHA)*

Gail Shibley, administrator of the Office of Environmental Public Health, began by briefly going over the organizational chart for the Office of Environmental Public Health, and discussing the partnerships between some of her offices and the Department of Environmental Quality (DEQ) and the importance of the relationships. She also briefly reviewed some of the materials that were distributed to board members.

Dick Pedersen shared with the board information on governance, how the DEQ is

organized, what they do, and some of the partnerships between DEQ and PHD. The board then engaged in discussion with Dick Pedersen and Environmental Quality Commission (EQC) member Donalda Dodson about the next generation of issues and areas of partnership and to get some of PHAB's insight and guidance.

A lot of what the DEQ does is implement programs that are delegated from the federal Environmental Protection Agency. DEQ is responsible for implementing the Clean Air Act, Clean Water Act, and the Hazardous Substances Act. Whenever the DEQ sets standards, the minimum stringency of it has to be in the federal act. Anything else that enhances it goes to the EQC to adopt and then has to be sent to the EPA for their endorsement. There are also state only rules and laws that the DEQ is responsible for implementing, such as solid waste management, but the DEQ's primary responsibility is around the federal delegation of the three acts. Nationally, like in Oregon, public health is becoming a key component to how standards are set both in water and air.

DEQ's mission is to be a leader in restoring, maintaining and enhancing the quality of Oregon's water, air and land. The work that DEQ is doing with public health and other agencies needs to look at shared resources, how to be most efficient, and how to prioritize work that needs to be done first. Some shared work with the Public Health Division includes drinking water, particularly source water protection as it relates to toxics that may contaminate source water, and environmental clean-up. Public health also assisted with working on studying new human health water quality criteria based on a much higher fish consumption rate. Right now, fish consumption is low and for the last three to four years a new standard has been developed at a much higher consumption rate. The new standard will be taken to the EQC next year. There are more things for the DEQ and PHD to work on together, including risk communication and compelling change of behavior.

Time was allowed for board members to ask questions and engage in discussion on the topics that Dick spoke on.

**Lunch with a Leader – Maribeth Healey, Deputy Director, US Senator Jeff Merkley's Office**

(Handout: *Biography; "Immediate Benefits of Health Care Reform"*)

Maribeth shared information about what the Senator has been doing and the committees that he serves on. He serves on the Health, Education, Labor and Pension Committee, which is the committee that took up health reform last year. He serves on the Environment and Public Works Committee, which takes up

topics such as transportation, linking to livable communities, and sustainable living as it relates to health. He also serves on the Banking, Housing and Urban Affairs Committee, and the Budget Committee.

Related to public health is the tobacco candy legislation that the Senator passed last year, after hearing from school districts in Portland that the canisters were showing up in schools and that Portland was a test market for the products. The product is now regulated by the FDA. He is co-sponsor of the Alzheimer's Breakthrough Act, which expands federal funding for research on Alzheimer's. He has also worked on the Autism Treatment Acceleration Act, the 21<sup>st</sup> Century Cancer Alert Act, and the Family Smoking Prevention and Tobacco Control Act that regulates the tobacco candies. One of the Senator's top priorities that he's concerned with is the healthcare workforce and the need to boost the workforce as more people are retiring out, but not a lot are coming in. He's been working to come up with a strategy and plans to move forward with it.

Maribeth stated that what the Senator would need from PHAB is ideas from Oregon. Specifically, how to take the learnings that have been developed in Oregon and transfer those to federal opportunities to help other states learn from Oregon's experiences. Under the Patient Protection and Affordable Care Act there are a number of boards and commissions for Americans to participate in the implementation of health reform. If there is interest among people that PHAB knows or people they serve that might be good to serve on the committees, board members are encouraged to let Maribeth and Senator Merkley's staff know so that when there are opportunities to serve, they would have a list to help facilitate that, write letters of recommendation, etc.

Time was allowed for board members to ask questions and engage in discussion on topics such as toxics, physical education and length of school days, and health educators and workforce development, particularly public health workforce development.

### **Health Improvement Plan Committee – Tammy Bray, Co-Chair and Lila Wickham, Co-Chair**

(Handout: *Health Improvement Plan Draft Sept, 2010*)

Tammy Bray and Lila Wickham presented a PowerPoint presentation to the board about the Health Improvement Plan (HIP) Committee's work, its draft plan and recommendations, and the work that will need to be done in the future to implement the plan and achieve the goals. The three goals of the HIP Committee's recommendations include: 1) Achieve health equity & population

health by improving social, economic & environmental factors; 2) Prevent chronic disease by reducing obesity, tobacco use & alcohol abuse; and 3) Stimulate public health, community, health system linkages, innovation, and integration that increased coordination & reduces duplication.

The Oregon Health Policy Board created the Health Improvement Plan Committee and their charter in January 2010. The Committee's stated objective is to "provide leadership, direction and oversight for the development of an Oregon Health Improvement Plan, under the Oregon Health Policy Board." The Committee consists of 26 members and has had 9 committee meetings and 8 community listening sessions between March 30 – September 10, 2010.

See the Committee's draft plan for more information.

### **Core Issue Review**

Laboratory System Improvement Program Assessment – Mike Skeels, Director, Oregon State Public Health Laboratory

(Handout: "*Laboratory System Improvement Program: Oregon Assessment Report*")

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The Oregon State Public Health Laboratory had an event in June to assess the strengths and gaps in the statewide laboratory system that supports public health. Board members Thomas Aschenbrenner, Kathleen O'Leary, Bob Shoemaker, Tom Eversole, and Tran Miers participated in the event.

Mike shared with the board what was learned and what will be done next. The greatest benefit from the process was captured in the comments discussed throughout the report. Main points and themes were captured, and in some cases next steps are identified.

The OSPHL has prioritized the essential services that it wants to address in chronological order: #9 – Evaluate effectiveness, accessibility, and quality of personal and population-based services; #4 – Mobilize community partnerships to identify and solve health problems; #7 – Link people to needed personal health services and assure the provision of healthcare when otherwise unavailable; #8 – Assure a competent public health and personal health care workforce; and #10 – Research for insights and innovative solutions to health problems. The next step will be for the OSPHL to identify workgroups for the essential services and begin a facilitated process to develop an action plan. Some PHAB members will be hearing from the OSPHL to either assist or identify others that can help with the next steps.

Public Health Preventative Block Grant – Tom Engle, Manager, Office of  
Community Liaison, OHA Public Health Division

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Tom provided a reminder that the PHAB is the advisory board for the Prevention Block Grant. **He would like time at the December meeting to give PHAB the application for the next year.** He suggested that he could possibly meet with PHAB executive committee in October or November to go over it with them in advance.

**Closing:**

Chair Aschenbrener declared the meeting adjourned.

The next Public Health Advisory Board meeting will be held on:

**Board Retreat  
Friday, December 3, 2010  
Northwest Health Foundation  
221 NW Second Avenue, Suite 300  
Portland, OR 97209  
10:30 a.m. - 4 p.m.**

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](mailto:brittany.a.sande@state.or.us).