

Public Health Advisory Board (PHAB)
September 11, 2015
Portland, OR
Meeting Minutes

Attendance:

Board Members Present: Josie Henderson, Brooke Kyle, Jeff Luck, Pat Luedtke, Loreen Nichols, Joanne Noone (by phone), Alejandro Queral

Board Members Absent: Shawn Baird, Jim Coffee, Joe Ichter, Tran Miers

OHA Public Health Division Staff: Sara Beaudrault, Danna Drum, Katrina Hedberg, Brittany Sande, Lillian Shirley

Members of the Public: Art Aryer, Department of Administrative Services (by phone); Mark Bonnano, Oregon Medical Association; BJ Cavnor, One in Four Chronic Health; Sarah Foster, Oregon Healthiest State Initiative; Jan Johnson, The Lund Report; Kathleen Johnson, Coalition of Local Health Officials; Erin Purchase; Lorren Sandt, Caring Ambassadors; Maeve Trick, Oregon Office of Rural Health (by phone); Jenifer Valley, Stoney Girl Gardens

Opening:

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

Changes to the Agenda & Announcements

No announcements or changes to the agenda were made.

Approval of Minutes

(Handout: *DRAFT PHAB Meeting Minutes, December 2014, March 2015 & June 2015*)

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

Public Health Division Update

- Lillian Shirley, Public Health Director, PHD

(Handout: *Functional Chart – Oregon Health Authority*)

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Lillian spoke about the changes happening at the Oregon Health Authority (OHA) and the new structure of the agency. She spoke about the "Functional Chart" for the agency and pointed out the changes that have been made. The new "Health Systems Division" contains anything that has to do with delivery of services (addictions and mental health, and Medicaid). Before the restructuring, OHA had 12-17 separate divisions, and now all of them have been integrated into 7 major areas. For the Public Health Division, one area of change is that it now has the Office of Health Licensing.

Lillian also announced that the Public Health Division has hired an administrator for the Center for Prevention and Health Promotion. Timothy Noe will start with the Division at the end of October. His background has been in disease prevention, particularly working with Native American populations. He has also served as the co-director for the CDC's Center for Equity and has worked for 20 years in chronic disease prevention among populations that are most at risk.

Lillian also announced that Jeremy Vandehey is now working in the Governor's Office as the Governor's health policy advisor. He previously worked as the legislative director for the Oregon Health Authority and most recently worked for Kaiser Permanente.

Lillian also provided a marijuana update. The OHA has been given a lot of responsibility by the Legislature around the implementation of retail marijuana. The early start of recreational sales will begin on October 1 and will be allowed in medical dispensaries. The Division has issued temporary rules for the early start of recreational sales of marijuana in dispensaries, and dispensaries need to notify the Division if they intend to sell to the public. The Division is working very closely with the OLCC, which is the agency that will have ultimate responsibility for regulation of recreational marijuana. Both agencies are working together to ensure that rules for recreational and medical marijuana align when possible.

Board members asked questions and engaged in discussion on various topics with Lillian.

State Health Improvement Plan (SHIP)

- Katrina Hedberg, MD, MPH, State Health Officer and State Epidemiologist, PHD (Handouts: "Strategic Priorities, 2015 – 2017"; "Oregon's State Health Improvement Plan"; "Oregon's State Health Improvement Plan (SHIP), Priority Targets and Strategies")

Katrina presented a PowerPoint presentation on the State Health Improvement Plan (SHIP). Copies of the slides are available upon request.

The SHIP is not just the plan for the State Public Health Division, but crosses all sectors. It sets some common goals and focuses on the leading causes of death, disease and injury, and avoidable differences in health outcomes (health disparities). The 2015-19 SHIP is a revision of "Oregon's Health Future, 2013". The purposes of the revision were to ensure transparency in the selection of priorities; engage communities in priority selection; and account for changes in Oregon related to health system transformation. During the summer of 2014, 7 community meetings were held around the state to get input from people including community activists, health care providers, and local health departments. During the community meetings the following key questions were asked:

1. Looking at these potential health issues, are there any missing?
2. Which of these health issues should be prioritized?
3. Which of these health issues are also priorities in your local area?
4. From a state perspective, what should be done to address these health issues?

The SHIP priority areas are:

- Prevent and reduce tobacco use;
- Slow the increase of obesity;
- Improve oral health;
- Reduce harms associated with substance abuse;
- Prevent deaths from suicide;
- Improve immunization rates; and
- Protect the population from communicable diseases.

The approach to meet each of the goals are that the priorities need to be understandable, measurable, and achievable within 5 years. Each priority area also contains interventions on multiple levels: population health; clinical and health system; and health equity.

Katrina gave a brief update on the outcome data in each of the 7 priority areas. A copy of the SHIP was provided to board members, and time was allowed for questions and discussion. The PHAB is going to be the body that the Division is accountable to in reporting out on the progress towards the strategies, activities, and metrics of the SHIP. Katrina requested input on how board members would like to receive updates on progress toward meeting SHIP goals, and if there is any information missing that the PHAB would like to see.

Public Health Modernization

- Sara Beaudrault, Policy Specialist, PHD

(Handouts: Drafts of Foundational Capabilities: Assessment and Epidemiology; Communications; Community Partnership Development; Emergency Preparedness and Response; Health Equity and Cultural Responsiveness; Leadership and Organizational Competencies; Policy and Planning)

Sara provided an update on the Division's work around defining the foundational capabilities and programs.

State and local public health have been working collaboratively to define the foundational capabilities and programs that HB 3100 says should be present in every area of the state through the governmental public health system. The state took the first pass to put something down about what the core functions of the public health system are and defining the specific roles and activities for state and local public health. This work has been done through the Public Health Division and Coalition of Local Health Officials (CLHO) Joint Leadership Team. CLHO has also been doing a lot of work to reach out to local public health. Comments are being taken through GovSpace and through webinars.

In terms of next steps, the definitions are being created to feed into the development of an assessment. HB 3100 requires all state and local public health agencies to complete an assessment on where they are at as far as meeting the

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foundational capabilities and programs. The assessment is expected to be done in the first quarter of 2016. The definitions will also feed into a policy or rules manual that will guide the work of state and local public health in Oregon. The Division is finalizing a contract right now with a technical writer who will assist with writing the policy manual.

The Board participated in discussion about the draft foundational capabilities and programs. Loreen Nichols and Pat Luedtke provided feedback from the local public health department perspective.

Sara requested that if board members have any feedback on big concepts that were either missed or captured incorrectly in the foundational capabilities documents, they e-mail those comments to Michael Tynan, policy officer for the Division. She also suggested that if there are places in the documents where the Division is reporting on current work and not looking toward the future, board members provide those comments to Michael as well.

Public Comment Period

Erin Purchase, Portland resident, natural healthcare worker in the pediatric medical marijuana community

Ms. Purchase spoke about the healing effects of cannabis oil, particularly how it helped her daughter with leukemia. Ms. Purchase also spoke about how by sharing her story she has quadrupled the number of pediatric patients on the Oregon Medical Marijuana Program. She also spoke about vaccination rates and her concern for childhood disease rates going up.

Lorren Sandt, Caring Ambassadors Program, advocate for people with Hepatitis C and lung cancer

Ms. Sandt thanked the Board and Division staff for their work on obesity, as it is quickly becoming the leading cause of liver cancer in the U.S. and liver cancer is now the number two cancer killer in the world. She also stated her appreciation for the work on the decrease in smoking. She stated that she is concerned about the work on communicable diseases and that there is little to no mention of Hepatitis C in the State Health Improvement Plan. Oregon has seen a 150%

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increase over other states in youth contracting Hepatitis C, so there are a lot of opportunities for interventions to happen now to decrease what happens in the future that Ms. Sandt urges the Division and the Board to look at. She mentioned needle exchange as an intervention in particular, and stated that there needs to be some sort of investment in needle exchange as a state to reduce the new cases of Hepatitis C and eliminate a lot of the public health problems that are being seen as a result of the outbreak in youth. She encouraged metrics around Hepatitis care and treatment, and looking at the data that has just come out of Oregon regarding Hepatitis C.

Jenifer Valley, Stoney Girl Gardens

Ms. Valley spoke about how cannabis oil that was created using cannabis that she grew helped treat her lung cancer. Since then she's been working with other cancer patients to treat them with cannabis oil. She has worked with thousands of patients to get them off of opiates and cure cancer using cannabis. She would like to see county health clinics signing Oregon Medical Marijuana Program licenses for qualifying patients and tracking outcomes.

BJ Cavnor, executive director of One in Four Chronic Health

Mr. Cavnor stated that he wanted to reiterate the comments made by his colleague, Lorren Sandt. It is extremely important to recognize Hepatitis C as the chronic, communicable disease that it is. While it is understood that treatment is expensive, it's most important that people are tested for Hepatitis C and that we are talking about prevention and linking people to care. He also spoke briefly about HIV and the importance of linking people to care for that as well, and that even when people are protected from HIV they are still at risk for other sexually transmitted infections. Not only does there need to be regular STI prevention, treatment and testing, but also discussions about harm reduction. Mr. Cavnor thanked the Division for its work on suicide prevention, but mentioned that he didn't see any information on the LGBT community called out specifically.

Closing:

The next Public Health Advisory Board meeting is:

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**December 11, 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.

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