

PUBLIC HEALTH ADVISORY BOARD

DRAFT Accountability Metrics Subcommittee meeting minutes

January 3, 2018

PHAB Subcommittee members in attendance: Eva Rippeteau, Eli Schwarz, Eva Rippeteau, Teri Thalhofer, Muriel DeLaVergne-Brown, Jennifer Vines

Oregon Health Authority staff: Sara Beaudrault, Cara Biddlecom, Myde Boles and Julia Hakes

Welcome and introductions

The November 22, 2017 meeting minutes were approved.

Effective contraceptive use

Sara shared feedback provided by Conference of Local Health Officials (CLHO) members on the [effective contraceptive use process measure](#) recommendations during their December 21, 2017 meeting.

Eli noted that option #2 could result in meaningless data from BRFSS and PRAMs for smaller counties. Eli stated that option #1 seems like what is naturally progressing in the field (new proposed program elements).

Myde shared that option #1 is challenging to create an incentive measure tied to funding for because it is a yes/no question.

Jen expressed concern that measuring unintended pregnancies puts focus on the individual rather than the system and does not have an equity-based lens. Teri noted that data show unintended pregnancy spans across socioeconomic status.

Eli said option #2 is a CCO measure which could create opportunity for additional partnership.

Sara shared that Oregon Health Authority has an Unintended Pregnancy Workgroup. She will have additional information to share about how the public health accountability metric aligns with the OHA Workgroup before the next PHAB Meeting.

Both process measures will be shared with PHAB on January 18. The goal is that PHAB will vote to adopt one.

Local public health process measure benchmarks and targets

Myde gave [a presentation](#) and [shared data](#) on the public health accountability metrics report and local public health process measure benchmarks and targets.

Eli asked how benchmarks are being set. Myde answered that in some areas there is an established benchmark, while in other areas PHD sections are making recommendations.

Eli made the recommendation to list counties in the metrics report from lowest to highest and asked that we standardize the way the graphs look. Myde clarified that graphs are still in draft form. Teri would like to see counties still listed in alphabetical order and clarified the differences between scope of work at the county and CCO level. Muriel agreed with Teri.

Myde reviewed the section for the [Prescription Opioid Mortality Metric](#). Eli asked for clarification around what “top 20% of Top Opioid Prescribers Enrolled in PDMP” means. Myde clarified that top 20% includes all prescribers.

Subcommittee members provided suggestions for presenting data in the report, including use of rates and absolute numbers, and confidence intervals. Data sources and additional context for how the data for each measure are reported should be added. Myde noted that some data are suppressed due to small numbers.

Sara told the Subcommittee that OHA will continue to work on the metrics report. OHA uses many different data sources and data collection mechanisms. We will standardize to the extent we can but there will be variations in what is reported.

Myde reviewed a concept for applying benchmarks and improvement targets. Eli said benchmarks are used and vetted in the CCO work and suggested that we look at each measure and see where variability arises. Sara noted this will be discussed at the next Subcommittee meeting.

Eva asked how funding would work if an improvement target is not met. Sara clarified that the Incentives and Funding Subcommittee will work on a mechanism for awarding incentive funds. Failure to meet improvement targets would not affect base funding.

OHA’s priorities for oral health

Amanda Peden gave a presentation on [OHA Oral Health Priorities and Metrics](#).

Eva asked if there is an oral health element in well-child visits. Amanda said there are, like dental varnish. This can be captured but there are issues with under-reporting.

Amy Umphlett and Kelly Hansen gave a presentation about [Accountability Metric: Dental Visits for Children 0-5: Review of public health data](#).

Sara stated that this subcommittee needs to determine whether we have a metric that meets the selection criteria set forth by the committee, and if it is possible to define the unique role of a local public health authority to make improvements in dental visits for 0-5 year olds. This will be on the agenda for the next meeting.

Teri and Muriel both noted that lack of funding for local public health programs is a huge issue and voiced that they would feel more comfortable with the accountability metrics when the system is fully funded.

Subcommittee business

Teri will be giving the Accountability Metrics Subcommittee update at the next PHAB meeting on January 18, 2018.

Public comment

No public comment was provided.

Adjournment

The meeting was adjourned.

The next Accountability Metrics Subcommittee meeting is scheduled for:
January 24, 2018 from 1-2 pm

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