

Public Health Advisory Board
Ad hoc subcommittee meeting minutes **-DRAFT**
March 6, 2017

PHAB Members present: Muriel DeLa Vergne-Brown, Safina Koreishi, Rebecca Pawlak, and Tricia Tillman

OHA staff present: Sara Beaudrault, Cara Biddlecom, and Angela Rowland

Members of the public: Kathleen Johnson, Teresa Schmidt, and Jennifer Valley

Develop guiding principles

At the February 2017 Public Health Advisory Board (PHAB) meeting it was determined that a small group of PHAB members would draft guiding principles to be endorsed by the Board to articulate how health care and public health should collaborate. The goal is to use these principles as a tool to help align the health care delivery system with public health through a number of venues, like partnership development, contracts and legislation.

Tricia announced that the Coalition of Local Health Officials (CLHO) developed their own guiding principles and shared them with the group over email.

Purpose: The subcommittee decided that the purpose of this tool is to not only serve PHAB members but all public health and health care system professionals.

It was recommended to hone in on legislative mandates that require coordination with early learning hubs.

Background: The Statewide Public Health Modernization Plan has specific strategies outlined that emphasize collaboration with partners including CCOs, early learning hubs, and health care delivery systems.

The principles: Tricia recommended referencing the Center for Disease Control (CDC) 6|18 initiative, which calls out the public health role related to assuring that best practices are adopted by the health care system.

Safina recommended to add “access and quality barriers” to the fourth bullet.

Rebecca recommended the following addition: *Ensure public health and health care system collaborations are outcomes oriented, sustainable, and supportive of health system transformation.*

Strategies: Muriel commented with her support for the leadership and governance strategy, since she finds that public health representation on boards is very important.

Safina would like to review existing shared metrics rather than develop new ones. Tobacco is a concrete example of a shared CCO metric. Muriel stated that CCO metrics are often clinical based and a lot of public health work is not.

Tricia would like to make it explicit where public health is contributing to CCO metrics currently and how they can in the future.

Rebecca recommended that the community health improvement plans and community health assessments be called out as a separate strategy.

Muriel mentioned the need for a best practice regarding the accreditation process for community health improvement plans (e.g. using the MAPP process). She suggested being mindful to ensure the community health assessment and community health improvement plan process meets national and federal requirements.

Tricia brainstormed that as the system moves toward modernization, local public health departments may want to know explore how health care can provide clinical services that are currently provided.

Muriel commented that everything around modernization is based on the needs of the individual communities. It is good to evaluate your community and what essentially the health department needs to do, as it can be different in other communities.

Cara proposed to add these comments to *leadership and governance*, or to add another bullet around *access to care*. It was recommended to do the latter.

Additional Source documents

Add CDC 6 | 18 initiative
Coalition of Local Health Officials guiding principles
Public Health Accreditation Board
Next Generation of Community Health

Questions:

- The group would like more context on who will use these principles as a tool and when they could be used.

Next steps:

- OHA will provide edits in track changes.
- PHAB members can share with their constituents.
- Draft guiding principles will be reviewed at the March 16th PHAB meeting.
- Muriel will present today's guiding principles discussion at the March PHAB meeting.

Action Item: Safina's Venn diagram showing where CCOs and public health overlap will be included in the March 16th PHAB materials.

Public Comment:

Jenifer Valley

Jenifer commented that she uses public health services. Her doctor marked in her chart that she shows symptoms of “drug seeking disorders” rather than what she felt was her true symptoms. She uses 0.5 gram of cannabis per day for late stage cancer. The problem she faces is a barrier to care due to the “drug war” in her exam room. She feels that even though marijuana is legal in Oregon, she has difficulty getting access to care. Jennifer commented that the Oregon Medical Marijuana Program has helped her save money and improve her health. She stated that federal studies on marijuana for evidence-based guidelines are currently not adequate.

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