

PUBLIC HEALTH ADVISORY BOARD

Public Health Modernization Funding Workgroup Minutes

August 18, 2023, 1:00 – 2:30 pm

Workgroup members: Meghan Chancey, Kirt Toombs, Betty Brown, Jackson Baures, Michael Baker, Beth Barker-Hidalgo, Kim La Croix, Florence Pourtal, Naomi Biggs, Dianna Hansen

OHA staff: Cara Biddlecom, Dolly England, Tamby Moore, Mina Craig, Danna Drum, Sara Beaudrault, Larry Hill

Meeting objectives:

- Approve 6/12, 6/20, 7/18 and 7/31 minutes.
- Revisit group agreements and how CBOs, LPHAs and OHA would like to be in community together.
- Finalize recommendations for geographic reach of new CBO funding.
- Review and finalize CBO work plan and Request for Grant Applications questions.
- Discuss next meeting agenda.

Welcome, introductions & agenda review

Group agreements

- Reviewed agreed upon group agreements
- Purpose of workgroup is to come together to make collaborative recommendation to build relations to serve community
- Not here to debate CBO funding
- Chat removed to allow everyone an opportunity to participate but also to slow down and be accommodating to everyone in the group as well as follow group agreements
- All approved June 12, June 20, July 18 and July 30 meeting minutes

Check in on July 31 meeting and discussion

- Goals for today

- Finalize recommendations for use of Public Health Modernization funding formula as a mechanism to estimate equitable funding to CBOs across counties
- Finalize next steps and approach for identifying list of currently underserved counties that should be prioritized during CBO RFGA process
- Recap 7/31 meeting
 - Reviewed tables of regional and county per capita investments for 2021 – 2023 CBO funding to understand current distribution of funds
 - Agreed to apply the Public Health Modernization funding formula to 2023 – 2025 funding to CBOs to estimate funds that will be awarded to CBOs in each county and region
 - Note that funding to CBOs will not be allocated through a funding formula as they are to LPHAs
 - The funding formula estimates equitable funding across counties, regions and populations
 - OHA should determine both a base amount and a cap on funding awards to CBOs
 - A base amount provides a minimum amount for CBOs to operate and complete planned work
 - A cap provides a maximum amount that each CBO could apply for

Finalize recommendations for equitable funding strategies and benchmarks for CBO funding

- 2023 – 2025 Public Health Modernization and Public Health Infrastructure funds to CBOs
 - 2021 – 2023 biennium a total of \$10mil went to CBOs
 - \$8.8mil to 74 CBOs with remainder retained for technical assistance support
 - 2023 – 2025 biennium a total of \$25.96mil to CBOs
 - How funds will be allocated
 - Provide funding to CBOs that received Public Health Modernization funds in 2021 – 2023 biennium

- OHA will retain some funds for technical and support CBO development in counties who continue to be underserved following RFGA fund decision
 - Allocate the remainder through RFGA process. This area of focus for this PHAB workgroup
- Public Health Infrastructure
 - 2021 – 2023 – there was no funding
 - 2023 – 2025 - \$4mil
 - Directed towards rural/frontier counties
 - How funds will be allocated
 - Increase funding for 26 rural capacity CBOs that were originally funded at \$25k in 2021 – 2023 biennium
 - Address remaining population gaps including in rural and frontier communities
 - Slide presented showing what an estimate of funding for CBOs when put in the funding formula
 - Slide presented comparison of 2021 – 2023 to 2023 – 2025 biennium funding with funding formula for CBOs
 - Slide presented showing CBOs funded by Public Health Modernization in 2021 – 2023 in each county totaling 74 CBOs
- Approach to identifying underserved counties and addressing through the RFGA process
 - Reassess 2021 – 2023 modernization funding CBO service areas based on updated work plans for 2023 – 2025 and update information on counties served
 - Use both the number of CBOs operating within a county and current per capita funding amounts to determine county priority areas of RFGA
 - For example, counties with 2 or fewer CBOs operating in the jurisdiction and CBOs receiving less than the median amount of per capita funding in 2021 – 2023
 - With increased funding in 2023 – 2025, open up the RFGA to CBOs operating in all counties. RFGA funding decisions will prioritize counties that are currently underserved
 - Suggestion of prioritizing local CBOs first over statewide CBOs in underserved counties
- Work group recommendations

- Use LPHA PHM funding formula as a guide to inform equitable distributions of CBO regional and county funding
- Establish a minimum biennial base funding level for CBOs so that CBOs can build staffing and infrastructure. Also establish a cap on CBO award amounts
- Expand the list of underserved counties for the 2023 CBO RFGA. Considering both number of CBOs operating in the county, excluding statewide CBOs
 - Add addendum to put prioritize local CBOs in underserved counties
 - Suggestion of adding in RFGA about a disclaimer of smaller minimum request for funding amounts to be considered on a per case basis.
 - Might put just a maximum cap of amount to request rather than a minimum to hopefully help people that might not apply because they don't want the minimum base amount but a smaller amount.

Public Comment

- Dr. Jim Gaudino – Advocate for increasing Public Health funding. Talks to and encourages legislators to put funding into Public Health. Appalled at the last session discussion of cutting funding to Public Health. Statistically proven that Oregon time and time again chronically underfunded. Encourages us to work together so we can show legislators things we can do while being underfunded to help see that we need more to accomplish more.

Next Meeting agenda

Next meeting August 28, 2023 at 9:00 am