



## **Public Health Advisory Board meeting minutes**

**Oct 12, 2023, 3:00-5:30 pm**

### **Attendance**

**Board members present:** Veronica Irvin, Erica Sandoval, Sarah Present, Rachael Banks, Robert Dannenhoffer, Jeanne Savage, Dean Sidelinger, Jocelyn Warren, Jawad Khan, Nic Powers

**Board members excused:** Marie Boman-Davis, Jackie Leung, Kelle Little, Ryan Petteway

**OHA Staff for PHAB:** Tamby Moore, Cara Biddlecom, Sara Beaudrault, Victoria Demchak, Nicholas Sievers, Charina Walker

### **Welcome and introductions.**

- PHAB members, subcommittee and workgroup members and staff introduced themselves.
- Veronica Irvin started with an acknowledgement of Rachael Banks's coming last days as Public Health Director.
- Rachael Banks gave opening remarks.
- September meeting minutes were approved. Erica Sandoval moved to approve these. Bob Dannenhoffer seconded this motion. All members approved the meeting minutes.

### **Statewide Public Health Workforce Plan**

Presentation by Wendy Polulech

- 2023-2025 Policy Option Package
  - Co-create with Public Health System partners a statewide public health workforce plan (OHA, LPHAs, Tribal Public Health Authorities, CBOs).
  - Timeline for Workforce Plan
    - Winter 2023/2024 – Analysis of existing workforce assessments
    - Spring 2024 – Create a high-level plan that will be used to inform the 2025 policy option package.
    - June 2025 – Delivery of a formal Workforce plan
  - A proposed subcommittee structure was presented.

### **Health Equity Framework Project**

Presented by Erica Sandoval and Katelyn Niel

- Project name: PHD Health Equity Framework
  - First phase timeline is between September 2023 and May 2024.
  - OHA deliverable for Public Health Modernization.
  - Legislature understands this deliverable as a Health Equity Framework rather than an Equity Framework.
  - Project Team & Roles
    - Erica Sandoval – Project Sponsor
    - Katelyn Niel – Project Lead
    - Nandini Deo – Project Lead
    - Nettie Tiso – Project Manager
    - TishaSweety Ruppelly John – Project Management Support
    - Sara Beaudrault – Support
  - Project objective is to develop guidance for public health system roles as it relates to OHA’s 2030 health equity goals.
    - Guidance will define who partners are, what they’re doing, and why/how roles are unique but also interdependent.
  - Anticipated Scope of Work

- Within scope: Deliverables (namely Environmental Scan, and development of Guiding Principles), project workgroup, collaboration with internal and external partners
  - Outside of scope: Equity plan, Workforce plan, subcommittee
- Existing frameworks and resources were presented, and Katelyn Niel asked members to contact her team if other resources were available but not accounted for.
- Workgroup structure was presented.
- Project Status
  - Project charter is in review.
  - Project plan is in progress.
  - Workgroup structure is in progress.
  - Environmental scan has begun.
  - Conversations with potential collaborators have begun.

### **Member discussion**

- Jeanne Savage asked if there is a role for the payer systems and CCOs to have an at large perspective in meetings and whether CCOs had a role in establishing health equity framework.
- Erica Sandoval answered by saying that idea could be explored if it pertained to an equitable conversation about modernization plans.
- Cara Biddlecom added that there could be space for CCOs. She noted that if CCOs were participating this early within the process that they could align on health care delivery.
- Dean Sidelinger commented that CCO participation can offer a lot of advantages to health care delivery.
- Erica noted that their team is working with Oregon Health Policy board and that their collaboration can open opportunities for CCO collaboration.
- Jeanne added that a foundational goal/purpose for collaborative systems should be to try and eliminate health inequities.
- Wendy Polulech suggested a workgroup meeting structure and asked members of PHAB to consider joining these workgroups.

## **Health Equity Review Policies and Procedures updates**

Presented by Robert Dannenhoffer

- The policy was presented with all the recent changes proposed previously.
- Cara Biddlecom noted that PHAB would not be adopting the Health Equity Policy and Procedures during this meeting. She said that there is still need for the OHPB Health Equity Committee to provide written feedback and that since the updated Health Equity Committee charter had recently been established, that alignment with the charter would be the step to finalizing these policies and procedures.
- Veronica Irvin asked whether the definitions in the Oregon Health Policy Board's charters and subcommittees reflected the updates to language regarding rural health inequities.
- Cara Biddlecom answered by noting that this issue was flagged and there was still some correspondence needed to iron out this issue.

## **Accountability Metrics Subcommittee updates**

Presented by Sarah Present

- The subcommittee approved the overall indicators.
- There are three CLHO subcommittees that are coming up with the process measures regarding incentive payments for work pertaining to communicable disease and environmental health.
- It was noted that the subcommittee was losing members and did not have the capacity to continue forward.
- Members suggested that this subcommittee should not sunset.

## **Public Health Modernization Funding Workgroup updates**

Presented by Cara Biddlecom

- Activities

- Establish workgroup following consultation with Public Health Advisory Board, CLHO, CBO Advisory Board.
- Identify benchmarks for equitable distribution of CBO funds.
- Consult LPHAs on decision-making process for awarding new CBOs grantees.
- Share LPHA and CBO modernization work plans.
- Provide ongoing training and technical assistance.
- Work to ensure all jurisdictions benefit from CBOs.
- Pilot project for pass-through funding.
- Ongoing communications.
- Progress of each activity (respectively)
  - Workgroup began meeting twice monthly in May 2023.
  - Benchmark recommendations complete in August 2023 – use LPHA funding formula as a guide.
  - Role of LPHAs determined at 9.26 meeting – two LPHA reviewers per application.
  - Will share workplans this Fall/Winter once they have been submitted to OHA.
  - Continuous, in process.
  - Will begin with new Request for Grant Applications with funds held aside to address needs for individual areas.
  - Pilot LPHA-CBO pairs and grant agreement changes underway.
  - Updates provided at monthly CLHO, AOC, PHAB and CBO Advisory Board meetings.

## **Public Health Modernization Plans**

Presented by Jessica Dale

- Local Modernization Implementation Plan
  - Local public health authorities are required by statute to assess, adopt, implement, monitor, evaluate and modify as necessary a local public health modernization plan.

- A plan for applying the foundational capabilities established under ORS 431.131 and implementing the foundational programs established under ORS 431.141 as required by ORS 431.417
    - Any other local public health program or activity that the local public health authority considers necessary to protect the public health and safety.
- OHA Modernization Implementation Plan
  - Administrative duties of OHA related to local modernization implementation plans.
    - Approval of local plans.
    - Monitor the progress of local plans.
    - For the purpose of distributing funds, consult with and consider the recommendations of LPHAs on the cost of full implementation.
- PHAB Modernization Implementation Plan
  - Make recommendations to the Oregon Health Policy Board on the establishment of the foundational capabilities (ORS 431.131) and foundational programs (ORS 431.141).
  - Make recommendations to the Oregon Health Policy Board on the adoption and updating of the statewide public health modernization assessment under ORS 431.115.
  - Make recommendations to the Oregon Health Authority and the Oregon Health Policy board on:
    - The development of, and any modification to, plans developed under ORS 431.115
    - The total cost to local public health authorities of applying the foundational capabilities (ORS 431.131) and implementing the foundational programs (ORS 431.141)
- CLHO Systems and Innovation Timeline
  - Fall 2022 – Winter 2023: Present current progress and plan to CLHO.

- Winter 2023 – Spring 2023: Establish regular check-ins with PHAB; survey LPHAs for input.
- Spring 2023 – Summer 2023: Add requirement in the Program Element to start working on the PHM plan.
- Summer 2023 – Fall 2023: Update PE51 based on legislative investment.
- Fall 2023 – Summer 2024: Seek additional input on needs.
- Summer 2024: Finalize guidance and optional templates.
- The Work of CLHO Systems and Innovation
  - CLHO Systems and Innovation will provide by end of June 2024:
    - Recommendations for tools/resources to complete an updated assessment of LPHAs implementation status.
    - Guidance for what is to be included in the local modernization implementation plans.
  - CLHA Systems and Innovation will provide (though possible not by June 2024):
    - An optional template for the local MIP.
    - Resource library for LPHAs.
- Key considerations for moving forward.
  - Where are we now?
  - How do we measure progress?
  - What do we need to move forward?
  - How does modernization align with other areas of work?
- Next steps for CLHO Systems and Innovation
  - Workgroups
    - Assessment/ workforce tool: This group will focus on what an updated assessment could be to help LPHAs gauge where they are currently with implementation vs. what they need to fully implement foundational capabilities and programs.
    - Plans requirements: This group will help create an outline of what must be included in local public health modernization

plans. This will be done in collaboration with OHA to also be used in the review and approval of plans.

- PHAB's Role
  - How would PHAB like to be kept updated on the development of local MIP?
  - What roles could PHAB play in supporting LPHAs to develop plans?

### **Public comment**

- No public comment

### **Adjourn**

- Meeting adjourned at 5:00 pm.