



## **PUBLIC HEALTH ADVISORY BOARD meeting minutes**

### **Educational Meeting on the 2024 Public Health Modernization Capacity and Cost Assessment**

**November 4, 2024, 12:00-1:30 PM**

Board members present: Veronica Irvin, Marie Boman-Davis, Tameka Brazile-Miles

OHA staff: Steven Fiala, Sara Beaudrault

Guest presenters: Rede Group, LLC staff including Jill Hutson, KC Thompson, Audra Baca, Erin Charpentier

#### **Welcome**

- Steven welcomed PHAB members and guests.
- Preliminary findings from the capacity and cost assessment being presented today can inform PHAB's upcoming work, including planning for 2025 and deliverables including the Public Health System Workforce Plan and Health Equity Framework.

#### **Capacity and cost assessment review and data**

- Audra provided an overview of today's session, which includes:
  - Background and assessment design
  - Respondents and data analysis
  - Data review for capacity implementation
  - Questions and wrap up
- Rede Group staff reviewed slide presentation.

#### **PHAB member discussion and questions**

- To what extent can variations due to self-assessment influence assessment findings?
- How do levels of expertise and capacity relate?

- Preliminary findings show higher implementation in areas like communicable disease control and assessment and epidemiology, areas that PHAB prioritized for early public health modernization finding. These are areas where significant investments were made during the COVID-19 pandemic, and the public health system will lose some of this capacity as COVID-19 funding ends.
- In the assessment can we see the impacts of COVID-19 funding on staffing and capacity? Yes, this is included in the cost portion of the assessment.
- Community partnership development was an area of gain during the COVID-19 pandemic, acknowledging that capacity isn't uniform across the system.
- Thinking about communications and policy, risk communications got better throughout the pandemic and is something we want to hold onto. Some of the lower implementation scores for policy relate to known gaps, like ability to conduct return on investment analyses.
- For health equity and cultural responsiveness, PHD staff expressed surprise at lower implementation scores despite significant investments. Staff have acknowledged that nearly a year into public health modernization implementation, our understanding of what it takes to fulfill health equity and cultural responsiveness is different and we've raised the bar. Higher expertise may result in higher expectations.
- Did LPHAs report on work of CBOs in their analyses? The scope of the assessment was governmental public health and doesn't necessarily reflect the role of community partners.
- Recommendation to footnote and differentiate foundational capabilities and programs.
- Can the denominator be displayed on slides? Percentages can be grabbed without the context of number of responses.
- Will there be another PowerPoint presentation as a final product?
- Figure 17: suggestion to have key messages to go along with the graphic. Consider the potential that the graphic could be grabbed and used without the context for what the graphic represents.
- Recommendation to consider the value of sharing data by county size band. Potential for viewers to focus on the outliers instead of the whole picture.
- Next steps include continuing to wrap up the cost data and share with PHAB later this year, with a final report in early 2025.

#### **Public comment**

No public comment was provided.

**Meeting ended at 1:21 p.m.**