

Modernization Improvement Workgroup

May 22, 2026

Attendees:

Steven Fiala, Valori Fleisher, Sara Beaudrault, Liz Hunt, Andrew Epstein, Veronica Herrera, Emily Wegener, Kim La Croix, Dana Selover, Laura Lui, Kim Tham, Drew Simpson, Florence Pourtal, Andrea Krause, Allison Mora, Marie Boman-Davis, Kirsten Aird, Sarah Lochner

Meeting notes:

- **Modernization Framework Alignment Discussion:** Steve led a discussion with the workgroup on whether to align Oregon's modernization framework more closely with the national Foundational Public Health Services (FPHS) framework, exploring key differences, potential benefits, and implications for statutory changes.
 - **Statutory Change Implications:** Marie raised a question about whether aligning with the national framework would require changes to statutes or other documents, and Steve, supported by Sara, clarified that any recommendation for alignment would likely necessitate legislative changes to keep statutes and rules current.
 - **Framework Comparison and Key Differences:** Steve outlined the main differences between the Oregon and national frameworks, including terminology (foundational areas vs. programs), splitting out leadership and organizational competencies, separating chronic disease and injury prevention and maternal, child, and family health, and the inclusion of equity as both a foundational capability and a wrap-around principle.
 - **Opportunity for Partial Alignment:** Laura questioned whether the group could selectively adopt elements from both frameworks rather than an all-or-nothing approach. Steve confirmed the conversation was not binary, allowing for a combination of preferred components, with the note that changes will have ripple effects on communications and modernization manual updates.
 - **Terminology and Language Considerations:** Participants, including Florence and Laura, discussed the importance of terminology, such as preferring “assessment and epidemiology” over “surveillance” due to public perception, and considered the clarity of “community specific services”

versus “above the line services” versus “additional programs” emphasizing the need for precise language to avoid confusion.

- *Equity Principle Integration*: Sarah and Florence discussed the placement of equity within the framework, considering whether it should remain a standalone capability or be integrated as a wrap-around principle, noting that equity is embedded throughout the manual and may be better represented as a cross-cutting principle.
- *Health Promotion Category Reconsideration*: The group discussed the benefits and challenges of splitting the prevention and health promotion foundational program area into separate program areas for chronic disease and injury prevention and maternal, child, and family health, similar to the national FPHS framework.
 - *Health Promotion as Cross-Cutting Strategy*: Marie, Kim, Florence, and others clarified that health promotion is not synonymous with chronic disease or injury prevention, but rather a set of strategies applied across multiple foundational program areas.
 - *Maternal, Child, and Family Health Emphasis*: Kim, Andrea, Florence, Kirsten, Sarah, Laura, and others discussed the inclusion and naming of maternal, child, and family health as a new foundational program area, separate from prevention and health promotion and mirroring the national FPHS framework.
 - *Scientific and Advocacy Rationale*: Kim and Andrea highlighted the scientific basis for emphasizing maternal, child, and family health as a foundational program area, noting its impact on lifelong health and its appeal to funders, while acknowledging operational challenges in addressing older adult populations due to structural and funding limitations.
 - *Population Inclusivity Concerns*: Kirsten and Sarah raised concerns about naming a foundational program area after a specific population, cautioning that older adults may feel excluded and advocating for language that reflects public health's commitment across the lifespan.
 - *Terminology and Lifespan Approach*: Marie suggested revisiting terminology such as 'lifespan,' 'life course,' or 'life stage,' noting that each carries different theoretical perspectives, and the

group discussed the possibility of incorporating a lifespan or equity wrap-around concept to ensure inclusivity.

- *Environmental Public Health and Regulatory Role:* Dana, Kim, Florence, and others discussed the placement and scope of environmental public health and regulatory work within the framework, considering whether regulatory functions should be a standalone capability and how environmental health intersects with other foundational areas.
 - *Regulatory Work as a Capability:* Dana explained that regulatory programs, such as healthcare regulation and EMS, often operate at the state level and are not always visible within public health frameworks, suggesting that regulation be acknowledged as a foundational capability rather than a foundational program area (similar to emergency preparedness).
 - *Environmental Health Scope and Integration:* Kim and Florence discussed the broad scope of environmental public health, including regulatory, climate, toxicology, and environmental justice issues, and debated whether certain functions, like licensing and climate-related work, should be integrated under chronic disease and injury prevention or remain within environmental health.
 - *Impact of Framework Changes:* Kim emphasized that restructuring environmental health within the framework could affect the discipline's visibility and resource allocation, especially during emergencies when environmental health resources are redirected, underscoring the need to maintain its status as a foundational program area.
- **Foundational Versus Additional Programs Clarification:** Steve briefly described the need to revisit foundational versus additional (or “above-the-line”) programs, including how to define and communicate the threshold and considering the expansion of public health’s scope in recent years (e.g., vaccine provision during the COVID-19 pandemic) and new where public health programs may fit in the framework (e.g., psilocybin program).
 - *Threshold Definition and Community Context:* Kirsten and Florence discussed the importance of maintaining a clear threshold between foundational and community-specific services, emphasizing that foundational programs should be accessible to all communities, while

above-the-line services reflect local priorities, and suggesting improved language and talking points to clarify these distinctions.

- **Upcoming In-Person Work Session Planning:** Steve and Sara outlined plans for the optional in-person work session on June 17th, including continued framework discussions, review of landscape assessment materials, and logistics for travel and participation.
 - *Session Structure and Objectives:* Steve proposed using the work session to continue framework conversations, review synthesized landscape assessment findings from other states, and facilitate small group discussions to reflect on themes and make recommendations. A more detailed agenda will be provided via email.
 - *Logistics and Travel Support:* Sara informed participants that OHA would cover travel costs for those not already attending the Conference of Local Health Officials meeting in Portland, and that the session may be in-person only, with further details to be provided via email.
- **Next Steps and Proposal Development:** Steve concluded the meeting by outlining next steps, including summarizing discussion themes, drafting a proposal for framework changes, and preparing materials for the next workgroup meeting and the in-person session.

Follow-up tasks:

- **Meeting Notes Distribution:** Send summarized meeting notes with key themes and decision points in a proposal format to all participants for review before the next meeting. (Steve)
- **In-Person Work Session Logistics:** Send follow-up email with information about the in-person work session, including draft agenda and travel details for participants not based in Portland and not already attending the CLHO meeting. (Steve, Sara, Valori)