

Multnomah County's Public Health Modernization priorities focus on increasing infrastructure and cross-program work to strengthen all foundational capabilities and program areas. Our priorities emphasize maintaining ongoing *emergency preparedness* for multiple, simultaneous public health crises, while expanding our understanding of climate-related threats on the horizon.

*Leadership and organizational competencies* priorities include identifying and coordinating programmatic priorities and strategic plans, facilitating data-driven decision-making, and investing in workforce capacity. Key plans to bolster staffing include augmenting administrative, Human Resources, and project management support; strengthening specialty areas that intersect multiple programs; and cross-training staff within program areas to mitigate loss in niche functions when staff are deployed to emergency response. Similarly, Multnomah County will strengthen *communications* capacity within programs and place additional emphasis on emergency preparedness and climate adaptation. *Assessment and epidemiology* priorities include cross-program data system integration; enhancing program evaluation and quality improvement infrastructure; and decolonizing data by centering community in all stages of data work and increasing use of qualitative, non-traditional, and/or strengths-based data. *Community partnership development* priorities include expanding diverse partnership staffing to further deepen authentic engagement of communities experiencing health inequities and building community ownership of their own health improvement. Infusing these assessment/epidemiology and community partnership priorities into all program areas is a key strategy to embed *health equity and cultural responsiveness* into all programs' day-to-day work.

Multnomah County is also the fiscal agent for a regional project which includes Clackamas, Washington, and Yamhill counties; Oregon Health Equity Alliance; and other community organizations. This partnership strengthens regional data access, public health response, and emergency preparedness for communicable disease and environmental health, while prioritizing community needs through a racial equity lens. Components include: 1) A Regional Data Mart to support high quality disease detection, response, and data-driven interventions. 2) A regional 24/7 reportable disease on-call staffing model and answering service. 3) A regional Public Information Officer position to build capacity for BIPOC and non-English speaking community communications across all-hazards.