

AGENDA

PUBLIC HEALTH ADVISORY BOARD

July 21, 2022, 2:00-4:00 pm

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1602414019?pwd=MWtPYm5YWmxyRnVzZW0vZkpUV0lEdz09>

Meeting ID: 160 241 4019

Passcode: 577915

One tap mobile

+16692545252,,1602414019#

Meeting objectives:

- Approve June meeting minutes
- Hear update from Strategic Data Plan subcommittee
- Discuss PHAB charter and bylaws

2:00-2:20 pm **Welcome, board updates, shared agreements, agenda review**

- Welcome, board member introductions and icebreaker
- Share group agreements and the Health Equity Review Policy and Procedure
- Confirm new meeting date and time, beginning in September
- Hear update on Gilliam County LPHA
- Hear update on federal Public Health Infrastructure Funding
- **ACTION:** Approve June meeting minutes

Veronica
Irvin,
PHAB Chair

2:20-2:30 pm **Subcommittee updates**

- Hear updates from Strategic Data Plan subcommittee

TBD,
Strategic Data
Plan

2:30-2:40 pm	Break	
---------------------	--------------	--

2:40-3:40 pm	Charter and bylaws review	Veronica Irvin, PHAB Chair
	<ul style="list-style-type: none"> • Summarize the May PHAB charter discussion • Propose updates to language on PHAB scope and objectives • Determine next steps for a small working group to update objectives or work on the charter in ongoing PHAB meetings 	All

3:40-3:50 pm	Public comment	Veronica Irvin, PHAB Chair
---------------------	-----------------------	-------------------------------

3:50-4:00 pm	Next meeting agenda items and adjourn	Veronica Irvin, PHAB Chair
---------------------	--	-------------------------------

PHAB Accountability Metrics

Group agreements

- Stay engaged
- Speak your truth and hear the truth of others
- Expect and accept non-closure
- Experience discomfort
- Name and account for power dynamics
- Move up, move back
- Confidentiality
- Acknowledge intent but center impact: ouch / oops
- Hold grace around the challenges of working in a virtual space
- Remember our interdependence and interconnectedness
- Share responsibility for the success of our work together



PUBLIC HEALTH ADVISORY BOARD (PHAB) MEETING MINUTES

June 16, 2022, 2:00-4:30 pm

Attendance

Board members present:

Dr. Veronica Irvin, Jackie Leung, Dr. Jocelyn Warren, Nic Powers, Kelle Little, Dr. Jeanne Savage, Dr. Ryan Petteway, Jawad Khan, Erica Sandoval, Dr. Dean Sidelinger

Board members absent:

Dr. Bob Dannenhoffer, Carrie Brogoitti, Rachael Banks, Dr. Michael Baker, Dr. Sarah Present

Oregon Health Authority (OHA) staff:

Sara Beaudrault, Tamby Moore, Victoria Demchak, Charina Walker, Drew Cohen, Diane Leiva, Danna Drum

Meeting objectives:

- Approve May meeting minutes
- Approve accountability metrics, funding formula and recommend submission of the public health modernization biennial report to Legislative Fiscal Office
- Recommend Preventive Health and Health Services Block Grant work plan for Fiscal Year 2023
- Discuss PHAB charter and bylaws

2:00-2:20 pm Welcome, board updates, shared agreements and agenda review

Veronica Irvin, *PHAB Chair*

- Welcome, board member introduction and icebreaker
- Share group agreements and the Health Equity Review Policy and Procedure
- Meeting format update
- **ACTION:** Approve May meeting minutes
 - The May minutes were approved unanimously.

2:20 – 3:25pm Biennial report to Legislative Fiscal Office

Jocelyn Warren, Accountability Metrics; Veronica Irvin, Incentives & Funding Subcommittee; Sara Beaudrault, OHA

- Overview –
 - Biennial report is sent every 2 years in even-numbered years. Two pieces to the report. Current investments: how funds are allocated, how it is being used and where we are making progress. Second piece looks forward to the next biennium: PHAB priorities and estimated cost for work needing to be done. The report has also been reviewed with the Conference of Local Health Officials.
- Accountability Metrics –
 - In agreement that a lot of work needs to be done for metrics & key indicators and to align with the state's goal for elimination of health inequities by 2030 and other state public health goals.
 - Committee developing new framework, selection criteria, process measures and key indicators that are high priority conditions and improve conditions of marginalized populations.
 - CBOs are not considered government entities so are not held accountable to metrics.
 - The committee hopes to have metrics by end of year to be approved and start having reports being pulled starting next year, 2023.

- Move to vote: voting on adjustments made to the process for developing metrics and indicators and metrics framework.
 - Votes: 6 voted for yes, 1 vote to abstain and 2 no response
- Incentives and funding –
 - Changed to FTE funding. Raising the base, starting at investments of \$20 million, which would allow all counties to hire additional FTE.
 - Began discussion on whether to add migrant and seasonal farm workers as an indicator in future biennium. Committee wants to know if PHAB members would like a future discussion on this topic. Propose to be added in future biennium.
 - Could also investigate adding houseless population as a key indicator
 - Does this include other areas of migrant workers, i.e., fisheries, meat packing warehouses, etc. (confirmed by Erica S. that this is inclusive of all migrant workers)
 - Other groups like Tribal communities could also be considered as indicators.
 - Discussed weighting of indicators and data sources.
 - A lot of the data is coming from the U.S. census, which is not a timely data source. Currently all indicators are weighted equally except for poverty and rurality.
 - No changes proposed to set of indicators for this biennium.
 - Requesting to look more local and timely data for the next biennium.
 - Requesting this biennium change to indicator weighting.
 - Decrease weighted for burden of disease and health status and increase the rest of the indicators.
 - Proposed weighted change: Health Status & Burden of disease – 5%. Racial/Ethnic Diversity, Rurality, Poverty, Education, Limited English proficiency – 18%.
 - Change was reviewed with CHLO, and they were okay with proposed changes.
 - If the changes are made, this will affect all funding allocations through the public health modernization funding formula.
 - Changes will go into effect 23 – 25 biennium.

- Making a shift in use of funds this year. Previously funds used for LPHA liaison roles. Roles are being taken out of this funding stream to allow more funds for implementing Healthier Together Oregon, the state health improvement plan.
- Starting October 1st Sara Beaudrault will transition to be block grant coordinator.
- Funds will support SHIP implementation – Healthier together Oregon and prioritized strategies.
- Funds will support some statewide strategies for Public Health Modernization
- Sexual violence primary prevention
 - Oregon Coalition against Domestic and Sexual Violence gets funding
- Funding –
 - \$1.1 million with \$88k towards sexual assault prevention
 - Public hearing was held on Tuesday. Two different organizations joined. No public comment was received.
- Move to vote: Recommend the Block grant funding and priorities as described in this presentation and notes.

Yes – 7	Abstain – 1	No – 0	No response - 1
---------	-------------	--------	-----------------

3:50 – 4:15 pm Charter and Bylaws review

Veronica Irvin, *PHAB Chair*

- Will discuss at next meeting as time had run out to further the discussion

4:15 – 4:25 pm Public Comment

Veronica Irvin, *PHAB Chair*

Sara Beaudrault, *OHA Staff*

- Written and verbal comment: Molly Kile – OHA Childhood Blood Lead poisoning prevention program, professor at Oregon State University, M1 Oregon quality commissioners
 - Asking for blood lead testing metric for Oregon Health Plan due to Oregon having the lowest rate in the region.

- PHAB members noted that this can be discussed in the accountability metrics subcommittee

4:25 – 4:30 pm Next meeting agenda items and adjourn

Veronica Irvin, *PHAB Chair*

- July's meeting to start with charter & bylaws discussion.
- Next meeting will be Thursday, July 21, from 2-4:30 pm.

Meeting adjourned at 4:30 p.m.

DRAFT

Charter and Bylaws Review

1: Authority & Purpose of PHAB

The Public Health Advisory Board (PHAB) is established by ORS 431.122 as a body that reports to the Oregon Health Policy Board (OHPB).

The purpose of the PHAB is to be the accountable body for governmental public health in Oregon. The role of the PHAB includes:

- A commitment to racial equity to drive public health outcomes.
- Alignment of public health priorities with available resources.
- Analysis and communication of what is at risk when there is a failure to invest resources in public health.
- Oversight for Oregon Health Authority, Public Health Division strategic initiatives, including the State Health Assessment and State Health Improvement Plan.
- Oversight for governmental public health strategic initiatives, including the implementation of public health modernization.
- Support for state and local public health accreditation.

2: PHAB Duties (pt 1)

Make recommendations to the OHPB on

- a) the development of statewide public health policies and goals.
- b) how other statewide priorities, such as the provision of early learning services and the delivery of health care services, affect and are affected by statewide public health policies and goals.
- c) the establishment of foundational capabilities and programs for governmental public health and other public health programs and activities.
- d) the adoption and updating of the statewide public health modernization assessment
- e) the development of and any modification to the statewide public health modernization plan

Charter and Bylaws Review

3: PHAB duties (pt 2)

- f) Establish accountability metrics for the purpose of evaluating the progress of the Oregon Health Authority (OHA) and local public health authorities in achieving statewide public health goals.
- g) Make recommendations to the Oregon Health Authority (OHA) and the OHPB on the development of and any modification to plans developed for the distribution of funds to local public health authorities, and the total cost to local public health authorities of implementing the foundational capabilities programs.
- h) Make recommendations to the Oregon Health Policy Board on the incorporation and use of accountability metrics by the Oregon Health Authority to encourage the effective and equitable provision of public health services by local public health authorities.
- i) Make recommendations to the OHPB on the incorporation and use of incentives by the OHA to encourage the effective and equitable provision of public health services by local public health authorities.
- j) Provide support to local public health authorities in developing local plans to apply the foundational capabilities and implement the foundational programs for governmental public health
- k) Monitor the progress of local public health authorities in meeting statewide public health goals, including employing the foundational capabilities and implementing the foundational programs for governmental public health.

Public Health Advisory Board

I. Authority

The Public Health Advisory Board (PHAB) is established by ORS 431.122 as a body that reports to the Oregon Health Policy Board (OHPB).

The purpose of the PHAB is to be the accountable body for governmental public health in Oregon. The role of the PHAB includes:

- A commitment to racial equity to drive public health outcomes.
- Alignment of public health priorities with available resources.
- Analysis and communication of what is at risk when there is a failure to invest resources in public health.
- Oversight for Oregon Health Authority, Public Health Division strategic initiatives, including the State Health Assessment and State Health Improvement Plan.
- Oversight for governmental public health strategic initiatives, including the implementation of public health modernization.
- Support for state and local public health accreditation.

This charter defines the objectives, responsibilities, and scope of activities of the PHAB. This charter will be reviewed no less than annually to ensure that the work of the PHAB is aligned with statute and the OHPB’s strategic direction.

II. Deliverables

The duties of the PHAB as established by ORS 431.123 and the PHAB’s corresponding objectives include:

PHAB Duties per ORS 431.123	PHAB Objectives
a. Make recommendations to the OHPB on the development of statewide public health policies and goals.	<ul style="list-style-type: none"> • Participate in and provide oversight for Oregon’s State Health Assessment. • Regularly review state health data such as the State Health Profile to identify ongoing and emerging health issues. • Use best practices and an equity lens to provide recommendations to OHPB on policies needed to address priority health issues, including the social determinants of health.
b. Make recommendations to the OHPB on how other statewide priorities, such as the provision of early learning services and the delivery of health care services, affect and are affected by	<ul style="list-style-type: none"> • Regularly review early learning and health system transformation priorities. • Recommend how early learning goals, health system transformation priorities, and statewide public health goals can best be aligned.

<p>statewide public health policies and goals.</p>	<ul style="list-style-type: none"> • Identify opportunities for public health to support early learning and health system transformation priorities. • Identify opportunities for early learning and health system transformation to support statewide public health goals.
<p>c. Make recommendations to the OHPB on the establishment of foundational capabilities and programs for governmental public health and other public health programs and activities.</p>	<ul style="list-style-type: none"> • Participate in the administrative rulemaking process which will adopt the Public Health Modernization Manual. • Verify that the Public Health Modernization Manual is still current at least every two years. Recommend updates to OHPB as needed.
<p>d. Make recommendations to the OHPB on the adoption and updating of the statewide public health modernization assessment.</p>	<ul style="list-style-type: none"> • Review initial findings from the Public Health Modernization Assessment. (completed, 2016) • Review the final Public Health Modernization Assessment report and provide a recommendation to OHPB on the submission of the report to the legislature. (completed, 2016) • Make recommendations to the OHPB on processes/procedures for updating the statewide public health modernization assessment.
<p>e. Make recommendations to the OHPB on the development of and any modification to the statewide public health modernization plan.</p>	<ul style="list-style-type: none"> • Review the final Public Health Modernization Assessment report to assist in the development of the statewide public health modernization plan. (completed, 2016) • Using stakeholder feedback, draft timelines and processes to inform the statewide public health modernization plan. (completed, 2016) • Develop the public health modernization plan and provide a recommendation to the OHPB on the submission of the plan to the legislature. (completed, 2016) • Update the public health modernization plan as needed based on capacity.
<p>f. Establish accountability metrics for the purpose of evaluating the progress of the Oregon Health Authority (OHA) and local public</p>	<ul style="list-style-type: none"> •

<p>health authorities in achieving statewide public health goals.</p>	
<p>g. Make recommendations to the Oregon Health Authority (OHA) and the OHPB on the development of and any modification to plans developed for the distribution of funds to local public health authorities, and the total cost to local public health authorities of implementing the foundational capabilities programs.</p>	<ul style="list-style-type: none"> • Identify effective mechanisms for funding the foundational capabilities and programs. • Develop recommendations for how the OHA shall distribute funds to local public health authorities. • Review the Public Health Modernization Assessment report for estimates on the total cost for implementation of the foundational capabilities and programs. (completed, 2016) • Support stakeholders in identifying opportunities to provide the foundational capabilities and programs in an effective and efficient manner.
<p>h. Make recommendations to the Oregon Health Policy Board on the incorporation and use of accountability metrics by the Oregon Health Authority to encourage the effective and equitable provision of public health services by local public health authorities.</p>	<ul style="list-style-type: none"> • Develop and update public health accountability metrics and local public health authority process measures. • Provide recommendations for the application of accountability measures to incentive payments as a part of the local public health authority funding formula.
<p>i. Make recommendations to the OHPB on the incorporation and use of incentives by the OHA to encourage the effective and equitable provision of public health services by local public health authorities.</p>	<ul style="list-style-type: none"> • Develop models to incentivize investment in and equitable provision of public health services across Oregon. • Solicit stakeholder feedback on incentive models.
<p>j. Provide support to local public health authorities in developing local plans to apply the foundational capabilities and implement the foundational programs for governmental public health.</p>	<ul style="list-style-type: none"> • Provide support and oversight for the development of local public health modernization plans. • Provide oversight for Oregon’s Robert Wood Johnson Foundation grant, which will support regional gatherings of health departments and their stakeholders to develop public health modernization plans.
<p>k. Monitor the progress of local public health authorities in meeting statewide public health goals, including employing the</p>	<ul style="list-style-type: none"> • Provide oversight and accountability for Oregon’s State Health Improvement Plan by receiving quarterly updates and providing feedback for improvement.

foundational capabilities and implementing the foundational programs for governmental public health.	<ul style="list-style-type: none"> • Provide support and oversight for local public health authorities in the pursuit of statewide public health goals. • Provide oversight and accountability for the statewide public health modernization plan. • Develop outcome and accountability measures for state and local health departments.
l. Assist the OHA in seeking funding, including in the form of federal grants, for the implementation of public health modernization.	<ul style="list-style-type: none"> • Provide letters of support and guidance on federal grant applications. • Educate federal partners on public health modernization. • Explore and recommend ways to expand sustainable funding for state and local public health and community health.
m. Assist the OHA in coordinating and collaborating with federal agencies.	<ul style="list-style-type: none"> • Identify opportunities to coordinate and leverage federal opportunities. • Provide guidance on work with federal agencies.

Additionally, the Public Health Advisory Board is responsible for the following duties which are not specified in ORS 431.123:

Duties	PHAB Objectives
a. Review and advise the Director of the OHA Public Health Division and the public health system as a whole on important statewide public health issues or public health policy matters.	<ul style="list-style-type: none"> • Provide guidance and recommendations on statewide public health issues and public health policy.
b. Act as formal advisory committee for Oregon’s Preventive Health and Health Services Block Grant.	<ul style="list-style-type: none"> • Review and provide feedback on the Preventive Health and Health Services Block Grant work plan priorities.
c. Provide oversight for the implementation of health equity initiatives across the public health system <u>by leading with racial equity.</u>	<ul style="list-style-type: none"> • Receive progress reports and provide feedback to the Public Health Division Health Equity Committee. • Participate in collaborative health equity efforts.

III. Dependencies

PHAB has established two subcommittees that will meet on an as-needed basis in order to comply with statutory requirements:

1. Accountability Metrics Subcommittee, which reviews existing public health data and metrics to propose biannual updates to public health accountability measures for consideration by the PHAB.
2. Incentives and Funding Subcommittee, which develops recommendations on the local public health authority funding formula for consideration by the PHAB.

PHAB shall operate under the guidance of the OHPB.

IV. Resources

The PHAB is staffed by the OHA, Public Health Division, as led by the Policy and Partnerships Director. Support will be provided by staff of the Public Health Division Policy and Partnerships Team and other leaders, staff, and consultants as requested or needed.

PHAB Executive Sponsor: Lillian Shirley, Public Health Director, Oregon Health Authority, Public Health Division

Staff Contact: Cara Biddlecom, Director of Policy and Partnerships, Oregon Health Authority, Public Health Division

PUBLIC HEALTH ADVISORY BOARD BYLAWS

~~November 2017~~April 2020

ARTICLE I

The Committee and its Members

The Public Health Advisory Board (PHAB) is established by ORS 431.122 for the purpose of advising and making recommendations to the Oregon Health Authority (OHA) and the Oregon Health Policy Board (OHPB).

The PHAB consists of the following 14 members appointed by the Governor.

1. A state employee who has technical expertise in the field of public health;
2. A local public health administrator who supervises public health programs and public health activities in Benton, Clackamas, Deschutes, Jackson, Lane, Marion, Multnomah or Washington County;
3. A local public health administrator who supervises public health programs and public health activities in Coos, Douglas, Josephine, Klamath, Linn, Polk, Umatilla or Yamhill County;
4. A local public health administrator who supervises public health programs and public health activities in Clatsop, Columbia, Crook, Curry, Hood River, Jefferson, Lincoln, Tillamook, Union or Wasco County;
5. A local public health administrator who supervises public health programs and public health activities in Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Wallowa or Wheeler County;
6. A local health officer who is not a local public health administrator;
7. An individual who represents the Conference of Local Health Officials created under ORS 431.330;
8. An individual who is a member of, or who represents, a federally recognized Indian tribe in this state;
9. An individual who represents coordinated care organizations;
10. An individual who represents health care organizations that are not coordinated care organizations;
11. An individual who represents individuals who provide public health services directly to the public;
12. An expert in the field of public health who has a background in academia;
13. An expert in population health metrics; and
14. An at-large member.

Governor-appointed members serve four-year terms and are eligible for reappointment. Members serve at the pleasure of the Governor.

PHAB shall also include the following nonvoting, ex-officio members:

1. The Oregon Public Health Director or the Public Health Director's designee;
2. If the Public Health Director is not the State Health Officer, the State Health Officer or a physician licensed under ORS chapter 677 acting as the State Health Officer's designee;
3. If the Public Health Director is the State Health Officer, a representative from the Oregon Health Authority who is familiar with public health programs and public health activities in this state; and
4. An OHPB liaison.

Members are entitled to travel reimbursement per OHA policy and are not entitled to any other compensation.

Members who wish to resign from the PHAB must submit a formal resignation letter. Members who no longer meet the statutory criteria of their position must resign from the PHAB upon notification of this change.

If there is a vacancy for any cause, the Governor shall make an appointment to become immediately effective for the unexpired term.

ARTICLE II

Committee Officers and Duties

PHAB shall elect ~~one~~two of its voting members to serve as the chair ~~and vice chair~~. Elections shall take place ~~no later than January of~~within the first quarter of each even-numbered year and must follow the requirements for elections in Oregon's Public Meetings Law, ORS 192.610-192.690. Oregon's Public Meetings Law does not allow any election procedure other than a public vote made at a PHAB meeting where a quorum is present.

The chair ~~and vice chair~~ shall serve a two-year terms. The chair ~~and vice chair are~~is eligible for one additional two-year reappointment.

If the chair were to vacate their position before their term is complete, ~~the vice chair shall become the new chair~~to a chair election will take place to complete the term. ~~If a vice chair is unable to serve, or if the vice chair position becomes vacant, then a new election is held to complete the remainder of the vacant term(s).~~

The PHAB chair shall facilitate meetings and guide the PHAB in achieving its deliverables. The PHAB chair shall represent the PHAB at meetings of the OHPB as directed by the OHPB designee. The PHAB chair may represent the PHAB at meetings with other stakeholders and partners, or designate another member to represent the PHAB as necessary.

Should the PHAB chair not be available to facilitate a meeting, the PHAB chair shall identify a voting member to facilitate the meeting in their place.

~~The PHAB vice chair shall facilitate meetings in the absence of the PHAB chair. The PHAB vice chair shall represent the PHAB at meetings of the OHPB as directed by the OHPB designee when the PHAB chair is unavailable. The PHAB vice chair may represent the PHAB at meetings with other stakeholders and partners when the PHAB chair is unavailable or under the guidance of the PHAB chair, or may designate another member to represent the PHAB as necessary.~~

Both the PHAB chair ~~and vice chair~~ shall work with OHA Public Health Division staff to develop agendas and materials for PHAB meetings. The PHAB chair shall solicit future agenda items from members at each meeting.

ARTICLE III

Committee Members and Duties

Members are expected to attend regular meetings and are encouraged to join at least one subcommittee.

Absences of more than 20% of scheduled meetings that do not involve family medical leave may be reviewed.

Date approved: ~~November 17, 2017~~

In order to maintain the transparency and integrity of the PHAB and its individual members, PHAB members must comply with the PHAB Conflict of Interest policy as articulated in this section, understanding that many voting members have a direct tie to governmental public health or other stakeholders in Oregon.

All PHAB members must complete a standard Conflict of Interest Disclosure Form. PHAB members shall make disclosures of conflicts at the time of appointment and at any time thereafter where there are material employment or other changes that would warrant updating the form.

PHAB members shall verbally disclose any actual or perceived conflicts of interest prior to voting on any motion that may present a conflict of interest. If a PHAB member has a potential conflict related to a particular motion, the member should state the conflict. PHAB will then make a decision as to whether the member shall participate in the vote or be recused.

If the PHAB has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member and afford an opportunity to explain the alleged failure to disclose. If the PHAB determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate corrective action including potential removal from the PHAB.

Members must complete required Boards and Commissions training as prescribed by the Governor's Office.

[PHAB members shall utilize regular meetings to propose future agenda items.](#)

ARTICLE IV

Committee and Subcommittee Meetings

PHAB meetings are called by the order of the chair or vice chair, if serving as the meeting facilitator. A majority of voting members constitutes a quorum for the conduct of business.

PHAB shall conduct its business in conformity with Oregon's Public Meetings Law, ORS 192.610-192.690. All meetings will be available by conference call, and when possible also by either webinar or by livestream.

The PHAB strives to conduct its business through discussion and consensus. The chair or vice chair may institute processes to enable further decision making and move the work of the group forward.

Voting members may propose and vote on motions. The chair and vice chair will use Robert's Rules of Order to facilitate all motions. Votes may be made by telephone. Votes cannot be made by proxy, by mail or by email prior to the meeting. All official PHAB action is recorded in meeting minutes.

Meeting materials and agendas will be distributed one week in advance by email by OHA staff and will be posted online at www.healthoregon.org/phab.

ARTICLE V

Amendments to the Bylaws

Bylaws will be reviewed annually. Any updates to the bylaws will be approved through a formal vote by PHAB members.

Date approved: ~~November 17, 2017~~