

Public Health Advisory Board (PHAB)
September 11, 2009
Meeting Minutes
(DRAFT)

Attendance:

Board Members Present: Thomas Aschenbrener, Shawn Baird, Betty Bode, Tina Castañares, Tom Eversole, Barry Kast, Tran Miers, Kathleen O’Leary, Mike Plunkett, Alejandro Queral, Bob Shoemaker, Rick Stone, Steve Westberg, Liana Winett

Board Members Absent: Bill Perry

DHS Public Health Division Staff: Katherine Bradley, Katy King, Mel Kohn, Brittany Sande, Gail Shibley

Members of the Public: Tom Holt, Oregon Association of Hospitals and Health Systems; Don Hood, Teaching Research Institute; Chris Kabel, Northwest Health Foundation; Connie Kirby, Northwest Food Processor’s Association; Diane Lund, The Lund Report; Kari McFarlan, Community Health Partnership; Dan Pierce, Elders in Action; Phyllis Rand, former PHAB member and Chair of Northwest Senior and Disabilities Services Advisory Council; David Rebanal, Northwest Health Foundation; Kennedy Smith, Oregon Health News

Opening:

Chair Aschenbrener called the meeting to order, welcomed the board members and invited introductions. Alejandro Queral was introduced as a new board member.

Dr. Kohn spent some time reflecting on the events of September 11, 2001 by showing the Board some video clips of New York on the New York Times website.

Changes to the Agenda or Announcements

Thomas reminded the Board that the next meeting will be at the Oregon State Public Health Lab in Hillsboro. Thomas also let the Board know that there still is no information regarding the future of PHAB once the Oregon Health Authority is in place.

Public Comment Period

Don Hood, Teaching Research Institute

(Handouts: “*The Brain Injury Resource Network*”, *outline of Mr. Hood’s*

comments, “Oregon Pediatric Acquired Brain Injury (PABI) Summary”, “The Fact of the Matter – Sports Concussion: Not just a bell-ringer”)

Mr. Hood was representing a grant from the HRSA Maternal and Child Health Bureau that works on improving access to services for people with traumatic brain injury. The focus is on collaborative approaches to improving services. He gave an overview of traumatic brain injury in Oregon including challenges, current activities surrounding brain injury, and what can be done now and in the future. Mr. Hood asked that the Board support activities related to brain injury and brain injury prevention in any way that it can. See outline of comments for more information.

Barry Kast provided some comment on the reflection of September 11, 2001 and suggested a book titled “Strength in What Remains” by Tracy Kidder as it relates to the experience of events such as September 11th.

H1N1 Summit Report – Dr. Mel Kohn, Acting Public Health Director

(Handout: “*Preparing for Pandemic H1N1 Influenza – A personal and family guide*”)

Dr. Kohn began by giving an overview of what is known about H1N1 at this point. The flu virus has changed in such a way that nobody has immunity and a pandemic has been declared by the World Health Organization. The best defense against the virus is vaccinations, but the regular seasonal flu vaccine that is used every year will not work on H1N1. A new vaccine is being developed and is in the process of being approved by the FDA. The risk groups for H1N1 are different than seasonal flu and include pregnant women, children and young adults up to 24 years of age, people ages 24 to 65 with chronic medical conditions, healthcare providers and EMS workers, and caretakers of young children under 6 months of age since they can’t be vaccinated.

Public health staff have been working hard at the state and county level to prepare for H1N1. Staff are looking at needing to vaccinate 2 million people in Oregon that fall into the priority groups in a short period of time. While facing this challenge, they are also looking at how to build the public health system and learn from this experience.

A flu summit was held in August to provide information to schools, the healthcare industry, the business community, local partners and emergency services. About 850 people attended in person and many more streamed via the internet. The summit plenary and breakout sessions can be viewed online at

www.flu.oregon.gov. The Public Health Division has activated a modified

Incident Command Center to be able to pull staff from daily duties to assist in the flu preparations.

Shawn Baird shared with the Board some activities from the EMS sector related to H1N1 preparations, particularly related to scope of practice for paramedics so that they could participate in mass vaccination clinics or PODs (point of distribution). Shawn has drafted a proposal to address the issue, at least in temporary rule, that would allow paramedics the ability to participate in mass vaccinations by administering flu shots and is working with the Division's Emergency Medical Services program and the Oregon Medical Board on scope of practice issues.

There was some discussion by the Board about writing a letter to the Medical Board in support of Shawn's proposal related to scope of practice issues for paramedics. However, after further discussion it was determined that the Board would need more time to discuss the issues before a decision could be made about supporting the proposal. Issues such as unintended consequences and county health department administrators' ability to declare an emergency were a part of the discussion. Katherine Bradley stated that weekly conference calls are being held with local county health departments and the Immunization Policy Advisory Team and these issues are being discussed, as well as issues across the Board of Nursing, Board of Medicine and Board of Pharmacy. Shawn will continue the work he's been doing and move forward with his proposal.

Approval of Minutes

(Handout: *PHAB Meeting Minutes, June 2009*)

Rick Stone moved that the June 2009 minutes be approved as recorded; the motion was seconded; board members voted in favor with no opposition or abstentions; minutes are approved and will stand as written.

Maternal and Child Health Priorities 2010-15 – Katherine Bradley, Administrator, Office of Family Health

(Handouts: *AMCHP State Profile 2009*, "*Oregon State/National Title V Performance Measures*", "*Oregon Title V Maternal and Child Health Needs Assessment 2010*")

Katherine provided information regarding what the Title V Maternal and Child Health Block Grant does in Oregon and what it funds. Every five years the Division is required to do a needs assessment and reset goals that drive the funding priorities. The Division is just beginning the needs assessment process and wants to know what role PHAB would like to have in it.

Title V funding is a block grant that has been with the state since the early 1900s. It is responsible for assuring and improving the health of women and children in the state and is a public health infrastructure grant at the state and local level. At the state level the expectation is infrastructure and at the local level the expectation is direct service. There are annual reporting requirements and every five years the goals are reset. Katherine provided a brief overview of the amount of money in the grant and how it is distributed.

The statewide comprehensive needs assessment is an analysis of health status, and identification of priority needs and measures for improvement. The priority now is community and partner engagement, and determining where the Division can leverage partnership activities with goals. An advisory committee is being formed to assist with this and partners are being identified. The advisory committee will work with partners in defining priorities and engaging in the agendas to find their place in them.

PHAB was asked if they had any suggestions of partners that should be included, or if PHAB would like to have a presence on the advisory committee. Mike Plunkett and Alejandro Queral indicated that they would be willing to serve on the advisory committee being convened to assist with the needs assessment.

Public Health Division Legislative Issues – Katy King, Government Relations Manager

(Handouts: “2009 Public Health Division Legislative Interim Action Work”, “DHS Public Health Division Legislative Report 2009”)

The Public Health Division tracked 633 bills and testified on 85 bills during the 2009 legislative session. Division staff met with CLHO and PHAW prior to the start of session to identify three core priorities: 1) Tobacco prevention 2) Obesity prevention 3) Funding for local public health departments. The funding for these priorities was tied to HB 2122, the Governor’s tobacco tax increase. Although the bill didn’t move despite polling showing public support, it was helpful to have the public health community aligned and on the same page for a core set of priorities.

Katy gave a brief overview of interim action work for the Division. Some interim action includes promulgating Oregon Administrative Rules when required, such as HB 2726 for menu labeling. See handout for details.

The Division will start meeting to determine a long-range legislative plan to map out goals for each year up through 2015. The Division will align goals with legislative policy proposals and focus efforts on where it will invest energies.

Looking ahead, at the December PHAB meeting the Division will start brainstorming with the Board to get some initial recommendations for the 2011 legislative agenda. At the March 2010 PHAB meeting, Katy will give a status report of the 2010 legislative special session and the Division's current funding status, along with a briefing on federal funding. At the June 2010 PHAB meeting PHAB will review the approved 2011 legislative agenda for the Division, and the Board will be asked for advice on strategies to advance the legislative and budget proposals.

PHAB Discussion: Questions for county chairs – Thomas Aschenbrenner and Betty Bode, PHAB Members

Members of the Board were provided time to give input on what they want out of the conversations with the County Chairs during “Lunch with a Leader”, and to add things that may not be covered in the discussion questions that were prepared ahead of time.

Lunch with a Leader – Chairs of County Commissions: Lynn Peterson, Clackamas County; Dick Schouten (Representing Chair Tom Brian), Washington County; Ted Wheeler, Multnomah County

(Handouts: *Biographies, Discussion questions for Board Chairs*)

The county commissioners began by giving a profile of their county. They talked about things such as demographics, diversity of the population, county growth, transportation challenges for rural communities and how that affects access to services, county budget and what portion of it goes to health and human services, and the county economy including major employers.

The commissioners were then asked a series of questions that gave them a chance to talk about public health in their county. They were asked to talk about how public health programs have been affected by urbanization, economic development and unemployment; what their local public health department is doing to respond to changing demographics in the county and what is still needed; the county budget and the percentage that makes up the public health department, including how much per capita is spent on public health; and what their vision is for public health in their county now and for the next decade.

Answers to the questions were similar across all three counties, emphasizing the challenges that the health departments are having in delivering services to the populations that need them. Changes in demographics, increased populations, growth in development, a growing number of people that are unemployed and

uninsured, and transportation issues in rural and outlying communities are challenges that each county faces. To meet these challenges, counties are working on getting services to the people that need them by going to where the population is, particularly in outlying areas; redeploying work to follow individuals that are moving to other areas of the county; redesigning services to meet the needs of the county, including hiring workers that speak languages other than English to support the needs of the community; working with partners to expand services in communities that need them; and making sure that there is a public health presence in new communities to promote healthier lifestyles, while still tending to the needs of rural communities.

The commissioners' vision for public health in their counties include the need for recognition of how public health touches our lives and for public health to be more pervasive in other things that are done; having a broader definition of public health to include community wellbeing to encompass more aspects of life and help people make easy and healthful choices; including public health in land use discussions and how land use relates to livability and health; and building a system around what the unique needs are in the community, rather than just chasing a stream of funding.

PHAB Special Projects Workgroup – Rick Stone, PHAB Member

Rick discussed the next step of the project (building a business case for public health). Phase 2 is to engage with members of the business community. The proposal is to use a series of focus groups of business community members and hold five sessions throughout the state, each with about eight to ten participants. The purpose of the sessions will be for business community members to review the report that has been developed, view a PowerPoint that has been created about the project, have a chance to ask questions and participate in an open-ended discussion about the issue, and complete a written measurement (questionnaire) that will be a combination teaching and information gathering document. Information and data gathered will then be aggregated to show what resonated in terms of making a case for and building momentum towards public health. It is estimated that this phase of the project will take three to four months to complete.

Rick asked if the Board is still okay with this project, if there is anyone that would like to become a part of it and assist with phase 2, and asked the Board for ideas of how to come up with funding to enhance the effort and use a professional firm rather than relying on volunteer time. Rick will continue to engage the Board via email in continuing the conversation about this project.

Core Issue Review – Thomas Aschenbrener

Thomas reminded board members that if there are any topics that they would like to see addressed at future meetings, to let him know.

One topic that was raised is the nation's recognition of the importance and existence of preventive care. The NWHF Board will be meeting with representatives from Senator Merkley's office to discuss what can be done to be advocates for prevention that will help influence federal legislation. Thomas will bring the outcome of that to the PHAB.

Another issue that was raised is the need to be thinking about health and healthcare 30 to 50 years away, as is currently done with environmental issues, rather than only a couple of years into the future.

Closing:

Chair Aschenbrener declared the meeting adjourned.

The next Public Health Advisory Board meeting will be held on:

**Friday, December 4, 2009
Oregon State Public Health Laboratory
3150 NW 229th Avenue
Hillsboro, OR
9:00 a.m. – 2:00 p.m.**

If you would like these minutes in an alternate format or for copies of handouts referenced in these minutes please contact
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