

# AGENDA

## PUBLIC HEALTH ADVISORY BOARD Charter and Bylaws Workgroup

September 23, 2022, 12:00-1:00 pm

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1609522375?pwd=YmUyTUk1dnloMnFjbINQMU1rUnZqZz09>

Meeting ID: 160 952 2375

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Meeting objectives:

- Approve September 16 minutes
- Review and recommend updates to PHAB bylaws

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<b>12:00- 12:10 pm</b>	<b>Welcome, shared agreements, agenda review</b> <ul style="list-style-type: none"><li>• Welcome, board member introductions</li><li>• Approve September 16 workgroup minutes</li></ul>	Cara Biddlecom, OHA staff  PHAB members
<b>12:10- 12:50 pm</b>	<b>PHAB charter and bylaws updates</b> <ul style="list-style-type: none"><li>• Review and recommend updated to PHAB bylaws</li><li>• Discuss additional recommended changes to reflect PHAB member discussion and Health Equity Committee recommendations</li><li>• Determine who will present the charter and bylaws at the October 13 meeting</li></ul>	Cara Biddlecom and Sara Beaudrault, OHA staff  PHAB members
<b>12:50- 12:55 pm</b>	<b>Public comment</b>	Cara Biddlecom, OHA staff

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**12:55 pm    Adjourn**

Cara  
Biddlecom,  
OHA staff

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# 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

# Draft Minutes

## PUBLIC HEALTH ADVISORY BOARD Charter and Bylaws Workgroup

September 16, 2022, 12:00-1:30 pm

### Meeting objectives:

- Approve Sept. 2 meeting minutes
- Review and recommend updates to PHAB charter and bylaws

**PHAB member attendance:** Dr. Bob Dannenhoffer, Dr. Jeanne Savage, Dr. Sarah Present, Kelle Little

**OHA staff attendance:** Cara Biddlecom, Sara Beaudrault

### Welcome, shared agreements, agenda review

- Welcome and introductions
- September 2 workgroup minutes approved

### PHAB charter and bylaws updates

- Discussed adding a definitions section to define the governmental public health system and community-based organizations.
- Deliverables section changes g. through m.:
  - Removed references to CBOs and RHECs in the left-hand column since additions would require statutory changes. Language addressing PHAB responsibilities related to CBOs added to the Objectives column.
  - Added opportunities in g./h./j. for PHAB to support federally recognized Tribes and the Urban Indian Health Program through the Tribal Consultation policy.
  - Modified language in h. to support use of public health accountability metrics to support public health system integration.
  - Clarified objectives in j. to clarify PHAB's role in supporting LPHAs in development of local modernization plans. Added an objective for planning supports PHAB could provide to Tribes and the Urban Indian Health Program if requested.
- Additional duties not listed in statute
  - Added objective for ongoing racial equity learning and continuing education for PHAB members.
- Dependencies
  - Added PHAB Strategic Data Plan subcommittee
- Resources

- No additional changes
- Scheduled an additional meeting for 9/23 to review bylaws

### **Public Comment**

- No public Comment

***Next meeting scheduled for September 23, 2022, from 12:00 pm – 1:00 pm***

Public Health Advisory Board, ~~July~~ October 2022 PHAB proposed updates

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). [PHAB performs its work in accordance with its Health Equity Review Policy and Procedure https://www.oregon.gov/oha/PH/ABOUT/Documents/phab/PHAB-health-equity.pdf.](https://www.oregon.gov/oha/PH/ABOUT/Documents/phab/PHAB-health-equity.pdf)

The purpose of the PHAB is to advise and make recommendations, ~~be the accountable body~~ for governmental public health in Oregon. The role of the PHAB includes:

- A commitment to leading intentionally, ~~but not exclusively~~, with racial equity to facilitate public health outcomes.
- A commitment to health equity for all people as defined in OHPB’s health equity definition.
- 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.
- Guidance for Oversight for Oregon Health Authority, Public Health Division strategic initiatives, including the State Health Assessment and State Health Improvement Plan.
- Support and alignment Oversight for local governmental strategic initiatives.
- Connect, convene and align LPHAs, Tribes, CBOs and other partners to maximize strengths across the public health system and serve community-identified needs.
- ~~and Support/coordinate/other? for state sponsored, local, Tribal and community-based local governmental (define) public health strategic initiatives, (define), including the implementation of public health modernization.~~
- Support for state and local public health accreditation and public health modernization.

Align public health systems to serve community-identified needs.

This charter defines the objectives, responsibilities, and scope of activities of the PHAB. ~~This~~

The 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. Definitions

Governmental public health system: A network of state and local public health authorities and government-to-government relationships with federally recognized Tribes. In Oregon’s

Approved by OHPB on April 4, 2017

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August 7, 2017 April 9, 2020

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Commented [BS1]: Changed “accountable body” to “advise and make recommendations”.

Commented [BS2]: First and second items in list are 2022 additions

Commented [BS3]: Changed “oversight” to “guidance”.

Commented [BS4]: Item added to complement previous item which focuses on statewide public health initiatives.

Commented [BS5]: 2022 addition

Commented [BCM6]: Look to PHAB membership to include CBOs, additional Tribal representative. Amend ORS 431.123. Requires statute change.

Commented [BS7]: Definitions section added to charter.

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decentralized public health system, local and Tribal governments have authority over most public health functions to ensure the health and well-being of every person in their jurisdictions.

**Public health system:** A broad array of governmental public health authorities and partners working collectively to improve health through interventions that reach those experiencing health inequities. Partners include but are not limited to community-based organizations, health care and behavioral health providers, public safety agencies, faith-based institutions, schools, environmental agencies, and the business sector.

**Community-based organizations (CBO):** Non-governmental organizations that provide community-informed, culturally and linguistically responsive services to improve the community's health and well-being. CBOs often provide services intended to reach those experiencing a disproportionate impact of health risks and disease. Within this charter, CBOs is used to refer to community-based organizations being funded by OHA.

## II.III. Deliverables

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

<b>PHAB Duties per ORS 431.123</b>	<b>PHAB Objectives</b>
a. Make recommendations to the OHPB on the development of statewide public health policies and goals.	<ul style="list-style-type: none"><li>• <u>Have knowledge of OHPB agendas and priorities.</u></li><li>• <u>Create opportunities to align with OHPB priorities and elevate recommendations to OHPB</u></li><li>• Participate in and provide <u>guidanceoversight</u> for Oregon's State Health Assessment.</li><li>• Regularly review state <u>public health data such as the State Health Profile</u> to identify ongoing and emerging health issues.</li><li>• <u>Use best practices and an equity lens to provide recommendations to OHPB on policies needed to address priority public health issues, including the social determinants of</u></li><li>• <u>health, per PHAB's health equity review policy and procedure.</u></li></ul> <p><u>Present to the OHPB for their retreats and strategic planning process</u></p> <p><u>Ensure a PHAB member participates where appropriate</u></p>

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Commented [BS8]: Items one and two are additions that describe ways PHAB can strengthen connections with OHPB.

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<p>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</p>	<ul style="list-style-type: none"><li>• Regularly review <u>early learning and health system transformation priorities</u>.</li><li>• Recommend how <u>early learning goals</u>, health system transformation priorities and statewide public health goals can best be aligned.</li></ul>
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Commented [BS9]: For objectives in this section, removed references to working with early learning and opted for using the broader "health system transformation" language that is inclusive of different sectors PHAB may wish to work with.

<p>statewide public health policies and goals.</p>	<ul style="list-style-type: none"><li>• Identify opportunities for public health to support <u>early learning and health system transformation priorities</u>.</li><li>• Identify opportunities for <u>early learning and health care delivery system system transformation</u> to support statewide public health goals.</li></ul> <p><u>Action — invite updates from early learning and health care transformation. Consider structure for keeping communication open after we determine what the PHAB wants</u></p>
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<p>c. Make recommendations <del>to on the inclusion of additional partners to governmental public health (such as CBOs and RHECs)</del> to strengthen the OHPB on the establishment of foundational capabilities and programs for governmental public health and other public health programs and activities, <del>including CBO's and HEC's</del></p>	<ul style="list-style-type: none"><li>• <u>Provide representation and participate in the administrative rulemaking process when appropriate, which will adopt the Public Health Modernization Manual.</u> <del>(Done — perhaps remove)</del></li><li>• <u>Verify Provide recommendations on updates to that the Public Health Modernization Manual as needed. is still current at least every two years. Recommend updates to OHPB as needed.</u></li><li>• <u>Make recommendations on the roles and responsibilities of partners, including LPHAs, Tribes, CBOs, OHA and others to the governmental public health system</u></li></ul>
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Commented [BS10]: This item is an addition.



<p>d. Make recommendations to the OHPB on the <u>adoption and updating of the statewide public health modernization assessment.</u> <u>adoption and updating continued assessment and progress toward statewide public health modernization of the statewide public health modernization assessment.</u></p> <p>e. Make recommendations to the OHPB on updates to and ongoing development of and any <u>modification to the statewide public health modernization plan.</u></p>	<ul style="list-style-type: none"> <li>• <del>Review initial findings from the Public Health Modernization Assessment. (completed, 2016)</del></li> <li>• <del>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)</del></li> <li>• <u>Make recommendations and updates to the OHPB on processes/procedures for updating the statewide public health modernization assessment.</u></li> <li>• <u>Perform ongoing evaluation, review and recommendations toward system performance using public health data and other sectoral data(?)</u></li> <li>• <u>Update the public health modernization plan as needed based on capacity.</u></li> <li>• <u>Use assessment findings to inform PHAB priorities.</u></li> </ul>
<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"> <li>• <u>Establish public health accountability metrics as a cCore set of metrics. For example, across any program s there would be relevant metrics related to access or reach.</u></li> <li>• <u>Use a mMenu of metrics, with organizations and orgs working in these areas would be eligible to receive incentives.</u></li> </ul>

**Commented [BS11]:** Combined d. and e. into one section with shared objectives.  
Removed references to work that has been completed, such as the 2016 public health modernization assessment.

**Commented [BS12]:** Objectives provide a framework for how accountability metrics can be used across the public health system.

<p>health authorities, <u>CBO's and HEC's</u> in achieving statewide public health goals.</p>	
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<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 <del>CBO's and HEC's</del>, and the total cost to local public health authorities of implementing the foundational capabilities programs.</p>	<ul style="list-style-type: none"><li>• Identify effective mechanisms for funding the foundational capabilities and programs.</li><li>• <del>Develop recommendations for how the OHA shall distribute funds to local public health authorities <u>and community-based organizations. Continue to evaluate and update funding recommendations.</u></del></li><li>• <u>Follow Tribal Consultation policy on funding to federally recognized Tribes and the Urban Indian Health Program.</u></li><li>• Review the Public Health Modernization Assessment report for estimates on the total cost for implementation of the foundational capabilities and programs. (completed, 2016)</li><li>• <del>Support stakeholders in identifying opportunities to provide the foundational capabilities and programs in an effective and efficient manner.</del></li></ul>
<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, <del>CBO's and HEC's</del></p>	<ul style="list-style-type: none"><li>• Develop and update public health accountability metrics <del>and local public health authority process measures.</del></li><li>• Provide recommendations for the application of accountability measures to incentive payments as a part of the local public health authority funding formula.</li><li>• <u>Make recommendations regarding the extension of metrics and use of incentive metrics, including CBOs funded by OHA, federally recognized Tribes and the Urban Indian Health Program, if approved through Tribal Consultation Policy.</u></li><li>• <u>Consider public health system's integration as it relates to achievement of accountability metrics.</u></li></ul>
<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. <del>CBO's and HEC's</del></p>	<ul style="list-style-type: none"><li>• Develop models to incentivize investment in and equitable provision of public health services across Oregon.</li><li>• Solicit <del>stakeholder</del> feedback on incentive models.</li></ul>

Commented [BS14]: Added PHAB responsibility to develop recommendations for distribution of OHA funds to community-based organizations.

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Commented [BS13]: Perhaps keep on a list of things that PHAB would want to change in statute

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Commented [BS16]: WG recommendation for this item to be reviewed by a PHAB member who represents a community-based organization. Also review f.

<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"> <li>• <del>Provide support and oversight for the development of local public health modernization plans.</del></li> <li>• <u>Provide support and vision for local modernization plans, and ensure collaboration with CLHO.</u></li> <li>• <u>Provide support and vision for Tribal planning as requested by Tribes through the Tribal Consultation process.</u></li> <li>• <u>Develop a strategy for PHAB to support vision and strategies for working with LPHAs on local modernization plans.</u></li> <li>• <del>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.</del></li> </ul>
<p>k. Monitor the progress of local public health authorities, <del>CBO's</del> <u>and HEC's</u> in meeting statewide public health goals, including employing the <u>foundational capabilities and implementing the foundational programs for governmental public health.</u></p>	<ul style="list-style-type: none"> <li>• <u>Provide oversight guidance and accountability for Oregon's State Health Improvement Plan by receiving quarterly updates and providing feedback for improvement.</u></li> <li>• <u>Provide support and oversight guidance for local public health authorities in the pursuit of statewide public health goals.</u></li> <li>• <u>Provide oversight guidance and accountability for the statewide public health modernization plan.</u></li> <li>• <del>Develop outcome and accountability</del></li> <li>• <u>measures for state and local health departments.</u></li> </ul>
<p>l. Assist the OHA in seeking funding, including in the form of federal grants, for the implementation of public health modernization.</p>	<ul style="list-style-type: none"> <li>• Provide letters of support and guidance on federal grant applications, <u>as applicable.</u></li> <li>• Educate federal partners on public health modernization.</li> <li>• Explore and recommend ways to expand sustainable funding for state and local public health and community health.</li> </ul>

m. Assist the OHA in coordinating and collaborating with federal agencies.	<ul style="list-style-type: none"> <li>• Identify opportunities to coordinate and leverage federal opportunities.</li> <li>• Provide guidance on work with federal agencies.</li> </ul>
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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"> <li>• Provide guidance and recommendations on statewide public health issues and public health policy.</li> </ul>
b. Act as formal advisory committee for Oregon's Preventive Health and Health Services Block Grant.	<ul style="list-style-type: none"> <li>• Review and provide feedback on the Preventive Health and Health Services Block Grant work plan priorities.</li> </ul>
c. Provide <del>guidance oversight</del> 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"> <li>• <u>Receive progress reports and provide feedback to the Public Health Division Health Equity Committee.</u></li> <li>• <u>Provide direction to the OHA Public Health Division on health equity initiatives.</u></li> <li>• <u>Participate in ongoing learning and continuing education to support PHAB priorities and initiatives</u></li> <li>• <u>Participate in collaborative health equity efforts.</u></li> </ul>

#### IV. Dependencies

PHAB has established ~~three~~ subcommittees that ~~will~~ meet on an as-needed basis in order to comply with statutory requirements and support PHAB priorities and initiatives:

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.

2-3. Strategic Data Plan Subcommittee, which provides recommendations and develops a framework for modernization of public health data in the state of Oregon.

PHAB shall operate under the guidance of the OHPB.

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#### IV.V. 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: Rachael Banks, Public Health Director, Oregon Health Authority, Public Health Division

Staff Contact: Cara Biddlecom, 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~~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](http://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.