

AGENDA

PUBLIC HEALTH ADVISORY BOARD

March 9, 2023, 3:00-5:30 pm

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1614044266?pwd=ekpYekxaMm92SHN0dngzTW9ZeldsUT09>

Meeting ID: 161 404 4266

Passcode: 938425

One tap mobile

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Meeting objectives:

- Approve February meeting minutes
- Discuss PHAB subcommittees and workgroups
- Discuss next steps for developing a public health system vision for equity
- Hear from community-based organizations on their priorities, challenges and accomplishments with current public health equity investments

3:00-3:10 pm **Welcome, board updates, shared agreements, agenda review**

- Welcome, board member introductions and icebreaker in the chat
- Share group agreements and the Health Equity Review Policy and Procedure
- **ACTION:** Approve February meeting minutes

Veronica Irvin,
PHAB Chair

3:10-3:25 pm **Discuss PHAB history and relationship to the Oregon Health Policy Board**

- Share Oregon Health Policy Board updates

Steph Jarem,
OHA

3:25-3:45 pm **PHAB planning for 2023**

- Discuss work plan for 2023

Veronica Irvin,
PHAB Chair

	<ul style="list-style-type: none"> Continue to discuss planning for retreat and developing a public health system vision 	
3:45-3:50 pm	Subcommittee updates <ul style="list-style-type: none"> Hear updates from the Accountability Metrics Subcommittee 	Sarah Present, Accountability Metrics Subcommittee
3:50-4:00 pm	Legislative updates <ul style="list-style-type: none"> Discuss public health priority bills Discuss public health budget 	Charina Walker and Cynthia Branger Muñoz, OHA
4:00-4:10 pm	Break	
4:10-5:10 pm	Public health modernization investments and improvements, 2021-23 <ul style="list-style-type: none"> Hear from community-based organizations about priorities, challenges and accomplishments with current funding 	Dolly England, OHA Liberty Avila, Northeast Oregon Network Emily Little and Jessalyn Ballerano, Nurturely
5:10-5:20 pm	Public comment	Veronica Irvin, PHAB Chair
5:20-5:25 pm	Next meeting agenda items and adjourn	Veronica Irvin, PHAB Chair

-
- OHA will invite Tribal Health Directors to provide presentations on current public health modernization priorities and funding in April
-

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoken language interpreters.
- Written materials in other languages.
- Braille.
- Large print.
- Audio and other formats.

If you need help or have questions, please contact Cara Biddlecom: at 971-673-2284, 711 TTY, or publichealth.policy@dhsoha.state.or.us, at least 48 hours before the meeting.



**Public Health Advisory Board meeting minutes
February 9, 2023, 3:00-5:30 pm**

Attendance

Board members present: Rachael Banks, Mike Baker, Bob Dannenhoffer, Veronica Irvin, Jackie Leung, Kelle Little, Sarah Present, Erica Sandoval, Dean Sidelinger, Ryan Petteway, Jawad Khan, Marie Boman-Davis, Jocelyn Warren, Nic Powers

Board members absent: Jeanne Savage, Meghan Chancey

PHAB subcommittee members and workgroup members present:

OHA Staff for PHAB: Sara Beaudrault, Cara Biddlecom, Victoria Demchak, Charina Walker, Savannah Schlicht

Welcome and introductions

- January PHAB minutes: Bob made a motion and Jocelyn seconded the motion. Two members, Sarah and Nic abstained. All others approved.
- Veronica shared that she is hopeful to have an OHPB Liaison for PHAB assigned within the next couple months. In the meantime, an OHA staff person who is closely involved in OHPB could join PHAB in a limited duration to support connections between PHAB and OHPB. Some members voiced agreement, and OHA staff will invite this person to join.

Subcommittee updates

Strategic Data Plan Subcommittee

- At the most recent meeting, the subcommittee continued to discuss the Behavioral Risk Factor Surveillance System survey, building on survey

modernization recommendations. They focused on different ways to identify, ask, interpret and report back on questions in a way that is meaningful to communities. The subcommittee began to discuss the upcoming state health assessment.

Health Equity Review Policy and Procedures workgroup

- Meetings are being scheduled and the workgroup will have a report out for the March meeting.

Legislative update

- PHAB received an email last week describing public health investments in Governor Kotek's recommended budget, which was released on Jan 31. Public health modernization was included with a \$50 million request.
- Reviewed other items that are relevant to public health, included on Slide 13 of the meeting packet.
- PHD priority bills:
 - HB 2278: Pharmacist flu vaccination for all.
 - HB 2279 Death with Dignity fix.
 - Not yet introduced: technical updates to newborn screening
 - Not yet introduced: Public health housekeeping bill. If introduced, this bill will include PHAB membership changes.
- HB 2773 Coalition of Local Health Officials (CLHO) workforce bill
- Bob asked if there is a state strategy for PPE. Cara responded that there is work through Office of Emergency Management to look at improvements to PPE stockpile and distribution. At the same time OHA COVID stockpile will be transferred to be available for other public health emergencies. OHA can bring a more in-depth conversation if PHAB would like it.
- The final versions of the public health modernization funding scenarios documents that were developed in December and January were shared out. The \$50 million in the Governor's Recommended Budget varied slightly from proportional allocations related to funding for the reproductive health provider network.
- Next steps in budget process: The Governor's Recommended Budget is a starting place for the legislature. The legislature will adopt the OHA budget and decide which policy packages to include. OHA will present its budget in March. There will be opportunity for public testimony in the days following

the budget presentation. OHA's budget is usually among the last bills to pass in June.

Public health modernization system planning

- Cara provided background. PHAB spent close to nine months last year updating its charter and bylaws, which included conversations about PHAB's role within the public health system and developing a vision that includes CBOs. The updated bylaws include additional positions to increase community representation, contingent on legislative action. The process in December and January to develop modernization funding scenarios highlighted the need to better understand what we're collectively working toward. Also, it has been nine years since the Future of Public Health Services Task Force report, and a lot has changed since then.
- Members reviewed a potential timeline and process (slide 15).
- Kelle said the approach seems like a reasonable path forward.
- Jocelyn asked if this work could include developing definitions. At the local level, the public health system includes a range of types of partners, including mandated partnerships with CCOs and early learning hubs. PHAB is focused on how public health and CBOs work together, but it shouldn't be exclusive since there are other collaborations that are critical.
- Cara shared PHAB's new definitions that were included in the charter that PHAB adopted in November 2022.
- Veronica would like to include presentations from OHPB to endure aligned priorities and connections.
- Sarah suggested getting a retreat scheduled soon, especially if planned for the summer.
- Marie recommended using a neutral facilitator.
- Sarah said that as part of the process, PHAB needs ways to hear from partners about how the work of governmental public health is perceived. Is there an opportunity for open listening sessions?
- Ryan asked how sectors such as public safety and business fit into public health system. What does PHAB mean by including these in its definitions? Ryan would like to see more focus on health in all policies, and the ways in which public health brings agencies together at all levels to come up with coherent strategies for shared work and funding.
- Jawad supported the idea of listening sessions and surveys, perhaps through a community assessment of CBOs, community leaders and

members of the public. We need this for system planning with goals and objectives.

- Marie said that this work needs to be grounded in PHAB's Health Equity Review Policy and Procedure.
- Jocelyn agreed and said PHAB needs to envision together how to eliminate health inequities.
- Mike said that there is still confusion about what comprises the public health system and how partners work together. Clarity is needed to be able to develop the system.
- Marie expressed gratitude for the amount of time dedicated to this. It feels like there is space to do the work thoughtfully over this year.
- Veronica and Cara shared next steps:
 - Set schedule for retreat.
 - Work on a contracted facilitator.
 - Bring back key questions to continue a discussion in March. This may include talking about definitions, how we work together and how to move equity work forward. PHAB can also continue to discuss how it wishes to facilitate public engagement and use source materials that include information provided by communities previously.

Public health modernization investments and improvements 2021-23

- Sara B. provided an overview of current public health modernization funding to local public health authorities. The overview included information on budgets, communicable disease and climate strategies, community partnerships, and investments in regional partnerships. (Slides 17-27).
- PHAB heard from two local public health administrators about local modernization priorities, accomplishments and challenges. These presentations included discussion on communicable disease and climate and health investments and the role of partnerships. Presentations were provided by Katie Plumb, Health Administrator in Crook County (Slides 28-38) and Jennifer Little, Health Administrator for Klamath County (Slides 39-46).
- Sarah expressed excitement at getting to learn about work happening in other areas of the state from where she works. Sarah reflected on the creativity needed to implement so much of public health's work. Sarah asked about volunteer management and whether they use MRC or SERV-

OR. Katie said they mostly relied on local volunteers rather than bigger systems.

- Jocelyn asked about tri-county partnership that helped with surge. How did this work when all counties were under the same level of stress? Katie said it was less of a tri-county response during COVID than for other, more localized events.

Public comment

- No comment provided

March meeting agenda items and 2023 work plan

- Work plan and calendar of discussion topics were included in the meeting packet. Veronica recommends including this at the beginning of the March meeting. Members can send feedback, comments or other items PHAB members would like to have added to OHA staff prior to the March meeting.

Adjourn

- Meeting adjourned at 5:30 pm.
- The next Public Health Advisory Board meeting will be held on March 9, 2023 from 3:00-5:30 pm.

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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

Public Health Advisory Board (PHAB) & Oregon Health Policy Board (OHPB)

Background and history

Steph Jarem, OHA
Director, Office of Health Policy



Topics to discuss

- History of Oregon Health Policy Board and PHAB partnership
- OHPB Committee experiences
 - Appointments/membership
 - Liaisons
 - Workplan development
 - Questions

History of OHPB & PHAB

History of OHPB

- Established via HB 2009 (2009) – launched in 2010/2011; previously was the Oregon Fund Board
- **Role:** Policy-making and oversight body of OHA
- Nine members, only 4 of which receive income from health-related field
- Initial committees:
 - Health Care Workforce
 - Public Health Benefit Purchasers (non-existent now)
 - Metrics & Scoring (replaced with Health Plan Quality Metrics)



Implementation of
the Cost Growth
Target Program



OHA's 1115 Waiver
Renewal



Ensuring Work is
Centered on Health
Equity



Committees of the
Board work

OHPB Priorities 2021- 2023

History of PHAB

- Established via HB 3100 (2015)
- Previous public health committee functioned as a public health accreditation and oversight body, independent from OHPB
- 16 members
- Primary roles:
 - Launch and oversee Public Health Modernization
 - Provide recommendations on public health related topics that serve to further statewide goals

History of PHAB in relation to OHPB

- Strong initial launch for PHAB (so much to do!)
- OHPB connection/support of Healthier Together Oregon
- Shifting relationship during early COVID
- New future – many opportunities

HB 3100 (2015):
The **Oregon Public Health Advisory Board** is established for the purpose of advising and making recommendations to the Oregon Health Authority and the Oregon Health Policy Board.

OHPB Committees

OHPB Committee Appointment

Appointed by Governor

Oregon Health Policy Board (OHPB)	Medicaid Advisory Committee (MAC)
Health Insurance Marketplace Advisory Committee (HI-MAC)	Sustainable Health Care Cost Growth Target (CGT)
Public Health Advisory Board (PHAB)	

Appointed by OHPB

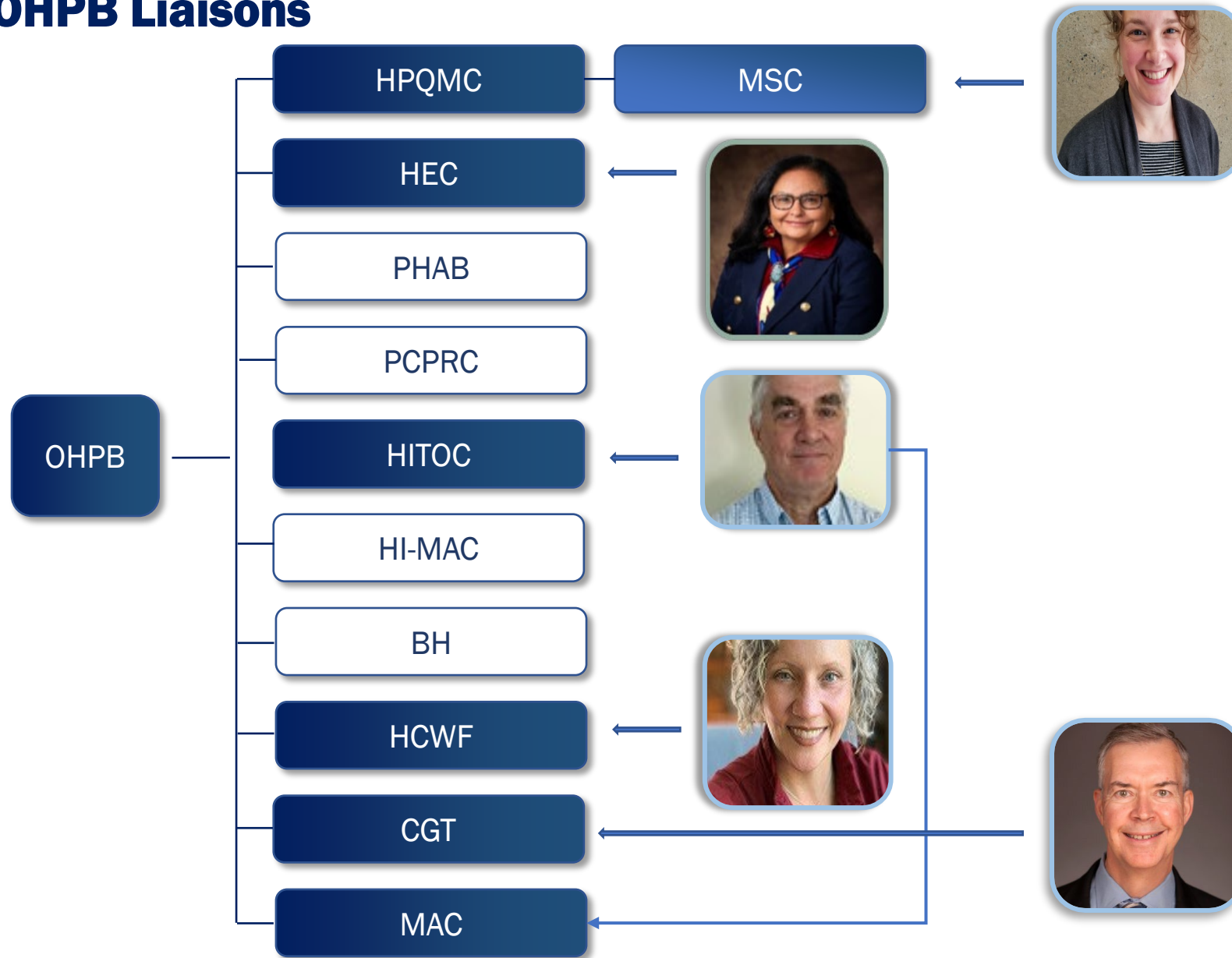
Health Information Technology Oversight Council (HITOC)	Health Plan Quality Metrics Committee (HPQMC)- sunsetting into Health Equity Quality Metrics Committee (HEQMC)
Health Care Workforce Committee (HCWF)	Health Equity Committee (HEC)

Appointed by OHA

Primary Care Payment Reform (PCPRC)	Behavioral Health (BH)- newest
-------------------------------------	--------------------------------

Ten subcommittees!!

OHPB Liaisons



Liaison role:

- Partnership with committee
- Representation at OHPB meetings
- Looks different in different committees!

Current situation:

- 5 active OHPB liaisons
- Difficult gaps; need to find other ways to support and bridge

Considerations for OHPB/ PHAB communication

❖ Partnership

- ❖ Liaison (TBD shortly)
- ❖ Staff support/connections

• Information sharing

- OHPB report to PHAB (via staff)
- PHAB member regularly attend OHPB?
- Quarterly Committee Digest
- Others?

OHPB: Draft Framework of Roles

LEADER

Responsible for the work; actively involved in planning, development and oversight

COLLABORATOR

Active role in developing, guiding and finalizing the work in partnership with other entities

SUPPORTER

Provides guidance and direction; not actively involved in day-to-day development or decisions

COMMUNICATOR

Champions and supports the work; not actively involved in development or guidance

Past Examples of Roles

Action Plan for Health

CCO 2.0

Early Learning Council

Provider Incentive Program

Vaccine Policy Statement

SB 440

SHIP

Regional Meetings

Spectrum of Committee Structures

- Committees **really vary** in structure, size, scope, etc.
- For example:
 - Membership requirements/recruitment
 - Functions (recommendations, programs, policy decisions, etc.)
 - Oversight of OHPB on committee decisions
 - Collaboration potential with other committees
 - Statutory expectations of committees
 - Workplan development process



Workplan Development & Prioritization

- Statutes are lengthy and sometimes outdated
- Committees vary in how they identify their workplans for the year/biennium
- OHPB has a lot of trust in the expertise of the committees
- **Some considerations:**
 - Could seek **total alignment** with statutory, OHPB and Governor priorities as way to narrow workload
 - Could put forth a **menu of choices** for OHPB to consider prioritizing
 - Could **plan for a mix**: identify standard “annual” PHAB work and allot a portion towards changing priorities of OHPB, state of the world, etc.

**Thank You
& Questions**

The logo for the Oregon Health Authority. It features the word "Oregon" in a smaller, orange, serif font positioned above the word "Health". The word "Health" is in a large, blue, serif font. Below "Health", the word "Authority" is written in a smaller, orange, serif font. A thin blue horizontal line is positioned just above the "Authority" text, extending from the left side of the "H" in "Health" to the right side of the "y" in "Authority".

**Oregon
Health
Authority**

Public Health Advisory Board 2023 **draft** Workplan Calendar

This document provides a framework for PHAB priorities and meeting agendas in 2023. Agenda items for its monthly meetings are categorized and color-coordinated (■ ■ ■ ■) to indicate linkages between PHAB’s priorities and roles. Additional information about PHAB’s priorities are included at the end of this document.

2023 PHAB Priorities:

- Public health system commitment to equity
- Public health system improvements and funding
- Statewide population health priorities and policies
- PHAB structure, business and member support

- * Indicates decision request
- ◇ Statutory requirement

Watch List

Topics related to the Board’s priorities to stay informed on:

- 1115 Medicaid Waiver
- Healthier Together Oregon and state health assessment
- CCO incentive metrics

Meeting date	Priority linkage	Agenda items	Action	Notable events
Jan. 12	■ ■	Public health modernization funding for 2023-25	Board support; no formal action	<ul style="list-style-type: none"> • Governor-Elect Kotek takes office 1/9/23 • OHA Interim Director James Schroeder begins 1/10/23 • 2023 Legislative Session begins 1/17/23
	■ ■	1115 Medicaid Waiver	Discussion	
	■ ■	Subcommittee updates and discussion: accountability metrics and strategic data plan	Discussion and input	
Feb. 9	■	Legislative session update and discussion	Discussion and input	<ul style="list-style-type: none"> • Governor Kotek’s 2023-25 proposed budget released 1/31/23
	■ ■ ■	Process and timeline for developing public health system vision	Discussion and input	
	■	Subcommittee updates and discussion: strategic data plan	Discussion and input	

	■ ■	LPHA presentations on public health modernization successes, challenges and accomplishments	Discussion	
March 9	■	Subcommittee updates and discussion: accountability metrics and strategic data plan	Discussion and input	<ul style="list-style-type: none"> OHA 2023-25 budget presentation to Legislative Ways and Means committee scheduled for March 14. Public hearings to be held March 15 and 16
	■ ■	Presentations on public health modernization funding to CBOs	Discussion	
	■ ■	Progress update on PHAB Health Equity Review Policy and Procedure	Discussion and input	
April 13	■ ■ ■	Subcommittee updates and discussion: accountability metrics and strategic data plan	Discussion and input	
	■ ■	Presentations on Tribal health services and Tribal public health modernization	Discussion	
	■ ■	Adopt updated PHAB Health Equity Review Policy and Procedure	Decision	
May 11	■ ■ ■	Subcommittee updates and discussion: strategic data plan	Discussion and input	
	■ ■ ■	Adopt public health accountability metrics, indicators	Decision, statutory requirement	
	■	Public health modernization LPHA funding formula: base funding to support FTE, incentives and matching funds, and regional funding	Decision	
	■ ■ ■	Discuss community-led data initiatives	Discussion and input	
June 8	■ ■ ■	Subcommittee updates and discussion: strategic data plan	Discussion and input	<ul style="list-style-type: none"> 2023 Legislative session ends at end of month
	■	Public health modernization evaluation 2021-23	Discussion and input	
	■ ■ ■	Public health accountability metrics, 2023 report	Discussion and input	
	■ ■	Public health modernization funding allocations and priorities, 2023	Discussion and input	
	■ ■ ■ ■			

PHAB planning for 2023 – draft objectives

1. Short-term planning for allocating additional public health modernization funds for the 2023-25 biennium.
2. Long-term planning to develop a public health system vision, which will guide future priorities and funding strategies

PHAB's charter and expanded role with CBOs

Additions to PHAB's November 2022 charter:

- Connect, convene and align LPHAs, Tribes, CBOs and other partners to maximize strengths across the public health system and serve community-identified needs
- Make recommendations on the roles and responsibilities of partners, including LPHAs, Tribes, CBOs, OHA and others to the governmental public health system
- Develop recommendations for how the OHA shall distribute funds to local public health authorities and community-based organizations. Continue to evaluate and update funding recommendations.

PHAB's charter is posted at www.healthoregon.org/phab

OHA's values related to funding the public health system:

- **Equity:** ensuring that financial resources are directed to communities that are most disproportionately impacted by health inequities, including communities at the intersections of multiple identities.
- **Partnership:** to meaningfully engage LPHAs, CBOs, Tribes and community partners in all aspects of the funding process.
- **Transparency:** sharing information clearly and transparently.
- **Inclusion:** individuals, local communities and local partners that are most impacted by health inequities are a part of developing ideas and solutions and making decisions.
- **Accountability:** quickly identifying issues, communicating in a timely fashion, achieving health equity objectives, and working to ensure local PHM efforts are complimenting each other.

Current short-term planning for 2023-25 public health modernization funding

- Additional funding for PHM will be allocated based on the prioritization documents that PHAB discussed in January.*
- OHA is working with partners to make additional improvements in funding to CBOs, including
 1. Prioritizing any new funding to CBOs for communities currently underserved by CBO public health equity funds
 2. Working with LPHAs on funding decisions for new CBO awardees
 3. Continuing to improve training and technical assistance that supports LPHA and CBO collaboration.
- These shorter-term efforts will support – and then benefit from – PHAB’s efforts later this year to develop a public health system vision for equity and related funding strategy.

How would PHAB like to be involved in shorter-term planning for 2023-25 funding to CBOs?

1. How does PHAB wish to be kept involved and aware of operational planning for 2023-25 between OHA, LPHAs and CBOs?
2. Should OHA convene PHAB's Incentives and Funding subcommittee this Spring to advise on funding strategies for CBOs?
 - If so, should the subcommittee include additional LPHA and CBO representatives?

Developing a long-term public health system vision and funding strategies – proposed approach

In January, PHAB members identified a need to develop a vision for the public health system to inform future priorities and funding.

Proposed approach	
February - May	Ground PHAB members in current public health modernization investments. Hear from LPHAs, CBOs, Tribes and investments in community-led data initiatives
Summer	PHAB retreat or other facilitated opportunities to begin planning discussions
Throughout 2023	Ongoing development of public health system vision with partners, and planning for future funding

1. Retreat objectives

Is the goal of the retreat to:

- a. Develop a strategic vision for health equity* for the public health system?
- b. Develop strategies that PHAB will commit to in order to advance health equity in the next 1-3 years?
- c. Both of these
- d. Other

*The PHAB definition of health equity is the Oregon Health Policy Board's definition of health equity. This definition is practiced through the [PHAB Health Equity Review Policy and Procedure](#) (to be updated prior to the retreat).

2. Contracted facilitator

OHA has the potential ability to contract with the last facilitator that the board had used for its 2020 retreat.

Please let staff know if you have specific ideas for an alternative or specific qualities you'd like to see in a facilitator.

3. Community Engagement

How does PHAB want to engage with the broader public health partner network and community to guide discussion and decision?

Possible options (any of the below or others)

- a. Review source material about public health priorities
- b. Ask guest presenters to respond to key questions during their presentations
- c. Engage existing groups (CLHO, CBOs, culturally-specific groups, Tribes, etc.) to participate in the retreat
- d. Engage existing groups to do some pre-work together before the retreat
- e. Other ideas?

4. Scheduling

If PHAB wishes to retreat this summer, it is possible that should the legislature approve PHAB's additional membership, those positions will not yet be appointed.

PHAB could:

1. Plan to hold the retreat as-is and follow up on another in-person sooner, if new members are appointed; or
2. Delay a full retreat until the status of new members is better known, and instead focus on immediate short-term needs.

Next steps

- OHA staff will work with an external facilitator to identify possible dates for a retreat
- OHA staff will send a survey to PHAB members to identify date, time, location

Public health system metrics

The following set of metrics brings attention to health priorities in Oregon.

These metrics provide a framework to bring together governmental public health authorities, other sectors and partners, and state and local health officials to collectively change policies to create health for everyone.

These metrics also demonstrate improvements in Oregon Health Authority and local public health authorities' core system functions through public health modernization

Collective responsibility across sectors and partners	
Health priorities	Policy actions
Public health assessment	Public health policy development
Indicators of health outcomes <i>What are priority health issues throughout Oregon?</i> <i>Which groups experience disproportionate harm?</i>	Measures of policy landscape <i>How are policies contributing to or eliminating root causes of health inequities?</i>
Level of accountability The governmental public health system as a whole, other sectors and partners, elected officials. Oregon's Public Health Advisory Board has a critical role to influence necessary policy changes.	

Oregon Health Authority and local public health authority accountability
Public health data, partnerships and policy
Public health assurance
Measures of foundational capabilities <i>Are public health authorities increasing capacity and expertise needed to address priority health issues?</i> <i>Are public health authorities better able to provide core public health functions within their community?</i>
Level of accountability OHA and individual LPHAs

Public health accountability metrics

February 14, 2023

Updated timeline

Through June 2023, PHAB will focus on finalizing indicators of health priorities for communicable disease control and environmental health. From June-December PHAB and CLHO will shift focus to related process and policy measures.

February and March 2023

- PHAB Accountability Metrics focus on environmental health and communicable disease indicators.

April 2023

- CLHO Consultation
- PHAB Accountability Metrics Subcommittee focus on incorporating feedback from CLHO consultation and finalizing indicator recommendations to PHAB

May 2023

- PHAB approval of accountability metrics indicators

June 2023

- Produce initial public health accountability metrics report

July-December 2023

- Continued development of policy and process measures
- PHAB vote to approve policy and process measures
- Development of process measure specifications and mechanisms for data collection.

January-June 2024

- Process measure data collection
- Development of complete public health accountability metrics report

Groups involved and roles for developing public health accountability metrics

CLHO metrics workgroups

- **Generate metrics recommendations for all metrics tiers**
- These are the local and state programmatic subject matter experts
- Review available data, existing plans and metrics, research
- Prepare materials for PHAB Accountability Metrics subcommittee
- Meet every other week

CLHO

- **Provide LPHA leadership perspective on metrics**
- Formal consultation for input (tentatively planned for April 2023)
- Monthly informal opportunity for input at CLHO meetings

PHAB Accountability Metrics subcommittee

- **Review and synthesize metrics recommendations from CLHO metrics workgroups, CLHO and other groups**
- Provide a range of perspectives and considerations, including community and health system perspectives
- Provide direction for development of accountability metrics report, including communications materials
- Provide leadership for discussing public health accountability metrics with other groups (for example, CCO Metrics & Scoring Committee)
- Meets monthly

PHAB

- **Formally adopt public health accountability metrics** (tentatively planned for June 2023)
- Monitor progress toward accountability metrics
- Provide guidance for application of public health accountability metrics across sectors and partners, in line with PHAB charter
- Meets monthly

OHA Public Health Equity Funding Highlights

Funding period April – September 2022

Quick Overview

This grant is “braided funding”. OHA merged grant opportunities from 8 different programs into one application.

303 Organizations applied
157 Organizations were funded
\$31+ Million were awarded

Organizations Funded by Program

Adolescent and School Health - 20
Commercial Tobacco Prevention - 92
HIV Prevention - 7
Modernization - 69
Overdose Prevention - 7
ScreenWise – 4

8 Program Areas

Communicable Disease
Prevention



HIV/STI Prevention and
Treatment



Adolescent and School Health



Health Security Preparedness
and Response



EPH and Climate Change



Commercial Tobacco
Prevention



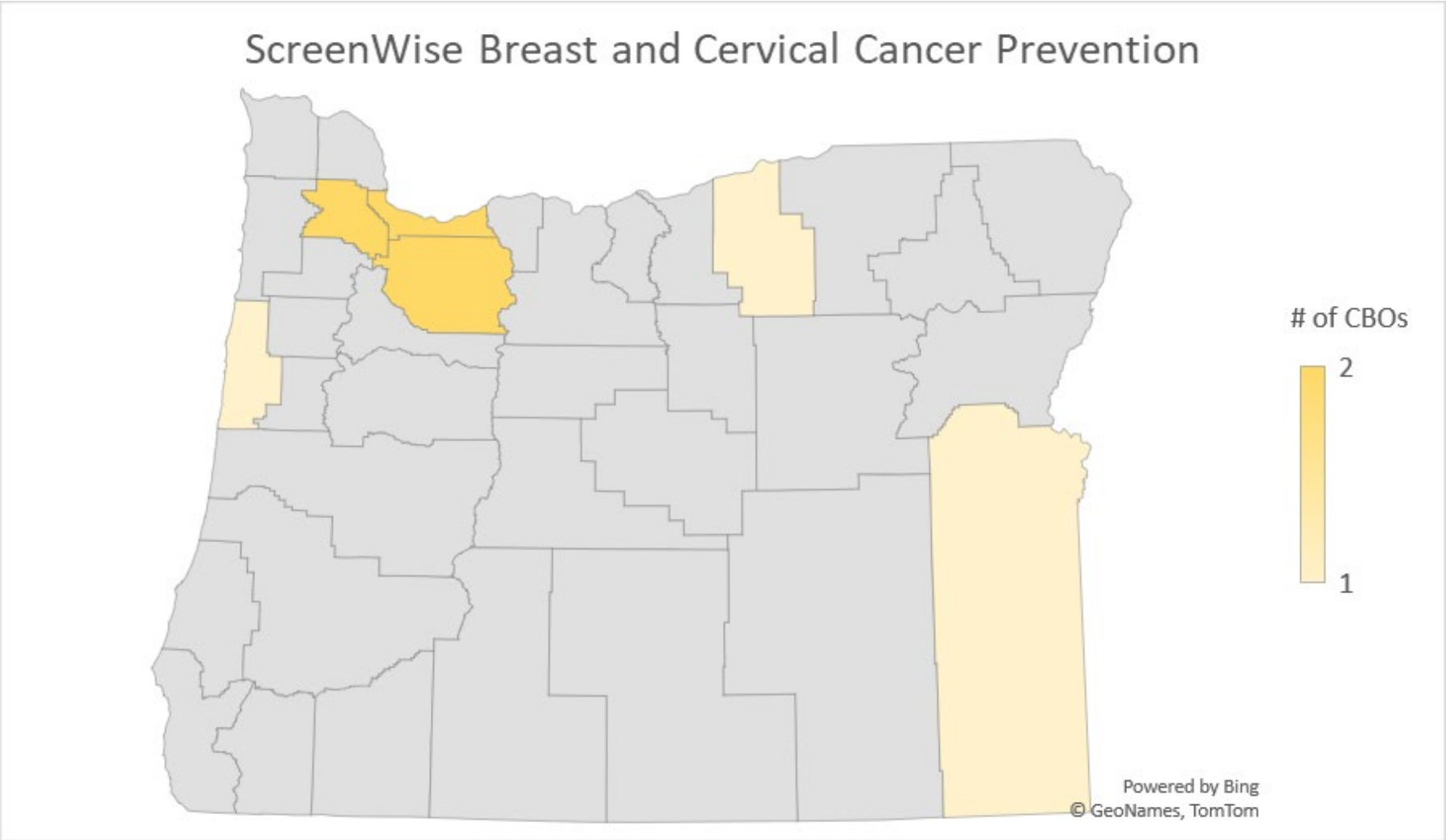
ScreenWise: BCCP



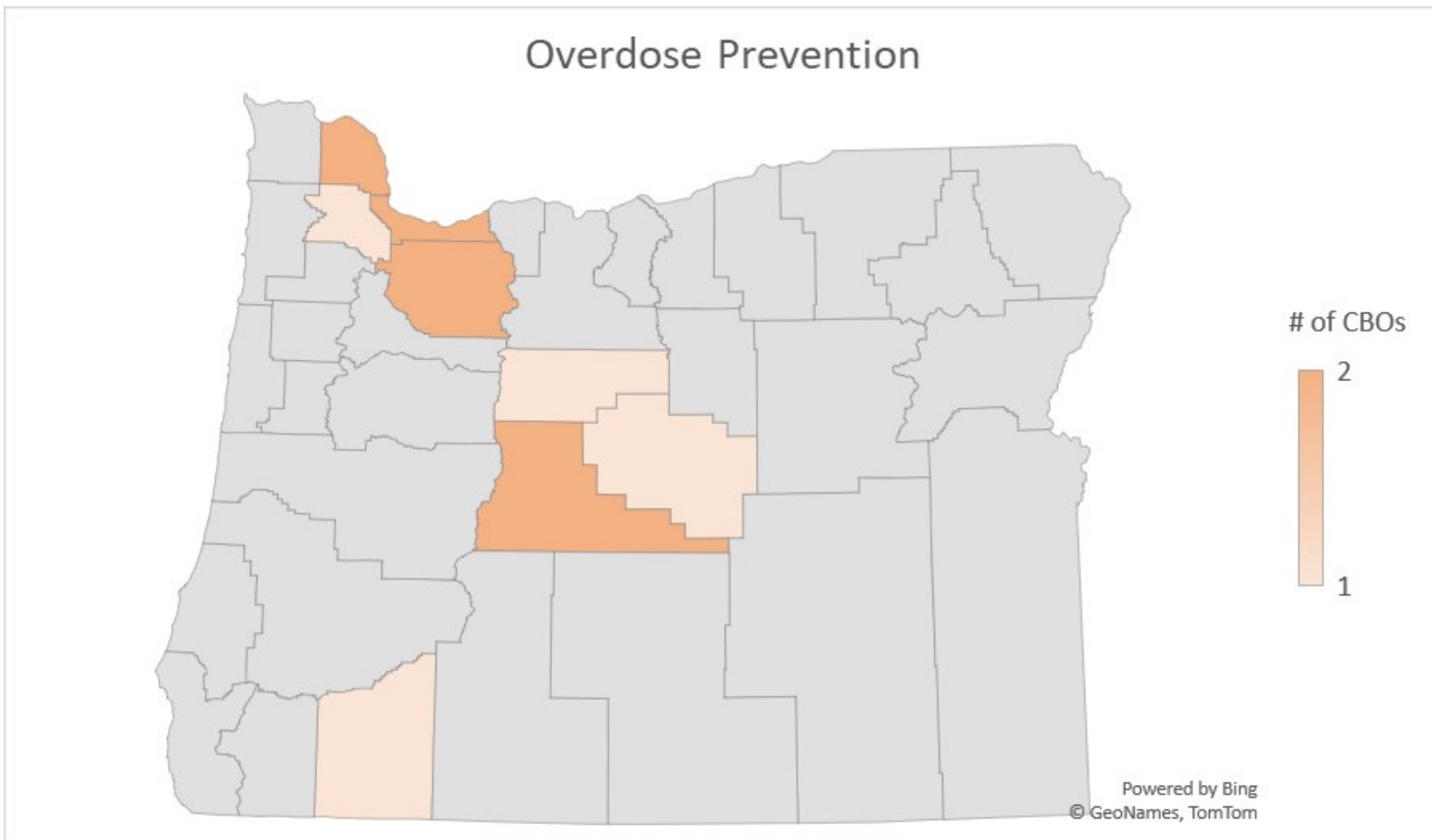
Overdose Prevention



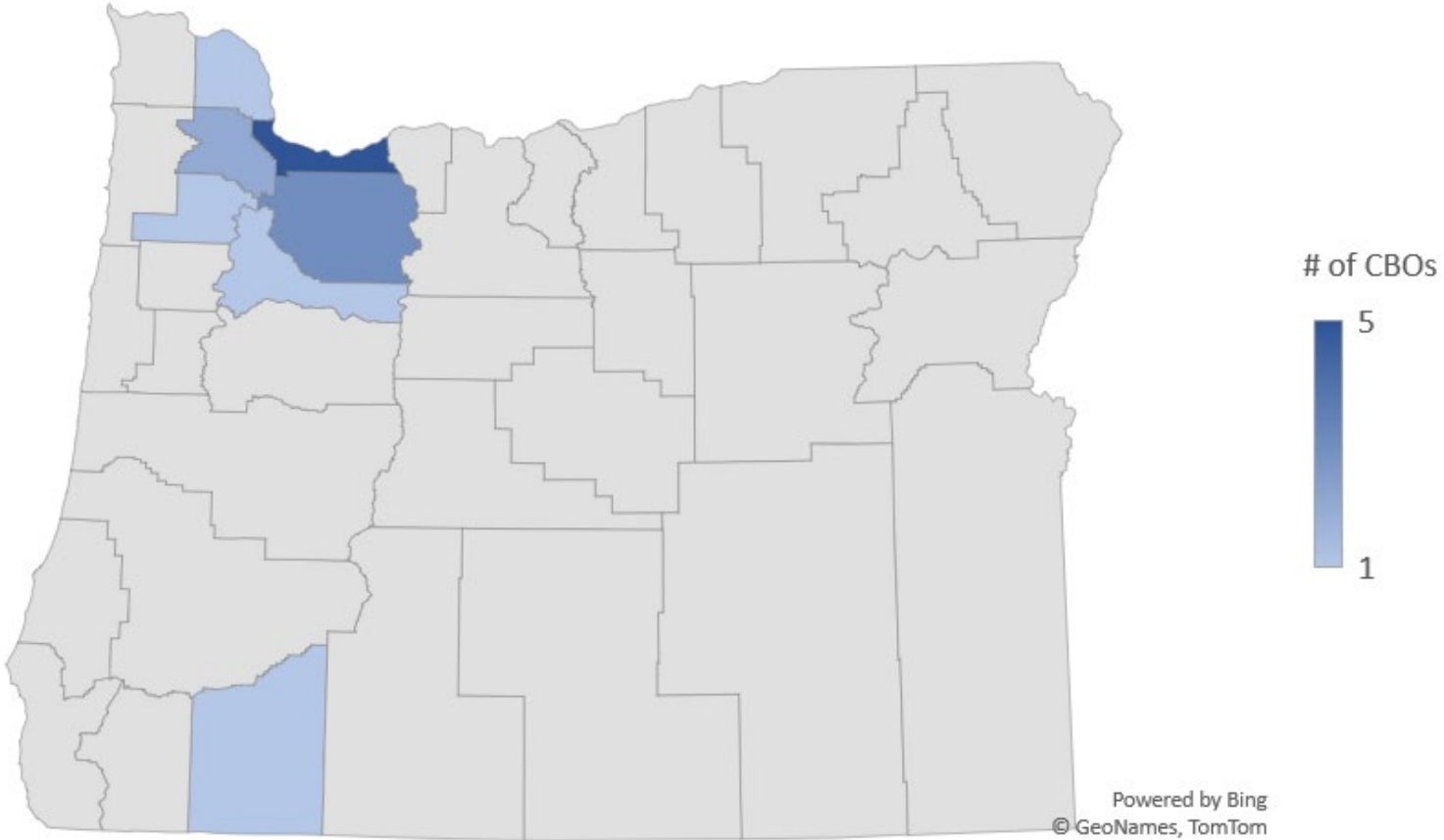
Counties where activities took place



Overdose Prevention

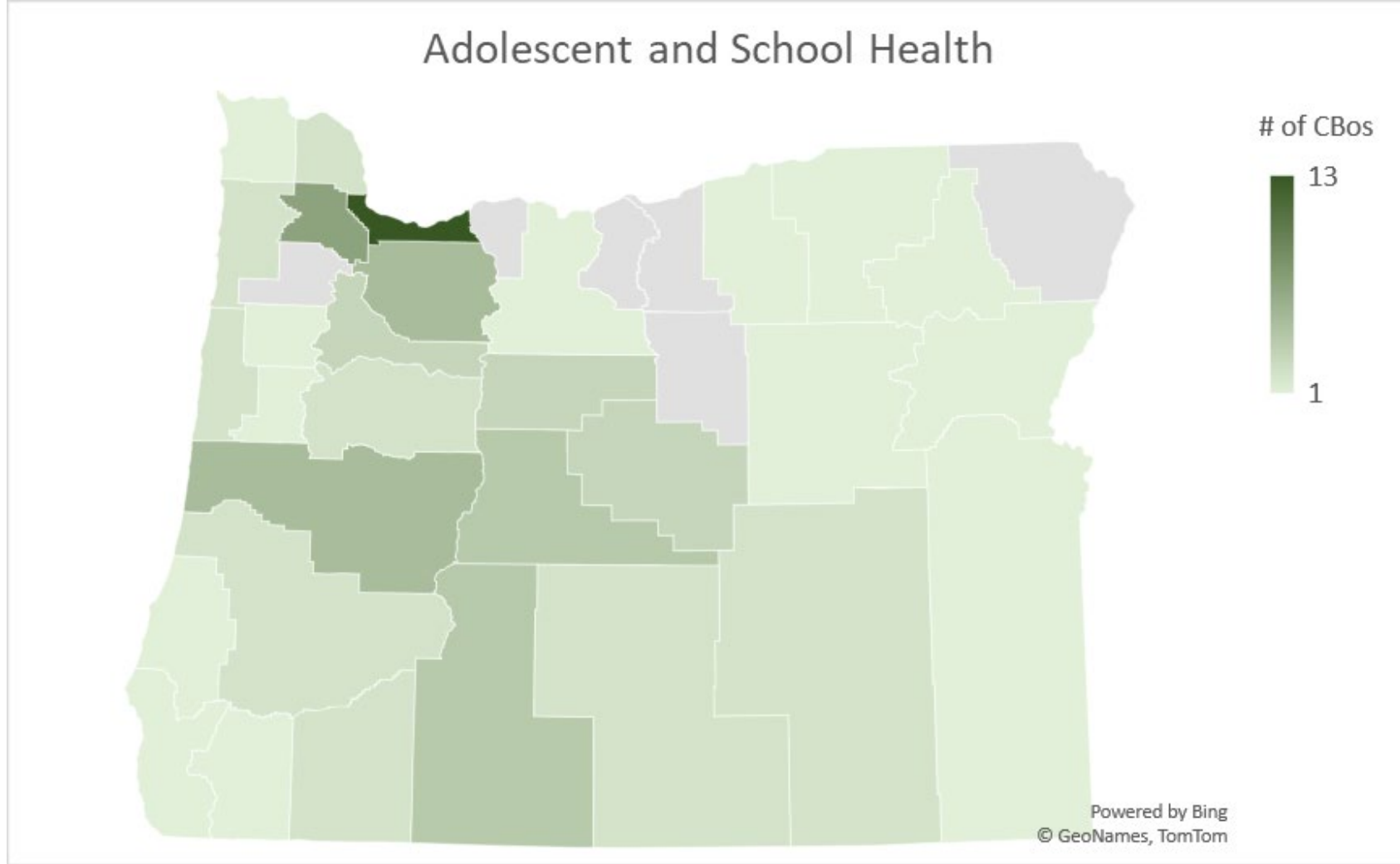


HIV and STI Prevention and Treatment

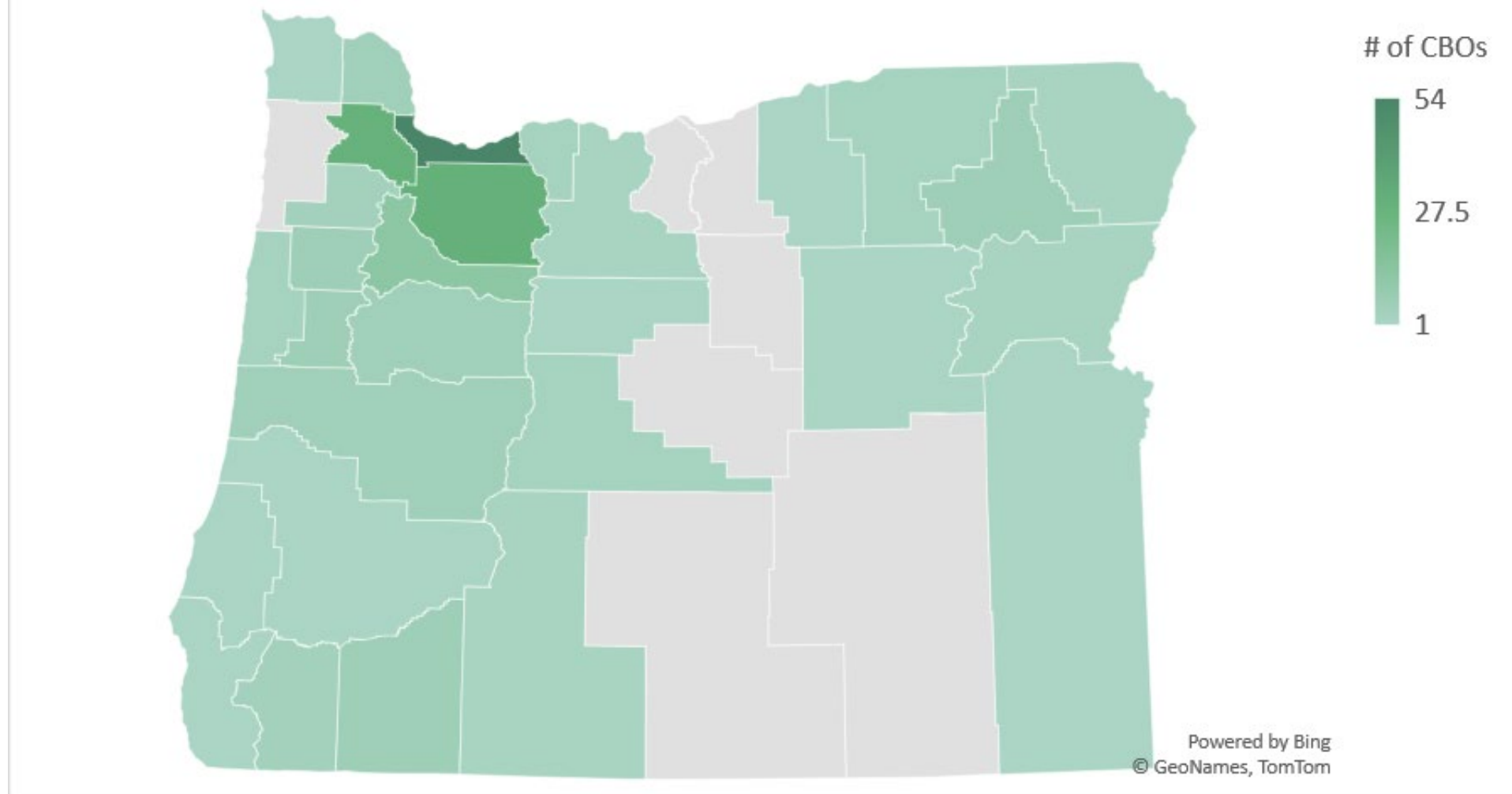


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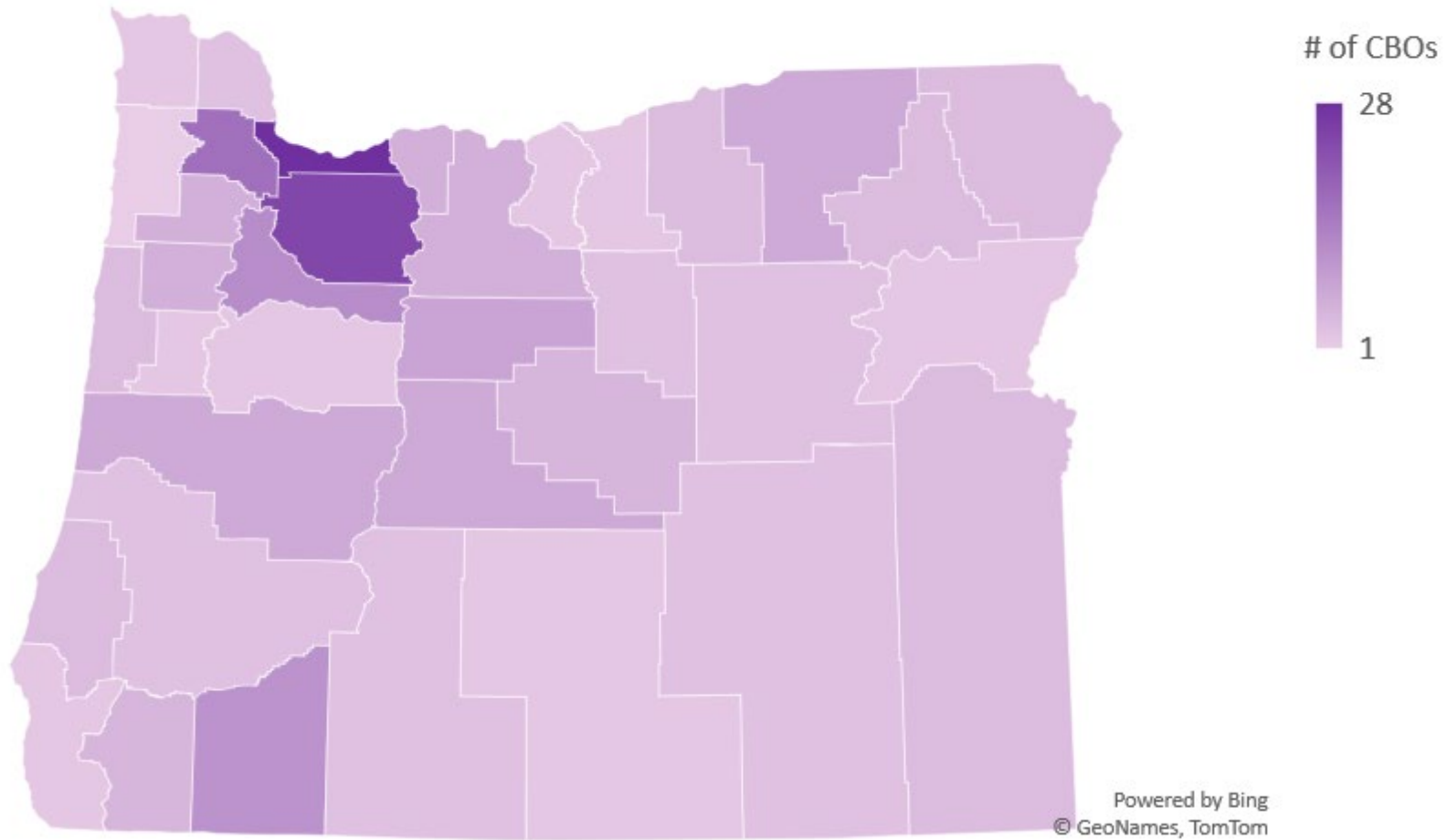
Adolescent and School Health



Commercial Tobacco Prevention



Modernization : ACDP, EPH, HSPR



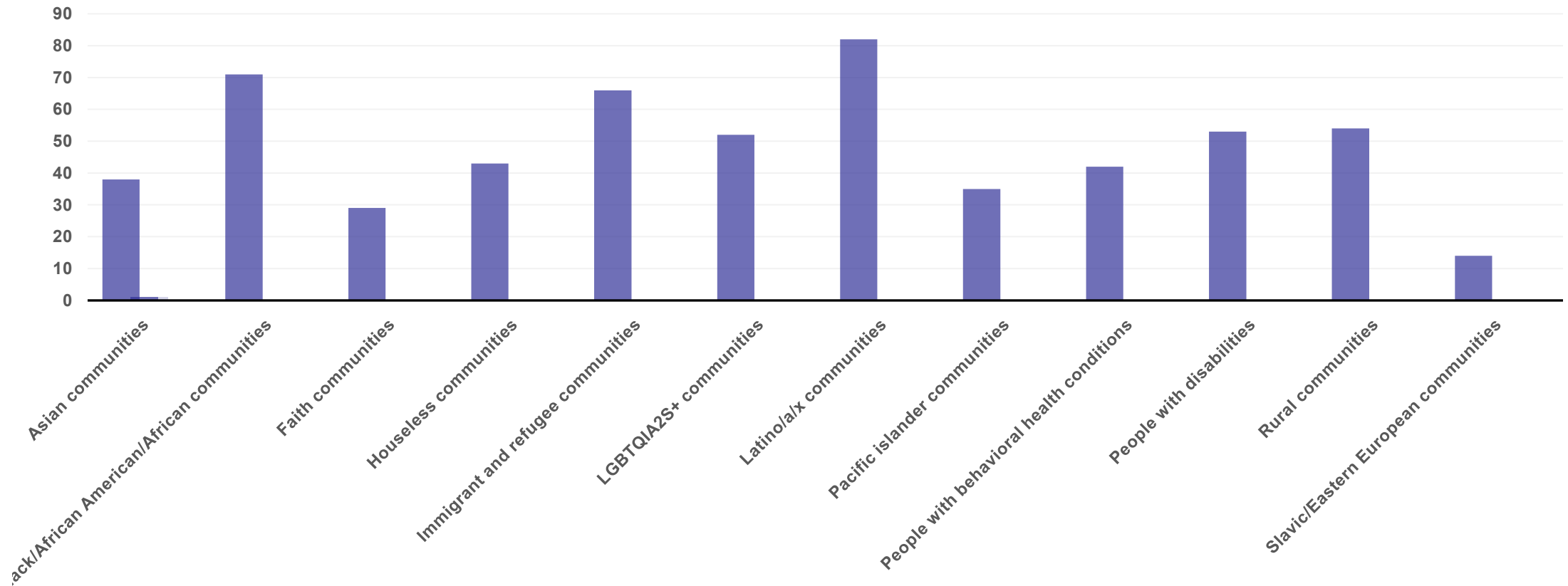
Data overview across all the CBOs

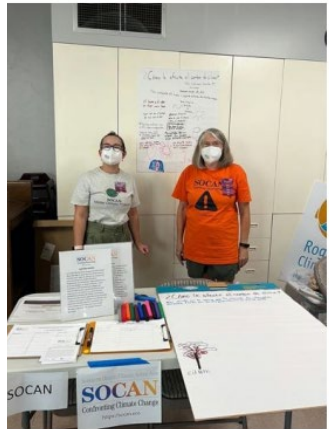
64.8% of grantees performed work in a language other than English

45.8% of grantees have worked with their respective LPHA

25.4% of CBO were able to leverage the OHA funding to access other funding or resources that benefited financially

Populations Served April - September 2022





Pregunte al Experto
Sesión gratuita

Prácticas tradicionales para el equilibrio físico y mental
Martes 24 de mayo a las 6:30 p.m. USA PST

Un repaso de las prácticas tradicionales de nuestras culturas ancestrales como medio para lograr el equilibrio físico y mental en nuestro día a día incluyendo prácticas agrícolas.

Detalles: www.nochecultural.com
¿Preguntas? Info@nohecultural.com

Presentado por **Eugene Arte Latino** Patrocinado por **PacificSource HEALTH PLANS**

Javier Lara, Programa Anahuac



Disaster Registry
Jackson and Josephine Counties, Oregon

Registro de Desastres
Condados de Jackson y Josephine, Oregon

Would you, a loved one, or friend need special assistance in an EMERGENCY?
¿Necesitaría usted, o un ser querido o un amigo asistencia especial en una EMERGENCIA?

You should sign up for the Disaster Registry if you would.
Debe inscribirse en el Registro de Desastres si desea:

- Need outside help to safely leave your home during a disaster.
- Be in jeopardy if you stayed in your home, without assistance, for three days.
- Need special notification about the need for evacuation, due to impairment.

Apoyo exterior para salir de su casa de manera segura durante un desastre.
No estar en peligro porque se quedó en su hogar, sin asistencia, durante tres días.
Notificación especial sobre la necesidad de evacuación, debido a un impedimento.

For more information contact:
Para más información contacte a:

LeAnne Turnbull at 541-423-1373, lturnbull@rcvg.org or comunicacion@rcvg.org
Rogue Valley Council of Governments at 541-664-6674



SATURDAY NOV 12 6-9pm

GOTHIC Masquerade

@Hood River Hotel

21+ AFTER PARTY @Whiskey Tango

Thanks to: WHISKEY TANGO, HOOD RIVER, SBCFA, RECLAD, etc.



African Community Development Center

November 20, 2022
2pm-5pm
LIVE performance by **M5 Vibe**

Guest speaker **Mia Multiplied**

Join us to learn more about the African Community Development Center and celebrate with LIVE music, guest speaker, community art project and food.

We'll be highlighting the harm of commercial tobacco in our community.

For more information call 1 (810) 730-1355
Email: info@acdc.com

10330 SW Scholls Ferry Road, Tigard, OR 97223



3V3RYDAY GRIND PRESENTS

THE COMMUNITY PULSE series

CONSTRUCTION CONNECTIONS • BIPOC MARKETPLACE • COMMUNITY EVENT

AUGUST 20, 2022 | 11AM-5PM

CommunityPulseSeries@gmail.com

SALVATION ARMY (FIELD)
8325 N. WILLIAMS | PORTLAND, OREGON

PROSPER PORTLAND, HOFFMAN CONSTRUCTION COMPANY, PBOT



ScreenWise CBO Highlights

Populations Served: Latino/a/x communities; Black/African American/African communities; Asian Communities; People with disabilities; LGBTQIA2S+ communities; Immigrant and refugee communities; Rural communities; Faith communities; People with behavioral health conditions; Houseless communities

Counties: Clackamas; Lincoln, Malheur; Morrow; Multnomah; Washington

Project Highlights:

- The collaborative funding opportunity has provided the ScreenWise Program a way to access and partner with four new CBOs that the Program would not have likely connected with otherwise
- Subsequently, this has allowed a dialogue to begin between the Program and the CBOs to explore the potential for community-based patient navigation that links people in underserved communities to more culturally and linguistically appropriate preventative and early detection clinical services

HIV/STI Prevention and Treatment CBO Highlights

Populations Served: Black/African American, Latino/a/x, Slavic/Eastern European, Youth, Rural, Houseless, LGBTQIA2S+, People experiencing substance use disorder

Counties: Clackamas, Jackson, Multnomah

Project Highlights:

Community Needs Assessments:

4 focus groups engaging 51 Black/African-American community members in Portland

HIV Testing:

Planning for outreach testing in community and clinic settings

System Coordination:

Developed policies & procedures for serving people newly diagnosed with HIV across public-private systems

Community Engagement:

41 new partners engaged by grantees



A TEAM FULL OF VISION, COMPASSION, AND LEADERSHIP

It all started in September 2003, when two Portland Chapter of The Links, Incorporated members Linda J. Harris and Myrna-Yvonne Williams worked with Mardica Hicks, Executive VP of New Earth Management Corporation and Cascade AIDS in securing a Memorandum of Understanding to partner in sponsoring several community HIV/AIDS events. Along with other community



A6: African-American AIDS Awareness Action Alliance

Adolescent and School Health CBO Highlights

Funding Source: CDC Public Workforce COVID-19 Recovery Grant – provide health and wellness support for youth, schools, and communities recovering from COVID-19

Populations served: Schools/students, Black/African American, Latino/a/x, Youth, Rural, Urban, Houseless, LGBTQIA2S+, AAPI, Individuals with disabilities

Counties: Washington, Multnomah, Clackamas, Baker, Lane, Marion, Jackson, Jefferson, Deschutes, Klamath, Lincoln, Linn, Jackson, Tillamook

Project Highlights:

School-based, culturally and linguistically specific staff supported (including youth positions):

29.43 positions, plus 11 temporary staff for events and training

School-based social, emotional and mental health support:

16 FTE hired/positions extended, plus 11 staff positions supported through hazard pay

Culturally specific sexual health education:

2 culturally specific CBOs working to build relevant sexual health education

Community Engagement:

20 new partners engaged



The Arc of Lane County

Adolescent & School Health

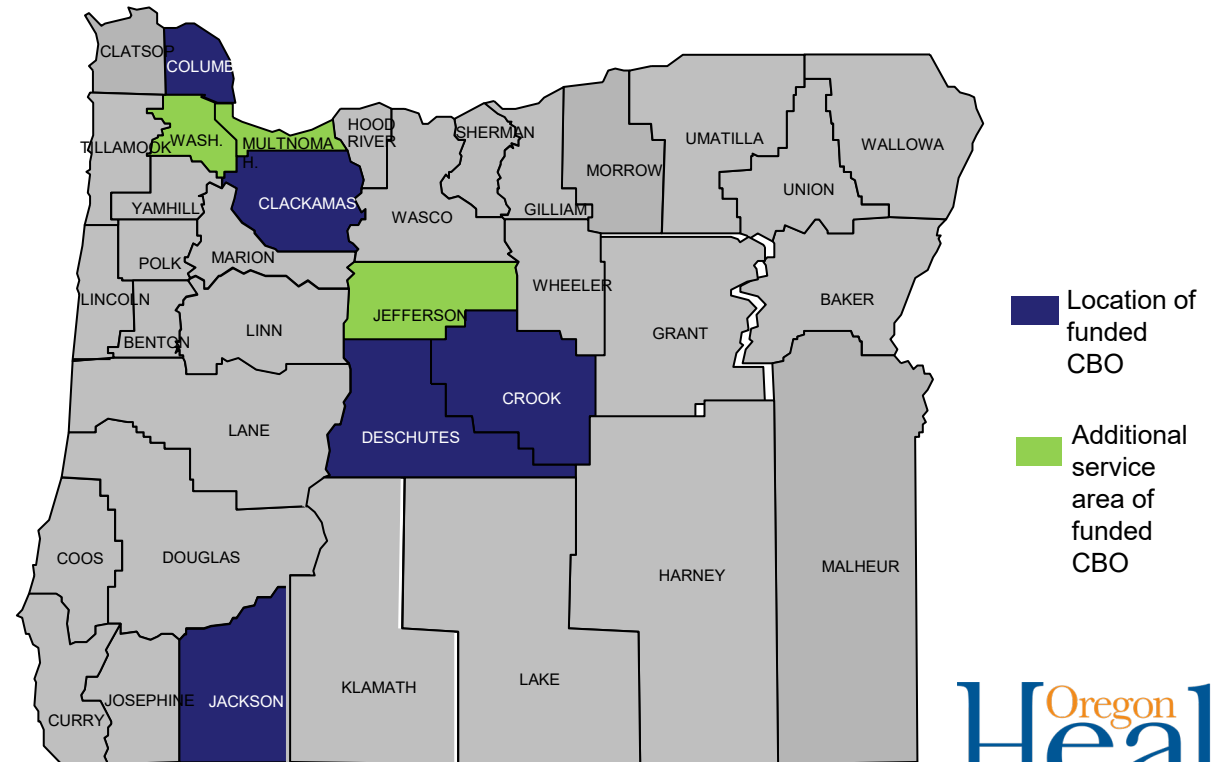
Overdose Prevention CBO Highlights

Populations served:

- Black/African communities
- American Indian/Alaska native/indigenous communities
- Latino/a/x communities
- Asian communities
- Slavic/Eastern European communities
- Immigrant and refugee communities
- Faith communities
- Rural communities
- People with disabilities
- LGBTQIA2S+ communities
- Houseless communities
- People with behavioral health conditions

Project types:

- Community engagement and education
- Harm reduction
- Social determinants of health



Overdose Prevention Project Highlights

- *Our workplan activities involved getting people into treatment and we have been very much successful at that....Because we see people on a daily basis and engage them in a personal way, **we are able to be more effective than services that only provide occasional treatment***
- *The new groups, both the veterans' support group and the upcoming group for women in recovery, are efforts we have wanted to begin since our [organization's] founding. The additional funding has made this possible, and **early response from the community has been powerful.***
- *All [staff] and peers have been trained in overdose prevention and response, know where to find Narcan in the clinic, and know how to access naloxone for individuals requesting....**Information and resources have been distributed within the community via peers and through the community awareness event***
- *We put together a workshop in one of the local Slavic churches, during which **we were able to talk to people about the dangers of new drugs like fentanyl** and also talked about and distributed naloxone to those who wanted.*



Commercial Tobacco Prevention CBO Highlights

Funding Source: Ballot Measure 108 tobacco tax revenue dollars: Allocated to community-based organizations to reduce commercial tobacco use, address racial disparities and increase investments in communities most impacted by tobacco use.

Populations served: American Indian/Alaskan native/indigenous communities; Asian communities; Black/African American/African communities; Latino/a/x communities; Pacific islander communities; Slavic/Eastern European communities; White; LGBTQIA2S+ communities; Immigrant and refugee communities; Houseless communities; People with behavioral health conditions; Rural communities; Faith communities;

Counties: Baker, Benton, Clackamas, Clatsop, Columbia, Coos, Curry, Deschutes, Grant, Hood River, Jackson, Josephine, Klamath, Lane, Lincoln, Linn, Malheur, Marion, Morrow, Multnomah, Polk, Umatilla, Union, Wallowa, Wasco, Washington, Yamhill

Project Highlights:



Program Implementation/ Community Assessments

- 39 CBOs report active and successful program implementation, including community tobacco use assessments, community led tobacco retail assessments, health needs assessments, youth specific work around tobacco usage and overall substance abuse assessments.



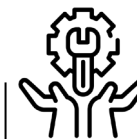
Community Partnership/ Relationship building

- 29 CBOs share local partnerships established with LPHA's, School Districts, Universities and other CBO's.
- Work includes: VapeEducate Program, trauma informed tobacco education training with a racial justice lens, community cafes and providing produce boxes, healthy recipes and food resources.



Culturally-Specific Tobacco prevention awareness campaigns

- 8 CBOs conducting community and culturally specific tobacco prevention and education campaigns.
- Examples include: flavored tobacco, tobacco cessation and maternal health, anti-vaping, quit-line, Intellectual/developmental disability, and LGBTQ+ centered tobacco prevention campaigns



Culturally-Specific Social Determinants/ Risk Factor Support

- CBOs providing Tobacco Cessation, transportation, rent/utility support, food insecurity, workplace safety, childcare, NRT support, and alternative education options.

Community Violence Prevention Alliance





The Harm of Commercial Tobacco in our Community.

The African Community Development Center is cordially inviting you to come and learn about the harm of commercial tobacco in our community.

When & Where
 50th November, 2022 | 2:00pm - 5:00pm | 10330 SW Astoria Ferry Road, Tigard, OR 97223

For More Information: 1-800-730-1355 | info@accdc.com

EXHIBICIÓN DE ATUENDO Y FOTOGRAFÍA | ATTIRE AND PHOTOGRAPHY EXHIBITION
 Emerald Art Center, 500 Main Street, Springfield, OR 97477
 30 de agosto - 23 de septiembre | August 30 - September 23

HERENCIA HISPANA 2022

ALCALDÍA DE SPRINGFIELD | CITY HALL: 225 6TH STREET, SPRINGFIELD, OR 97477
 VIERNES 9 DE SEPTIEMBRE | FRIDAY, SEPTEMBER 9: 5:00 - 9:00 PM

AGENDA | PROGRAM

5:00 - 6:00 BALLETO FOLCLÓRICO	6:00 - 6:30 CEREMONIA DEL DRITO
6:30 - 7:00 MARIACHI MONUMENTAL	7:00 - 8:00 FLAMENCO CHICO
8:00 - 9:00 ORGANIZACIÓN OAXACA	PISTA DE BAILE OPEN DANCE FLOOR



MEDFORD MEET-UP HALLOWEEN
 OREGON SPINAL CORD INJURY



Family Tree Relief Nursery | October 2022

Baby & Me - Tobacco Free

QUITTING SMOKING IS THE MOST IMPORTANT THING YOU CAN DO FOR YOUR HEALTH AND THE HEALTH OF YOUR BABY.

GETTING STARTED REFERRALS	DO I QUALIFY? ELIGIBILITY	WHAT'S NEXT? THE PROGRAM
We can refer you to a program that helps pregnant women quit smoking.	Pregnant - less than or at 36 weeks gestation AND A current tobacco user OR have quit within 3 months of becoming pregnant or during pregnancy.	1. Individualized counseling 2. Biomarker testing for tobacco use 3. Vouchers to purchase diapers and baby wipes.

MISSION:
 To engage and empower pregnant women and their families to overcome nicotine addiction. Through utilizing an evidence based, smoking cessation program proven to reduce the burden of tobacco on the pregnant and postpartum population.

Please contact Rachel Thome at 541.990.6525 for further information.



COME DISCOVER JOB, PAID INTERSHIPS, SCHOLARSHIPS AND MORE

AFRICAN CAREER FAIR

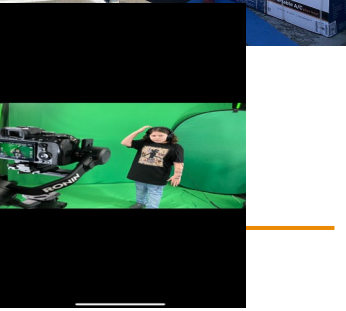
Open House
2 - 7 PM
January 20th

NW BALLROOM, DOUBLE TREE HOTEL, 1000 NE MULTNOMAH ST
 Dress code: Business Casual
 For details, contact: 503.685.1313 or visit: www.africancareerfair.com

ALL PARTICIPANTS WILL BE ENTERED IN A RAFFLE FOR GREAT PRIZES!
 Register online by 12:00 PM on 1/19/22
<https://forms.gly/8292929292929292>



DON'T VAPE
 BE GREAT



Acute and Communicable Disease Prevention Program (ACDP) CBO Highlights

BOOSTING
OUR VOICES 



We Want to hear from you!
Boosting Our Voices is a podcast for, about,
and by Oregon's BIPOC communities.

Do you have questions? Want to be featured on an upcoming episode? Don't be shy now! Email us at boostingourvoices@gmail.com.

Boost Oregon

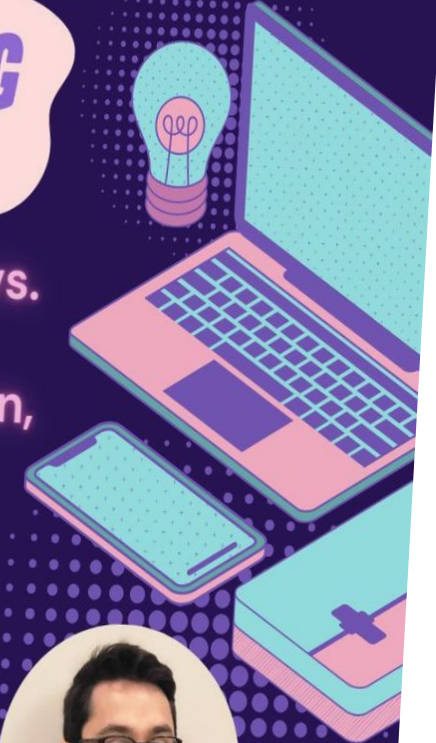


BOOSTING
OUR VOICES 

Disinformation vs. Misinformation
with Ryan Hassan,
M.D., M.P.H.

Don't miss our latest episode out now!

Available on Apple Podcasts, Google Podcasts, Spotify, and wherever you get your podcasts. Subscribe today and don't miss an episode!



Mpox Partners

- Boys & Girls Club of Portland
- Centro Cultural Del Condado De Washington
- Eastern Oregon Center for Independent Living
- Familias En Accion
- Haymarket Pole Collective
- HIV Alliance
- Latino Network
- Portland Street Medicine
- Rogue Action Center
- The Marie Equi Institute
- The Next Door, Inc
- ~~UTOPIA PDX~~

Winter Wonderland

Total Vaccines: 79

Thanks for welcoming

REACH UTOPIA PDX Health WE CAN DO THIS AAPCHO

The graphic features a green background with white and black geometric patterns. It includes a photo of two people in Santa Claus costumes, one holding a large, decorated staff. The text 'Winter Wonderland' is prominently displayed at the top. Below it, a box shows 'Total Vaccines: 79'. At the bottom, there is a row of logos for REACH, UTOPIA PDX, Health, WE CAN DO THIS, and AAPCHO.

Emergency Preparedness CBO Highlights

Populations Served: Black/African American, Asian, Migrant farm workers, Youth, Rural, Houseless, Tribal, LGBTQIA2S+, Individuals with disabilities, Sex workers

Counties: all Oregon counties

Project Highlights:

- **Emergency kits:** Providing materials to help their communities prepare go-bags
- **Knowledge sharing:** Developing resource guides for best practices, training opportunities, upcoming events, etc.
- **Risk communication:** Building systems to share information during an emergency; establishing communication materials to prepare for hazards
- **Hazard-specific resources:** Sharing resources such as air filters and personal protective equipment



Creating Opportunities

Climate and Health CBO Highlights

Populations Served

- Children under 5;
- Latino/a/x communities;
- People with disabilities;
- Immigrant and refugee communities;
- Rural communities;
- Houseless communities;
- People with behavioral health conditions;
- People who are unemployed or underemployed;
- People with lower incomes;
- People with high school diploma or less;
- People who work outdoors;
- Older adults over 65

All counties represented except Curry, Linn, and Tillamook.

92% of Grantees engaged in **Culturally Responsive Outreach** including:

- cultural events,
- newsletters,
- community meetings,
- youth leadership trainings.

63% of Grantees engaged in **coalition building** including:

- Tree and Climate Coalition,
- Building Shared Future Coalition,
- Build/Shift Collaborative and others.

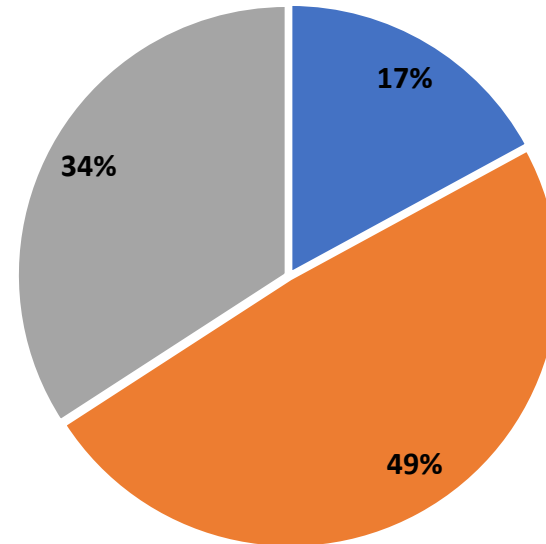
Climate and Health CBO Workplan highlights

Workplan Progress:

- Hiring of Climate specific staff;
- Hosting Enviro Natal Health Equity Symposium;
- AC installations for seniors;
- CHW Climate Change Curricula listening sessions;
- Implementation of Climate, Health, and Housing Institute leadership development program.

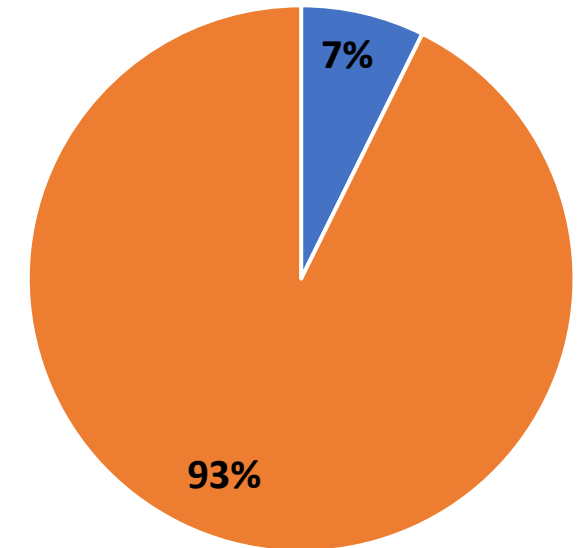
Workplan Includes Creating an Assessment

- No
- Yes, and we are beginning to make progress
- Yes, but we have not yet made progress on this activity



Workplan Includes Building Social Connections

- No
- Yes



Nurturely



NEON







FOCUSING TOGETHER ON HEALTH

Public Health Equity Funding at
Northeast Oregon Network (NEON)

Liberty Avila and Teresa Aguilera





NORTHEAST OREGON NETWORK

NEON's mission is to create a healthier Eastern Oregon. We do this by reducing barriers for both residents and the regional systems that support their health.

- Insurance application assistance
- Community Health Services
- Support for Community Health Workers
- Healthcare Interpretation
- Training and Consulting
- Fiscal Sponsorship



PUBLIC HEALTH EQUITY FUNDING

The project focuses on strengthening collaboration, effectively addressing Social Determinants of Health, preventing and addressing tobacco use, and educating the community on emergency preparedness.

Project Activities:

- Community Outreach and Education
- Community Health Worker Services, and
- Needs Assessment and Planning.



Community Health Workers

Community Health Workers are community-based professionals hired from the community they serve. They serve as a bridge between complex systems.

- Care Coordination
- Coaching and Social Support
- Advocacy and Education
- Creative Problem Solving!



CULTURALLY APPROPRIATE SERVICES

NEON services focus on removing barriers and building trusting relationships in the community. We provide:

- Marshallese Healthcare Interpretation
- Spanish Health Insurance Enrollment
- Marshallese and Spanish Community Health Worker Services and complex resource navigation
- Events are created and led by the community and CHWS - they say what they need and who is there!

BARRIER: LACK OF TRUST IN PUBLIC HEALTH AND RESOURCE PROVIDERS

We work to address this by:

- Creating welcoming events and spaces where community members can meet service providers, including after hours events with food, resources, and interpreters for working families.
- Providing information about services available and what they can help with in languages spoken by community members - word will spread!
- Building trust slowly - provide the resources community members want and are interested in.

BARRIER: COMMUNITY RESOURCES OFTEN DON'T REACH THOSE WHO NEED THEM MOST

We work to address this by:

- Doing outreach, including radio ads, flyers, and services in multiple languages and using plain language. Make sure people understand resources.
- Getting to know people - rural communities are built on relationships, and our staff work in communities long-term. Being approachable is everything.
- Being generous - when there is a resource available, make sure people have access - air conditioner deployment program, PPE, enrollment in new programs.

BARRIER: LACK OF RESOURCES AVAILABLE FOR COMMUNITY NEEDS

- Make sure people feel comfortable accessing everything they are eligible for - every bit helps.
- Assistance in accessing resources in languages other than English, including problem solving and resource coordination
- Getting creative - we can try to pull in multiple services to meet needs.
- When we can't meet needs, we can help with future planning and advocating for more services.



WORKING WITH CENTER FOR HUMAN DEVELOPMENT

- Built a strong relationship during COVID providing contact tracing and Isolation and Quarantine supports
- They support events and bring health resources - they are committed to reaching community members
- Willing to be flexible and go offsite to meet needs, including vaccination



THANK YOU! ANY QUESTIONS FOR US?

Please reach out to us with any questions!

Teresa Aguilera - taguilera@neonoregon.org

Liberty Avila - lavila@neonoregon.org



equity in perinatal wellness

Education & Advocacy in Enviro-Natal Equity

Nurturely believes
wellness for infants &
caregivers is a right,
not a privilege



nurturely





nurturely

We promote equity by
preventing
perinatal
health
disparities



Our programs aim to
tackle the root causes
of inequities in pregnancy,
postpartum, and
infant health



systemic racism
in perinatal care



disproportionate
climate impacts



perinatal workforce
development barriers

One root cause: climate exposures



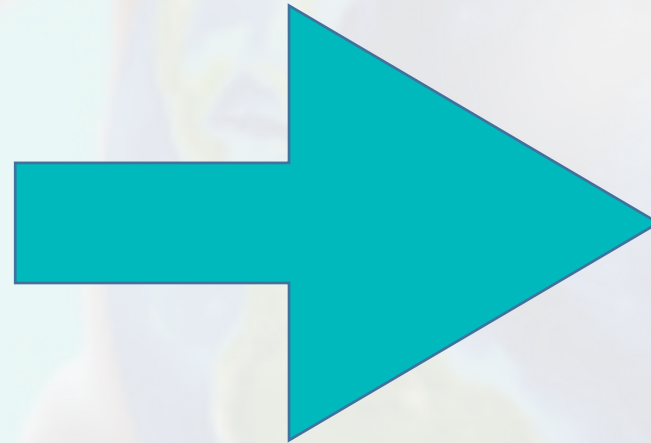
Climate change disproportionately impacts perinatal people and babies from communities of color.

Pregnant people are most than just a “vulnerable group”, they are the key to equitable, intergenerational solutions to transformative climate resilience



Public Health Modernization *Objectives*

1. Education
2. Advocacy
3. Community



EnviroNatal Equity Partners



ASP³IRE Children's Environmental Health Center



Wombs & Wildfires



Bridging science, policy, lived experience, community wisdom to begin to co-create perinatal climate resilience solutions for Oregon and beyond

nurturely.org/wildfires

 **nurturely**
equity in perinatal wellness

HUMAN
RIGHTS
WATCH



Wombs & Wildfires



Goals: Break down silos between climate action, racial equity, and perinatal health

- Start an open conversation on the specific impacts of wildfire on perinatal health equity
- Document wildfire resilience barriers and successes, centering perinatal professionals
- Work together to begin to brainstorm concrete takeaways in the form of products, interventions, and recommendations



Wombs & Wildfires

Lived Experience

+

Scientific Data



We did our best to limit our exposure-- we taped up the fireplace but still you could smell the smoke inside. Our fire alarms would go off daily.



Not only air filters, but food wipes, diapers - they were so hard to find.

UC Davis

Rebecca Schmidt, PhD

Bio-Specimen Assessment of Fire Effects (B-SAFE) Study aims to reveal how wildfires affect the health of pregnant women and their babies



What do public health and frontline workers need?

- ✓ Access to data to share in culturally relevant ways
- ✓ Easy to share info on preventative resources
- ✓ Info on where to go to get resources
- ✓ PLUS actual access to these resources
- ✓ Easier spread of information for smoke/heat reprieve
- ✓ Perinatal-friendly evacuation shelters/information

Education: Perinatal Planetary Summit



One-day conference with leading researchers and clinicians on the intersection of climate and perinatal health





La Equidad en la Salud Perinatal y Ambiental
Environment + Perinatal
Health Equity Series

Stay tuned for 2023 dates

Out In the Community



 nurturely

Promoting equity in
perinatal wellness and
strengthening cultures of support
for infants and caregivers.



nurturely

Carrying as a way to connect
with community and connect
with nature

Douglas County Partnerships: Culture & Carrying

- Carrying Trainings for Organizations







Eugene Riverfront Festival
The Place to Be

nurturely.org





nurturely

Next Steps: Get Involved

April 2023:

Enviro-Natal Equity
Coalition & Symposium

nurturely.org/planet

Ongoing/monthly:

Wombs & Wildfires Workgroups

