

Public Hearing
Preventive Health & Health Services Block Grant
Wednesday, June 11, 2024 at 12:00 PM PST
Via Zoom
Meeting minutes



Welcome and introductions

- Sara Beaudrault, Strategic Initiatives Manager and PHHS BG Coordinator for Oregon health Authority, Office of the State Public Health Director.

Public participants

- Tom Engle, retired, former PHHS BG Coordinator for OHA
- Sheila Thomas, Lane Independent Living Alliance
- Emily Rigler-Wright, Comagine Health
- Denise Tucker, Options Counseling and Family Services of Oregon

Overview of Block Grant

- Funding received annually from Centers for Disease Control & Prevention. Funding outlined in federal statutes and have specific rules.
- Requires a public hearing prior to submission of work plan.
- Requires an advisory board. Oregon advisory board is the Public Health Advisory Board. The Public Health Advisory Board will review and vote to approve the work plan and budget on June 13, 2024.

Proposed work plan and budget for Fiscal Year 24

- Work plan and budget start 10/1/24 – 9/30/25 and funds will be approximately \$1.27 million.
 - This is an increase of approximately \$160,000 from the current year.
 - \$88k set aside for domestic & sexual violence services & resources. This portion of funding goes to the Oregon Coalition against Domestic and Sexual Violence.

- Indirect cost for OHA capped at 10%, indirect costs are more than 10% allotted funds. Other funds used to cover the remainder of the costs not covered
- Block Grant must be linked to Healthy People 2030 objectives.
 - Oregon uses these funds to support infrastructure work including Oregon's Public Health Modernization efforts, the state health improvement plan and other supports for local public health authorities (LPHAs) and Tribes.
 - Oregon is not planning significant changes to the Block Grant for the upcoming year and will continue to fund as in the current year.
- Proposed budget for PHI-R04 State Health Improvement Plan: funds support implementation of Oregon's current SHIP for 2020-24, Healthier Together Oregon, completion of the 2024 state health assessment, and development of the next SHIP for 2025-29. This includes:
 - Engaging communities to conduct the state health assessment and develop the 2025-29 state health improvement plan.
 - Identifying and implement strategies to increase training of community health workers, especially among BIPOC and underserved communities.
 - Implementing a communications plan to increase awareness and impact of the state health assessment and state health improvement plan.
 - Convening and supporting a new SHIP steering committee.
 - The PHHS BG provides the only dedicated funding to implement Oregon's state health improvement plan.
- Proposed budget for PHI-R08 Public Health Modernization: funds support training and technical assistance across the public health system to collectively achieve health equity in Oregon. While other funds for public health modernization exist, the majority of those funds reach communities through allocations to local public health authorities, federally-recognized tribes and the Urban Indian Program, and community-based organizations. The PHHS BG provides critical funding for innovative approaches that cannot be funded through other mechanisms. Planned work includes:
 - Providing training and shared learning opportunities for Public Health Advisory Board.
 - Providing training and technical assistance for the public health system to achieve improved health outcomes.
 - Providing funds to the Conference of Local Health Officials for ongoing meetings to support state/local governmental public health system work.

- Fulfilling legislative requirements, including accountability metrics development and reporting, annual Legislative Fiscal Office report. Providing communications in support of legislative deliverables.
- Proposed budget for PHI-D05 Sexual violence primary prevention:
 - Funds passed through to Oregon Coalition Against Domestic and Sexual Violence.
 - Funds one to three local, culturally specific organizations and/or Tribal sexual/domestic violence programs to continue to build capacity for and implementation of sexual violence primary prevention and programs.
 - Funds 0.8 FTE position to provide to funded and non-funded organizations online and in person (as able) sexual violence primary prevention technical assistance and training.

Funding

- State Health Improvement Plan: approximately \$858,500
- Public Health modernization: approximately \$326,700
- Oregon Coalition Against Domestic and Sexual Violence: \$88,458
- Indirect costs: capped at 10%
- Block Grant funding supports four positions within Oregon Health Authority to support and advance Block Grant priorities.

Public Testimony

Sheila Thomas: Requested that the work plan and minutes be sent to attendees. Requested lists of community-based organizations (CBOs) that have been or are being funded. Is the funding that CBOs receive through a competitive RFP?

Sara responded that she will send the work plan and minutes to attendees, as well as post online. Sara will also share links to the lists of CBOs currently funded through the Public Health Equity grant program and through Healthier Together Oregon. Sara confirmed that these funding mechanisms for CBOs are through competitive requests for grant applications.

Tom Engle: Expressed support of the work plan. Mr. Engle requested an estimate for how much of the funds go to local public health authorities. Mr. Engle noted that most of these funds appear to be used for planning, and he noted the challenges with planning for an unknown future. He was struck during the COVID-19 pandemic by how much work at the local level was being done by volunteers. Oregon needs to make sure that the capacity across the state includes people who are trained and able to respond, including nurses and

doctors. If this work is important, it should not be unpaid. Public health is losing trained nurses in the workforce. Mr. Engle also identified a need for trained epidemiologists to shift from collecting data to using data on the ground to support community health.

Sara responded that these funds are not allocated to local public health authorities (LPHAs). There is one current contract with an LPHA for community health worker training, and LPHAs are eligible to apply for funding through Healthier Together Oregon. Sara also noted that the Public Health Advisory Board currently has a workgroup meeting to conduct a public health system workforce assessment and plan, which is grappling with some of the issues raised by Mr. Engle.

Meeting adjourned.