



COALITION OF LOCAL HEALTH OFFICIALS

AIMHI – Aligning Innovative Models for Health Improvements

COMMUNITY MEETING SUMMARY: Marion, Yamhill, and Polk Counties

January 20th, 2017, Salem, OR



March 16th, 2017



Meeting Summary

Background:

The 2015 passage of House Bill (HB) 3100 has set Oregon's public health system on the path to modernization.

Public health modernization will update our public health system to be more efficient, effective and will create greater accountability and better health for all Oregonians. As a way to accomplish this, HB 3100 established a new framework of foundational public health services based on a national model. State and local public health agencies will work to implement this framework over the next ten years.

To support this implementation work, The Public Health Division of the Oregon Health Authority and the Coalition of Local Health Officials applied for and received a grant with the Robert Wood Johnson Foundation to support Oregon's work to modernize the public health system. This project, called Aligning Innovative Models for Health Improvements or AIMHI, focuses on preparing communities for transitioning to a modernized public health system. Under this funding, ten community AIMHI meetings happened throughout Oregon.

Meeting Purpose:

The purpose of the AIMHI Community Meeting was two fold:

1. Educate community partners about the new model for public health; and
2. Obtain feedback about creating new partnerships for improved health and working across jurisdictional boundaries.

Meeting Summary Report Purpose:

The purpose of this report is to provide a brief description of the components of the meeting and to summarize challenges, opportunities, and important narratives that were identified at the meeting during group discussion. The content in this report was composed using meeting notes regarding state and local opportunities and challenges to implementing the Foundational Public Health Services model and areas where successful models of public health efficiencies and cross-jurisdictional sharing exists in these Oregon counties.

Meeting Structure:

This six-hour, in person meeting was sponsored by the Coalition of Local Health Officials and facilitated by their contractor, the Rede Group. Local health department administrators from Marion, Yamhill, and Polk Counties supported the meeting through assisting with agenda development and presenting information during the meeting. The meeting was a blend of short presentations and group discussion. Local health department administrators invited community members, partners and local officials to attend the meeting.

Attendance:

Overall, 46 people attended the meeting. Among them were 2 local government elected officials, 19 local partners, 23 local public health department staff, 1 member of the Public Health Advisory Board, and 2 individuals from the Oregon Health Authority. For a complete list of attendees,

please see pages 5 – 6 of this report.

Presentations

- **A brief overview of governmental public health:** Presented by Katrina Rothenberger, Public Health Administrator, Polk County Public Health
- **Framework and benefits of a modernized public health system:** Presented by Jill Hutson, Rede Group
- **How our current system is structured & what improvements are necessary:** Presented by Pamela Hutchinson, Director, Marion County Health Department
- **Benefits and goals of Public Health Modernization:** Presented by Kathleen Johnson, Program Manager, Coalition of Local Health Officials
- **Statutory requirements:** Presented by Kathleen, Coalition of Local Health Officials

Summary of Group Discussion

Salem Challenges to implementing the Foundational Public Health Services Model

- Local public health agencies in this area are underfunded, creating challenges in meeting the needs of the community. All three counties in this area are able to commit some county funds to public health agencies; however, the Public Health Modernization Assessment (2016) found significant gaps between funding for the current public health system and funding needed to achieve a modernized public health system. Additional resources will be needed to fill these gaps.
- Structural boundaries within Oregon law may create challenges among partnerships; Oregon Revised Statute requires local health divisions to coordinate with Coordinated Care Organizations and Early Learning Hubs, but there is no statutory requirement for Coordinated Care Organizations and Early Learning Hubs to coordinate with public health.
- Currently, some community leaders and the general public may not understand the full spectrum of public health's roles and responsibilities. Addressing this challenge will be important in order to gain acceptance for a modernized public health system that focuses on foundational programs and capabilities.
- Counties in this area are especially concerned with their current ability to address health equity in a way that is meaningful and effective. They also lack confidence in their ability to respond to an immediate, unpredictable population need such as a communicable disease outbreak or a public health emergency that requires service outside the normal operating capacity.
- Maintaining a competent public health workforce and providing appropriate staff training for foundational public health services has been challenging for the counties in this area due to a lack of resources. When public health modernization efforts are funded, recruiting and retaining staff for certain positions is likely to be difficult.
- Counties in this area understand that fear of change within the community and the local public health department poses a challenge to implementing public health modernization. The implementation of public health modernization may require some services provided by local public health agencies to change, and some public health professionals may have their roles and functions adjusted as well. For some, changes such as these provoke stress

and anxiety, but with appropriate attention to change management, those transitory repercussions can subside. Additionally, supporting community members through the change curve may be challenging, but critical.

Opportunities for advancing public health modernization

- Local public health agencies in this area are actively engaged in understanding and building foundational elements for public health.
- Local public health directors and the county board of commissioners in this area are skilled and experienced in navigating cross-jurisdictional and cross-agency sharing agreements. In particular, Polk and Marion County have been successful in realizing and creating opportunities to improve collaborative efforts. Examples of cross-jurisdictional sharing include:
 - A partnership between Marion and Polk County to share health communication resources to more efficiently respond to communicable disease outbreaks;
 - A service provision agreement to share an Environmental Health Sanitarian between Marion County and Polk County;
 - A formal agreement among hospitals, Coordinated Care Organizations, and local public health agencies to share assessment and epidemiological data and resources;
 - Information sharing and coordination with the Early Learning Hub and local public health agencies;
 - Information sharing around public health policies to create efficiencies in policy drafting and clarify policy coverage;
 - Developing mentoring and shared training opportunities.
- Counties in this area have established effective and dynamic partnerships with local Coordinated Care Organizations and hospitals. These partnerships have led to alignment of Community Health Improvement Plan Priorities and have created value through resource sharing. This foundation provides an excellent runway for advancing public health modernization.

Important Narratives

- Working relationships and partnerships among various sectors within the health community are thriving.
- There is a strong desire among public health agencies and partners in this area to have adequate resources to allow for a greater focus on health equity.
- Adopting a new foundational services model will require resources from the state. In addition, public health modernization will require that public health staff and partners change not only some work-place behaviors but also certain beliefs about public health, such as the services it provides and its role in the community. Making this cultural shift will be critical to creating a modernized system.

Conclusion

The meeting in Salem was the fourth of ten AIMHI meetings across Oregon. Information shared in this summary will be included in a final report that highlights key themes from all ten AIMHI meetings. The AIMHI meetings took place throughout Oregon and concluded in the middle of February 2017; CLHO is working to develop tools to assist local communities as they move forward towards a modernized public health system.

Meeting Attendees in Salem, OR

Name of Attendee	Organization
Marybeth Beall	Northwest Human Services
Dean Bender	Polk County Health Department
Carla Bennett	Willamette Valley Community Health
Cara Biddlecom	Oregon Health Authority
Robert Brannigan	Polk County Health Advisory Committee
Jennifer Broadus	Salem Health West Valley
Kevin Cameron	Marion County Board of Commissioners
Janet Carlson	Marion County Board of Commissioners
Noelle Carroll	Polk County Health Department
Judy Cleave	Marion County Health Department
Greg Deblase	Marion County Health Department
Angie Docherty	Oregon Health & Science University (OHSU)
Aaron Dunn	Oregon Public Health Division
Dana Finch	Marion County Health Department
Jan Fritz	Marion County
Toni Grimes	Woodburn Ambulance Service
Silas Halloran-Steiner	Yamhill County Health & Human Services Department
Greg Hansen	Polk County Health Department
Lisa Harnisch	Early Learning Hub
Kevin Heidrick	Yakima Valley Farm Workers Clinic
Sharon Heuer	Salem Health
Kirk Hillebrand	Polk County Health Department
Pam Hutchinson	Marion County Health Department
Tonya Johnson	Oregon State University – Extension Service
Michelle Johnstone	Dallas School District
Jennifer Jordan	Kaiser Permanente
Jolene Kelley	Marion County Health Department
Karen Landers	Marion County Health Department
John Lattimer	Marion County Health Department
Dawn Lehman	Marion County Health Department
Lindsey Manfrin	Yamhill County
Michael Mann	Salem For All!
Susan McLaughlin	Marion County Health Department

Diane Quiring	Marion County Health Department
Eva Rippeteau Chavira	Oregon American Federation of State, County and Municipal Employees Council 75 and Public Health Accreditation Board member
Tessa Robinson	Marion County Health Department
Katrina Rothenberger	Polk County Public Health
Gail Saxowsky	Polk County Health Advisory Board & Polk Community Free Clinic
Richard Sherman	Marion County Health Department
Kendra Stafford	Marion County Health Department
Anna Stern	Willamette Valley Community Health Coordinated Care Organization
Barbara Townsend	Polk County Health Advisory Board
Patrick Vance	Marion County Health Advisory Board
Patty Vega	Marion County Health Department
Melinda Veliz	Legacy Health
Patti Warkentin	Oregon Health & Science University (OHSU) – School of Nursing
Wendy Zieker	Polk County Public Health