

Multnomah County Public Health Advisory Board July 2018 Retreat Minutes

Date: Thursday, July 26, 2018

Time: 2:30pm - 6:30pm

Location: Multnomah Building, 501 SE Hawthorne, Room 126

Purpose: To advise the Public Health Division on several areas of work with a strong focus on ethics in public health practice and developing long-term public health approaches to address the leading causes of death and disability in Multhomah County.

Desired Outcomes:

- 1. Continue to get to know each other and develop as a board;
- 2. Review and discuss board logistics;
- 3. Hear about board member engagement and opportunities for involvement;
- 4. Breakout into Committees and take a deeper dive into the work

Members Present: Tyra Black, Bernal Cruz, Debbie McKissack, Suzanne Hansche, Becca Brownlee, April Johnson, Cheryl Carter, Bertha Ferran, Gerald Deloney, Joannie Tang (phone), Alicia Junker, Chuck Tauman

Public Health Division staff: Rachael Banks, Nathan Wickstrom, Adelle Adams, Jessica Guernsey, Christina Brown, Koua Cha, Debbie Rood

Item/Action	Process	Lead
Welcome & Introduction	Board members introduced themselves	April Johnson
Public Comment	There was no public comment	April Johnson
	April reviewed the agenda	
Agenda Review	Suzanne suggests reviewing charter before bylaws	April Johnson
	Board approved	
Review of April meeting minutes	April board meeting minutes were approved	April Johnson
Getting to Know You	 Rachael welcomed everyone and thanked members for serving on the board It's a relatively new board; established in 2015 We've had the articulation of several Committees Pleased with the work being done by the Committees Been thinking of other opportunities for engaging the board Ethics Committee work around reproductive health and justice is so timely PH approaches also timely - looking at the leading causes of death Doing work simultaneously in PH Division so that work from board members has a home 	Christina Brown

	challenge?	
	 Suzanne: we all participated and delegated jobs to the group Tyre: there ween't one leader: all were enhanced 	
	 Tyra: there wasn't one leader; all were onboard Everyone initially got a say in what they prioritized; really participatory 	
	What did you learn from the challenge?	
	 Both groups are willing to work together 	
	 Cheryl: honored to be on the boat; we can get the boat to the shore. 	
	We were chosen by the community to get us there. We can't be	
	divided; you can't conquer us.	
	 Alicia: We did the top 3 priorities and then tried to determine where 	
	commonalities were and where to compromise.	
	Went over the MC-PHAB group agreements on the back of the agenda	
	 Bernal: I like the focus on the quality of the journey, not just the 	
	destination.	
	 Suzanne: Listen to understand is important to me 	
	 We've had some challenges in the past with this, particularly 	
	due to time. Let's figure out how to value this and make the	
	time to do it right.	
	 Everyone agreed to continue using original group agreements 	
	Voted for Sandra Clark as Chair	
	 Sandra received one vote 	
	Voted for Suzanne Hansche as Chair	
	 Suzanne received seven votes 	
	• Suzanne approved as the new Chair	
	Tyra Banks accepted the nomination as Vice Chair	
	• Ran unopposed	
	Suzanne: Process was a really good, positive opportunity. She met with Tyra and	
	discussed potentially Co-Chairing	
	 April: This prior year was tough, but I'm really glad that with everyone supporting the group we were able to make forward. I'm grateful to leaving and Bachaol that 	
	the group we were able to move forward. I'm grateful to Jessica and Rachael that	
	 you heard us and our communities. I want to thank you. Jessica: seeing everyone come together was really special. Thank you. 	
	 Jessica: seeing everyone come together was really special. Thank you. Rachael: I could not think of a better person (April) to be leading the group 	
	through this time of change. We wouldn't have been here without you.	
	 Tyra: April really encouraged me to go for it. 	
	 Charter: 	
	• Suzanne: it's not clear to me how what is in the current charter was	
	decided.	
	Christina: when MC-PHAB first came onboard there was a	
	bylaws committee that created the previous iteration of the	
	bylaws	
Planning for the	The bylaws were presented with the new structure in January	Christina
New Year Ahead	and modified in April	Brown
	 Took it offline to gather feedback in order to bring back to 	
	July meeting	
	• Suzanne: members still concerned at January meeting about bringing	
	forward emerging issues; would set a process for doing so	
	How was emerging issues put out of scope?	
	 Now that we have more focus, we could remake the issues 	
	analysis form to bring it up to date and then try to determine if	
	an emerging issue is in scope	
	 April: there is an issues analysis form that was created to 	
	bring forward issues. In the beginning we had to narrow the	
	structure to go forward. We could reevaluate that now.	
	Maybe take this first year to ground in committee work	
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		 PH approaches will create alignment with legislative agenda 	
	0	Rachael: budget and legislative are the two biggest pieces. PH	
		approaches has been taking the long-term approach to influence	
		legislative priorities. If we keep moving forward at pace we'd be right	
		on track.	
	0	Suzanne: language-wise, 3 issues, not 2	
		Include a minimum number of meetings?	
		 e.g. we'll meet quarterly with a minimum of 4 meetings 	
	0	Out of scope includes some language around emerging issues	
	0	Chuck: concerned about limiting with scope (e.g. soda tax)	
		 Soda tax out of scope for PH Division, but would hate to not 	
		be able to take a stance on the issue	
		 Rachael: let me get a legal perspective (ballot component) 	
		Could be touched on PH Approaches	
		 e.g. Cleaner Air - Suzanne 	
		Another thing is prioritizing it	
	0	Christina: due to time I will work with the new Executive Committee to	
		rework the language and bring forward the revamped Charter and	
		Bylaws to October meeting	
	0	Charter Modifications for consideration:	
		 Add time keeper for calendar year Finance Committee language 	
		 Finance Committee language Add evaluation component 	
		 Language: The MC-PHAB advises the Public Health Division. 	
		It focuses on ethics in public health practice and developing	
		long-term public health approaches to address the leading	
		causes of death in Multhomah County.	
		 Operationalize group agreements, specifically can we 	
		consider sdopting a stacked speaker's list? I think this would	
		help with our last bullet of "be mindful of how much space	
		you take"	
•	 Bylaws: Co 	ould add Exec Committee names to bylaws	
•	 Finance Co 	ommittee Presentation by Koua Cha and Debbie Rood (will be sent out	
	with minute	es)	
	0	Koua Cha: Process for incorporating finance into the group	
	0	Phase 1: July meeting - present the big picture for finance (whole	
		group involved); present updates at quarterly board meetings	
	0	Phase 2: In 2019 - Forming finance committee	
		 Chair, Vice Chair, 4 other members 	
		A Committee of this board	
		Meet quarterly	
		 Meet more often in November, December January because they are the busy times in the County 	
	0	because they are the busy times in the County Phase 3: July 2020 to June 2021	
	0	 Topic selection and engagement 	
	0	Suzanne: How can our input make an impact?	
	0	 It will initially be more general in the first year, but as the 	
		Committee forms it will become more involved in decision-	
		making process	
	0	April: I like this process and how it will help hone in on the PH	
		Division's process	
	0	Debbie Rood: Overview of the PH Division budget	
		 Public Health makes up roughly 16% of Health Department 	
		budget - \$54.6 million	
		 Largest programs are HIV/STD/ASH, Early Childhood 	
		Services and Environmental Health	
		 A majority of the budget comes from General fund (42%) 	
		■ Grant reliant	
		 Expenses: personnel largest expense (60%) 	
		 County match - certain fees that we generate and are paid 	
		for by the state that we have a match requirement for (e.g.	
		restaurant inspections)	
		 Funding sources: program sources differ drastically; could be 	
		all general fund or largely funded by grant	
		 Environmental Health has the largest number of FTE 	

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	 Last fiscal year, PHD cut vacant positionst; all but one 	
	manager were able to find vacant positions	
	Passthrough & Professional Services - \$10.6 million	
	 Increased funding to community organizations by 	
	24%	
	 Allocating general fund dollars and trying to be more 	
	equitable	
	 Modernization and CCO 2.0 - more coverage by services 	
	through OHPAs a community member, these are some of the	
	•	
	issues that we are working on and can provide input	
	on Modernization is a funding strategy 	
	 Even with the general fund, we have to be willing to 	
	modernize	
	 Shifting the money within general fund (e.g. 	
	equity and data analytics)	
	 Trying to get more money from state (modernization) and 	
	more money from CCOs	
	 Rachael - how do folks feel about the information and visuals? Was it 	
	easy to understand?	
	 Slides and Finance Committee information will be sent out with 	
	minutes	
	Membership committee looking for new members	
	Ethics Committee:	
	 Ethics committees tend to be fairly academic and rigid 	
	• We wanted to open the concept up to more emerging issues in public	
	health that aren't those strict academic questions	
	• Agreements on process:	
	Why are we doing this?	
	Opening up the books	
	 Looking at our practices, finances, and approaches Define an issue to really eak for community window 	
	 Refine an issue to really ask for community wisdom Planning on applying for accreditation in 2 years; 	
	 Planning on applying for accreditation in 2 years, need an ethics committee 	
	 Struggled in first meeting on what process we 	
	wanted to use; people really wanted to learn how to	
	use the equity lens (5Ps)	
	 Made a modified version of the 5Ps 	
	 Did a group breakout using the 5Ps and structured 	
	ethics questions - walking through pieces in small	
	groups	
	 One of the things we realized was that in the bylaws we have a 	Rachael
0	consensus building measure, but want a different process for the	Banks,
Committee Work	ethics committee that is kind of a majority/minority structure	Jessica
	 Think that we need to propose a new structure for consensus 	Guernsey
	(e.g. Robert's Rules of Order)	
	 See that there could be an issue with current 	
	structure	
	 When they cease to work, the rules need to change 	
	Need to be clear on the outcome that we need when doing	
	the ethics committee work	
	 Our input made an impact just by giving community wisdom Didn't stay true to the EDs in practice deliberation 	
	 Didn't stay true to the 5Ps in practice deliberation Really valuable information some up while 	
	 Really valuable information came up while deliberating 	
	deliberatingNeed to have 5Ps at the forefront and then meld with	
	ethics questions (asking the right questions)	
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 One of the only areas that the federal government has noticed if you look more at the data around alcohol and drugs, opioid is not the main issue Differential treatment of this issue At the early stages of an all-substances approach What are the areas that we're missing? Bring the ethics committee together to learn what are the responses to this e.g. alcohol (not a robust approach) We're branded with alcohol - sponsor a lot of events that involve alcohol A lot in this that we're trying to unpack and think through; unintended consequences Looking at prevention and addiction Something to hope for; adverse factors in your life Build a robust prevention strategy What are we not thinking about when walking through the 5 Ps? How do you know prevention worked? We can always talk about treatment and recidivism When looking at alcohol, could make the case that it has a larger negative impact than opioids Look at teen pregnancy prevention work as an example If this is one of the only streams of funding that we're going to see Gambling has a lot of the same repercussions; same impact as drugs, but not considered a health issue This is the kind of issue that Jessica wants to be brought forward Decriminalizing drugs? What are the known prevention strategies? It's our job to recognize barriers and introduce ideas that aren't necessarily proven. The more we can start shaping the narrative (e.g. gambling, transgenerational trauma)
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narrative (e.g. gambling, transgenerational trauma)
- Llow do we need to think at this?
 How do we need to think of this? Transgenerational trauma, addiction
■ Going to be a heavy lift
 Some robust prevention activities exist (tobacco)
 Have not taken a classic public health approach to a lot of
work
Ethics committee will be meeting August 23rd
 Document going to be sent out prior to meeting Christina will send out an evaluation after this meeting
 Strengths you see in the Board:
 collaborative
 community wisdom
 good mix of age avaration of a second to reinvest the wheel
 experience - don't need to reinvent the wheel bringing in a fresh perspective
 motivation to do the right thing
 able to laugh with each other
• enjoy the food and snacks
Mosting
Evaluation • What worked?
• what worked? • activities
 materials
 building on each meeting - doing a good job of listening and learning
 preparing for what's coming next
 leadership changed hands
\cap new members dot to participate in the voto
 new members got to participate in the vote What can be improved?
 new members got to participate in the vote What can be improved? running out of time

	 stacked speaker list would like to know more about the committees 	
•	Exec Committee - 2nd Friday of the month at 9:00am Rachael - in awe of how Christina put this retreat together	
•	Meeting adjourned at 6:32pm	