



Multnomah County Public Health Advisory Board Minutes
Public Health Approaches
May 2019

Date: Thursday, May 23, 2019

Time: 3:30-5:30pm

Location: Multnomah Building, 501 SE Hawthorne, Room 126

Purpose: To advise the Public Health Division on several areas of work including developing long-term public health approaches to address the leading causes of death and disability in Multnomah County.

Desired Outcomes:

1. Hear an update on the Public Health Division's next steps with the Board of Health
2. Hear about the Public Health Division's internal policy prioritization process
3. Learn about the policy pathway to action
4. Work together to create a retreat plan for the Public Health Approaches committee

Members Present: Suzanne Hansche, Becca Brownlee, Cheryl Carter, Debbie McKissack, Joannie Tang, Rebecca Lavelle-Register, Bertha Ferran, Chuck Tauman

Public Health Division staff: Rachael Banks, Nathan Wickstrom, Christina Brown, Bernadette Nunley

Item/Action	Process	Lead
Welcome, Introduction s, & Minutes Review	<ul style="list-style-type: none"> • Attendees introduced themselves • Cheryl agreed to recite a poem at the retreat in July • Agenda was accepted with no recommended changes • March minutes were approved 	Suzanne Hansche
Board of Health Next Steps	<ul style="list-style-type: none"> • Work with the Board of Health (BOH) started with the 2014 Disparities Report <ul style="list-style-type: none"> ◦ Not just about pulling data, but about doing something about disparities <ul style="list-style-type: none"> ▪ MCPHAB came out of the report ▪ Community Health Improvement Plan/Community Powered Change also emerged from report • Public Health staff crosswalked the MCPHAB policies priorities to determine what's missing and what needs to be brought forward <ul style="list-style-type: none"> ◦ 40 policies identified - spectrum of policies <ul style="list-style-type: none"> ▪ Invited Public Health teams to present their policy recommendations ▪ Substance use/abuse and behavioral health policy concepts emerged ▪ Multi divisional and departmental effort creating coordinated work ◦ Prioritized 15 policies to move forward ◦ Next steps: <ul style="list-style-type: none"> ▪ Present policies to Patricia and further vetted by Department ▪ Present to the Chair ▪ Timeline - end of June • Valuable process looking at how policies relate <ul style="list-style-type: none"> ◦ Next step: Do an Ethics topic exploration before end of June • New board members/expertise coming to Board in July • Currently determining long-range plan going forward with BOH • BOH Timeline - Late summer/early fall to present to BOH (potentially end of July) <ul style="list-style-type: none"> ◦ FYI March 7 BOH presentation to Commissioners has brought interest from tobacco industry <ul style="list-style-type: none"> ▪ Currently on watch and tobacco industry is trying to mobilize against ▪ Need to be very careful with language • Presentation to Chair in June <ul style="list-style-type: none"> ◦ Initial recommendations will come through her staff via Rachael and Patricia ◦ Stakeholder and community engagement will follow <ul style="list-style-type: none"> ▪ Presentation to Commissioners is a way to kick off community engagement ◦ The Chair will ask for a presentation <ul style="list-style-type: none"> ▪ Panel of experts and potentially community members will present <p>Action Items:</p> <ul style="list-style-type: none"> • Explore ethics discussion on policy work and figure out how ethics committee can interact with the PH approaches committee 	Rachael Banks
Public Health Division	<ul style="list-style-type: none"> • Bernadette introduction <ul style="list-style-type: none"> ◦ Worked previously in the County Attorney's office for 11 years; Health Department attorney for 8 years 	Bernadette Nunley

Internal Policy Prioritization Process	<ul style="list-style-type: none"> ▪ Has knowledge of different areas of the Department as well as knowledge of and interest in the regulatory process ▪ Excited to work in broader regulatory areas with a Public Health lens ● Public Health Policy Prioritization: Context <ul style="list-style-type: none"> ○ Leading Causes of Death - chronic disease and injury are the two big buckets ○ Currently making additional priority recommendations and running a political feasibility analysis ○ Important to ensure we can back up what we're recommending with policies ○ Keeping a focus on the leading causes of death and racial and ethnic disparities and inequities ○ A lot of the focus is on leading exposures ○ Some areas tend to be more regulatory, while other areas are less so, making coming up with policy recommendations more challenging ○ Parameters for teams giving policy recommendations: <ol style="list-style-type: none"> 1. <i>Leading causes of death policy approaches "buckets"</i> 2. <i>Specific recommended policy action</i> 3. <i>Positively affect disparities and inequities</i> 4. <i>Feasibility (legal and practical)</i> 5. <i>Readiness and timeline</i> 6. <i>Programmatic capacity</i> ○ Teams thought about changes that are needed, and what is feasible <ul style="list-style-type: none"> ▪ Created "bike rack" for areas that did not fit parameters (will be looking at ways to get them out of the bike rack as we move forward) ○ Are we also looking at CHIP and PH Modernization as parameters? <ul style="list-style-type: none"> ▪ Leaning on policy is a good example for our aim in modernization ▪ Community Powered Change has us overlaying CHIP strategies on leading causes of death ▪ Local action prompts another type of action at the state level ▪ Always looking at Social Determinants of Health ○ Policies in the Bike Rack <ul style="list-style-type: none"> ▪ Want to make sure there is some momentum around these ideas ● Public Health Policy Prioritization: Process <ul style="list-style-type: none"> ○ Placed policies on paper around the room and had people put sticky notes on papers to gauge the temperature of the room ○ Great to see where people were gravitating; energy to move policies forward 	
Policy Pathway to Action	<ul style="list-style-type: none"> ● Discussed policy concepts related to: <ul style="list-style-type: none"> ○ Tobacco prevention ○ Nutrition and Physical Activity ○ Violence prevention ○ Injury prevention ● These areas affects every area of the Health Department 	Bernadette Nunley
Retreat Planning	<ul style="list-style-type: none"> ● Challenge and task to keep moving, yet orienting new members in July <ul style="list-style-type: none"> ○ Encourage new members to watch 3/7 BOH presentation ○ Consider different levels of orientation (retreat, presentation from each Committee) ● Use June meeting to determine retreat agenda and how to orient new members <ul style="list-style-type: none"> ○ Suzanne will ask that folks will be present as much as possible ○ Enough new members (8) that all old members will have the opportunity to mentor ● 2-hour orientation meeting scheduled in June with staff and membership committee ● Keep PH Approaches meeting on the calendar for next month in order to map out committee work Action Items: <ul style="list-style-type: none"> ● Prep for next meeting: Suggest how to ensure new folks gain knowledge about this committee and how we do this work? 	Suzanne Hansche
Wrap-up and Meeting Evaluation	<ul style="list-style-type: none"> ● Meeting adjourned at 5:34 ● Christina provided a paper evaluation and is also sending out online evaluation ● Invite commissioners, especially the new commissioner to future meetings 	Suzanne Hansche