

Multnomah County Public Health Advisory Board Minutes September 2020

Date: Thursday, September 24, 2020

Time: 3:30-5:30pm

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. Receive background information from the Joint Office of Homeless Services
- 2. Provide feedback on the Local Implementation Plan
- 3. Connect the Board of Health policy priorities with the new priority areas
- 4. Discuss action opportunities for MCPHAB to take based on the priorities

Members Present: Suzanne Hansche, Becca Brownlee, Hanna Atenafu, Timur Ender, Mahad Hassan, Ryan Petteway, Cheryl Carter, Maribel Reyes, Maher Lazeg, Alyshia Macaysa, Debbie McKissack, Daniel Morris, Joannie Tang Multnomah County Staff: Rachael Banks, Jessica Guernsey, Adelle Adams, Bernadette Nunley, Nathan Wickstrom, Joshua Bates, Paul Stark, Patricia Charles-Heathers

Item/Action	Process	Lead
Welcome, Introductions, & Minutes Review	 Board members, staff and guests did a brief introduction MCPHAB did a brief mindfulness activity June minutes were approved 	Becca Brownlee, Hanna Atenafu
Metro Supportive Housing Services Measure (MSHSM) Local Implementati on Plan (LIP) Discussion	 Joshua gave an overview of the MSHSM LIP (see slides) and then led a facilitated discussion What are the most significant unmet, health-related needs faced by those experiencing long-term homelessness? Mental health needs need to be addressed in the field through direct outreach The system is much more difficult to navigate for immigrants Psychological services have largely moved to video and telephone due to COVID-19; lack of in-person contact is difficult Mental health effects of police Trauma-informed design Balanced system, interveaving mental health services Treatment of ailments Structural barriers (community determinants of health) Trauma from systems letting people down How do we address systems? Through political power More political representation in East County As a system, what programs, services or interventions should we invest in to better meet these health-related needs? There is a large need for coordination between programs Investment in food box delivery programs Volunteers or election officials registering people to vote Food markets - provides a safe space, social workers, food and is low barrier Counseling that comes to people We need to build affordable housing The discharge standard needs to ensure that patients continue receiving care and are not just put out on the streets Community-based services know how to do the work; the barriers need to be removed More effective planning and communication with service providers is needed Address the challenges of getting to medical appointments Representation and using words that people can understand is really important for service delivery Notes from the chat: Paul: To the point earlier	Joint Office of Homeless Services

the Regional Oversight Committee recruitment: https://mailchi.mp/b39989ac3994/apply-to-serve-on-metros-oversightcommittee-for-supportive-housing-services-measure-due-oct-2?e=619099e397 I've heard recently that the due date may be extended beyond Oct 2 for applications. Patricia: Coordinate and integrated data system need to know what services people are receiving and having coordination of services; need a data system that tracks accordingly Timur: Sarah.Goforth@Portlandoregon.gov (Sarah Goforth) is the contact at the Portland Bureau of Transportation if you would like to contact someone at the City about transportation wallet and programs that can provide free bikeshare and other programs for a specific population **Action Items:** If interested in being on the Metro Oversight Committee, apply here. Applications accepted through October 2nd Joshua will share how MCPHAB can monitor the Local Implementation Plan How do we bring forward issues to the board? Bernadette and Suzanne have added to the policy spreadsheet in the past How should we look more at what's out there? Should we be paying attention to investments in public health? Multnomah County is working with Reimagine Oregon - how do we support that? Multnomah County is putting together a webpage to answer questions related to Reimagine Oregon Rachael had an initial conversation with Oregon Health Equity Alliance regarding racism as a public health crisis Want to honor the work that's already been done in this area Chair's Office assigned staff to crosswalk Board of Health work, CHIP work and Reimagine Oregon work More coming in the next several weeks Additional comments are being accepted for Crisis Care Guidance testimony until 5pm, September 25 Ryan: o It makes sense to align priorities with Reimagine Oregon work, which aligns with CHIP and SHIP o Need to spend some time to focus on role of public health What do we mean by police powers? How do we use legal public health authority to protect? Need to be more deliberate and critical going forward - at least in legal framing of public health police powers. Becca Policy o Alameda County is an example Priorities -Brownlee, Ryan will share contacts with Becca Action Hanna Hanna can provide Early Head Start updates Opportunities Atenafu How do we want to communicate to one another? Do we want to use task groups? Maribel - I like doing the work within the meetings themselves Have manageable tasks - need to be taking care of ourselves, as the work can be overwhelming Ryan - Create space and a looser structure that gives us time to share and connect (e.g. happy hour) Old notes on CCG from chat: As a committee, we therefore request that OHA do the following: o Anchor all crisis standards of care deliberations in Critical Race Theory and Public Health Critical Race Praxis o Provide public statement re: position on structural racism and bias as related to crisis standards of care in context of COVID-19 o Convene series of open meetings/call-ins with community groups to discuss concerns; share all internal meeting minutes with the public develop paid advisory group to help co-develop guidance documents that can be adapted and disseminated across local jurisdictions and care networks o Convene statewide crisis standards of care oversight committee with community representation to monitor and review all uses/applications of scoring rubrics related to COVID-19 - report data publicly Support legislation that calls for all care networks to report the racial equity impacts of all COVID-19 related triage decisions No one can be on the care triage team if they have not completed implicit bias

	training	
Wrap-up and meeting evaluation	 If you are interested in mentorship or connection, reach out to Becca or Hanna Nathan will send out the evaluation Meeting adjourned at 5:15 Action Items: Nathan will send out the mindfulness moment video Nathan will look into whether there is a way to get premium memberships or discounts for the Lund Report for board members 	Suzanne Hansche