Public Health Committee

April 17, 2018

North Bend, OR

Attending:

Andrew Shogren – Suquamish Tribe

Kelle Little – Coquille Tribe

Staff: Victoria Warren-Mears

Announcements:

The Public Health Emergency Preparedness Conference will be held in May 16th through 18th with some pre-conference workshops available. The Conference will be held in Suquamish. The NWTEC hopes to have at least one person attend per tribe

Travel reimbursement is available for tribal attendees – we guarantee $500 in support per tribe, but additional support will likely be available to those who need and request it when they register. Our goal is always to cover full travel costs for at least one attendee per tribe, plus additional people if our budget allows. If you have any questions, please contact Bridget Canniff at bcanniff@npaihb.org or Taylor Ellis at tellis@npaihb.org ..

Tribal Health Updates:

Coquille – has consolidated emergency preparedness public health and continuity of operations planning. The Operations Director for the Tribe oversees planning, facilities, law enforcement and GIS.

They are considering splitting clinical health operations management and public health. Currently there is a quasi public health department with many shared staff with the clinic.

* + CHR duties were discussed – performs home visit with elders frail elders, and recently released from hospital. Report to nurse case manager. Clinic health case managers; mobility manager, healthy programs coordinator.
	+ Currently working on development of a dental clinic following the addition of a pharmacy.

Suquamish – Andrew discussed the planning related to health services. Feasibility and scoping of clinical services are the primary issue at this time. A discussion was held on quality improvement initiatives.

County Public Health Functions:

Victoria mentioned that she had just heard from OHA staff that Wallow County was returning their public health functions and authority to the state of OR. Douglas County has contracted with Cow Creek for some public health functions. There is some indication that Coos County may be looking at their public health functions.

The group discussed engagement with counties. Areas mentioned included immunization projects, emergency preparedness, and accountable communities of health. Counties vary in their abilities, willingness and success in working with tribes.

HRSA:

A brief discussion was held regarding the HRSA funding for rural clinics. HRSA has given feedback that Kitsap is not a rural county. HRSA may be willing to entertain language for rural and tribal clinics.

It was suggested that at the Region X consultation we may want to advocate for the addition of tribal and rural community health clinic language in the HRSA grant process.

The meeting adjourned at 1:15 PM.