
Local public health authority public health modernization: 2021-23 themes and accomplishments

February 2023



PUBLIC HEALTH DIVISION
Office of the State Public Health Director



Purpose

- Share results from October 2022 local public health authority (LPHA) Program Element 51 progress reporting and budgets.
- Bring attention to and celebrate the amazing efforts and progress happening across Oregon.



Funding and budgets

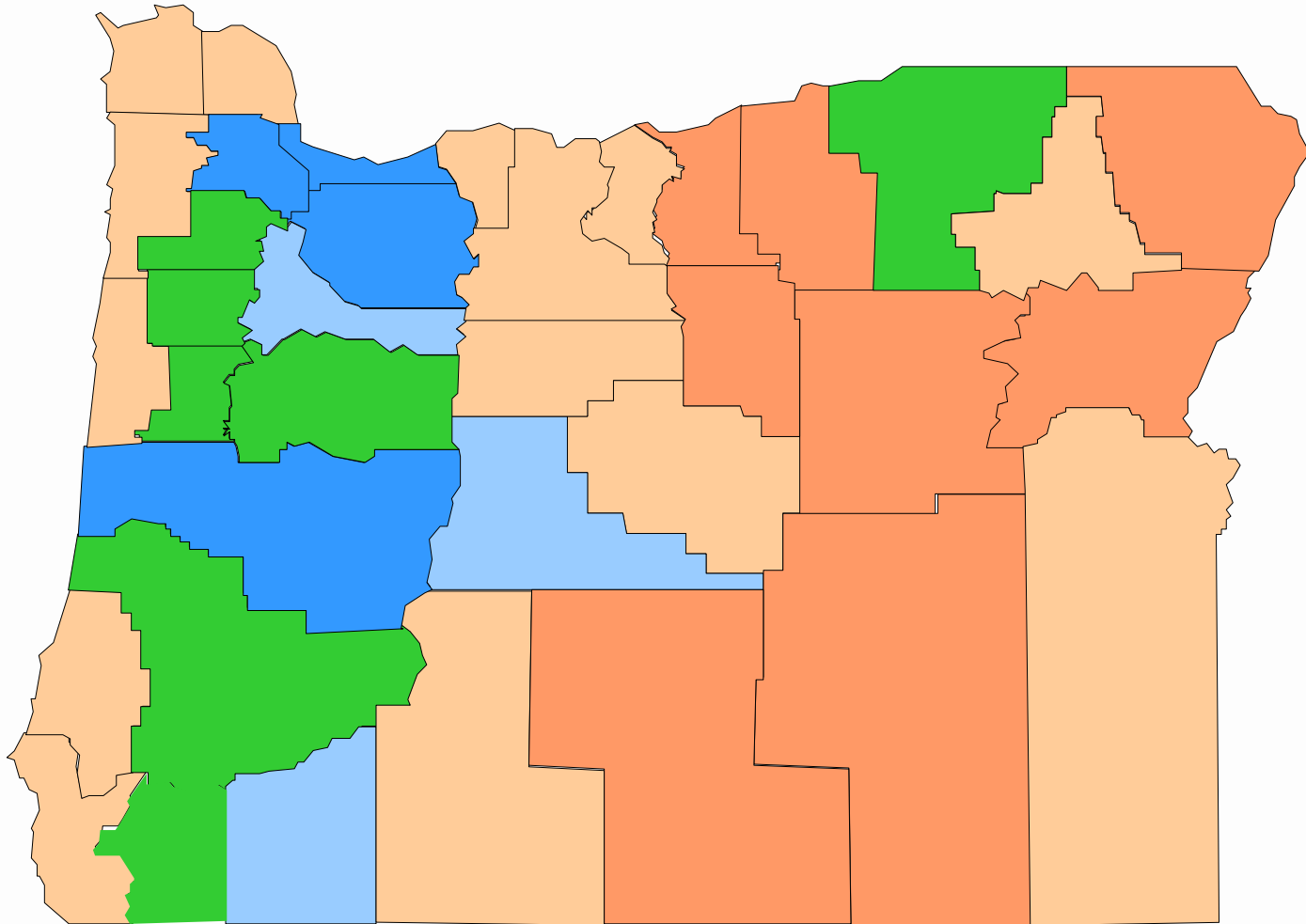
Image: @aliciarain, Travel Oregon

2021-23 public health modernization funding to LPHAs: \$33.4 million

County population size band	Funding range	Average award amount	Total funding to size band
Extra small <20,000 n=7	\$102,484- 216,378	\$157,811	\$946,867
Small 20,000-75,000 n=12	\$283,044- 597,333	\$413,585	\$4,963,021
Medium 75,000-150,000 n=7	\$611,017- 909,989	\$770,207	\$5,391,448
Large/Extra-large >150,000 n=7	\$1,085,770- 4,772,878	\$2,539,102	\$17,773,712

* This table includes Program Element 51-01 funds only.

County population size bands



County Size Bands

Extra Small	Small	Medium	Large	Extra Large
up to 20,000	20,000-75,000	75,000-150,000	150,000-375,000	above 375,000

Fiscal Year 2023 budgets

- **More than 300 positions being funded** through local public health modernization funds*

Positions/roles	# funded (preliminary)
Communicable disease	> 80
Environmental health	> 30
Foundational capabilities	> 50
Health equity/community outreach	> 20

* Includes new and existing positions. Includes positions partially and fully funded with public health modernization dollars.

Number of Positions Funded by County Size, PE 51-01 only

LPHA population size band	Total # positions funded in size band	Range of positions funded
Extra Small	28	2-7
Small	62	2-9
Medium	38	4-8
Large/Extra large	157	11-49

* Includes new and existing positions. Includes positions partially and fully funded with public health modernization dollars.

Fiscal Year 2023 budgets

More than ninety-five contracts between LPHAs and other organizations, **for nearly \$5 million.**

Common areas:

- Strategic planning, workforce development, leadership development, policy development
- Health equity, climate adaptation plans, CHAs and CHIPs
- Health equity training and toolkits
- Contracts with community partners
- Communications (website, translation services, outreach materials)
- Fiscal staffing, HR recruiting
- Medical director/Health officer



Communicable disease control and environmental health

Image: @doughauckphotography,
Travel Oregon

Programmatic goals and requirements

LPHAs are required to work toward the following goals.

- Goal 1: Protect communities from acute and communicable diseases through prevention initiatives that address health inequities.
- Goal 2: Strengthen and expand communicable disease and environmental health emergency preparedness, and the public health system and communities' ability to respond.
- Goal 3: Protect communities from environmental health threats from climate change through public health interventions that support equitable climate adaptation.
- Goal 4: Plan for full implementation of public health modernization and submission of local modernization plans by 2025.

Programmatic goals and requirements

Three required plans

LPHA are required to demonstrate work to develop, modify and/or implement the following three plans:

1. Local or regional **all hazards preparedness plan** with community partners.
2. Local or regional **health equity assessment and plan**.
3. Local or regional **climate and health assessment and plan**.

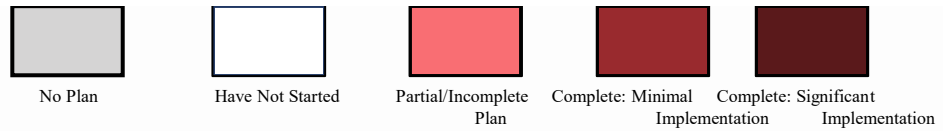
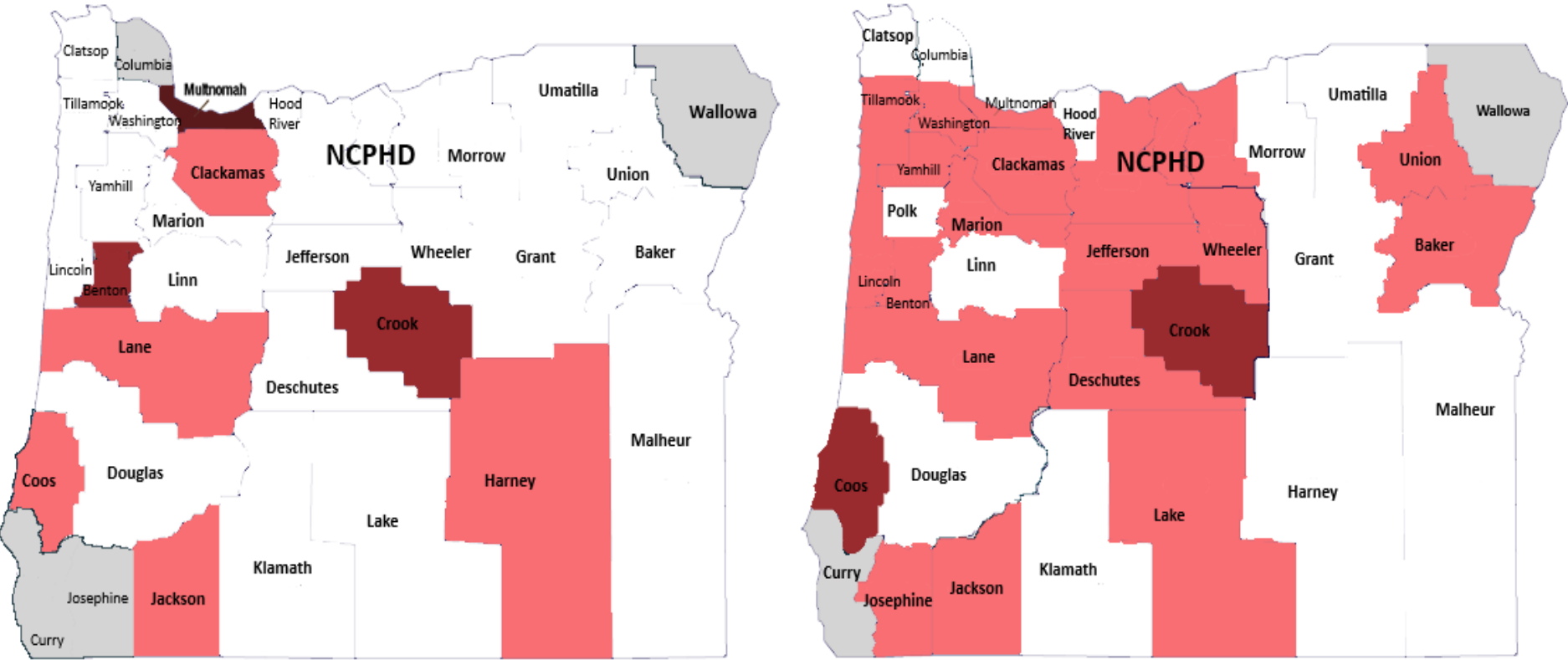
Programmatic goals and requirements

- Goal 1: Protect communities from acute and communicable diseases through prevention initiatives that address health inequities.
- Goal 2: Strengthen and expand communicable disease and environmental health emergency preparedness, and the public health system and communities' ability to respond.
- **Goal 3: Protect communities from environmental health threats from climate change through public health interventions that support equitable climate adaptation.**
- Goal 4: Plan for full implementation of public health modernization and submission of local modernization plans by 2025.

Local or Regional Climate Adaptation Plan Comparison

2021

2022



Examples of climate and health strategies implemented by LPHAs, 2021-23

Developing data reports for environmental health risks

Assessing climate-related vulnerabilities and outcomes

Engaging partners to advance climate initiatives and policy

Conducting community surveys to assess awareness of environmental health threats

Local spotlight

“Environmental Health has built new partnerships with organizations representing groups most impacted by climate change. This includes the incorporation of a health-focused, culturally specific group into the executive steering committee for the County’s Climate Justice Plan”.

Multnomah County Public Health

Local spotlight

“Earlier this year, we began our collaboration with LCRI (*Lake County Resources Initiatives*). The survey they are conducting to evaluate Lake County's community readiness for the effects of climate change benefits their organization's mission as well as one of the objectives of PE51”

Lake County Public Health

Local spotlight

“The Smoke and Health/Intrusions Data Project has the regional Climate and Health coordinator and an Epi staff developing a report examining known health impacts associated with historical smoke intrusions related to prescribed burns.

Additionally, the C&H Coordinator works with epidemiologists and local providers by using ESSENCE data to identify Health Related Illnesses (HRI) and deaths.

This work supports the development of a larger report looking at impacts from heat in Central Oregon and will inform understanding of local resilience for heat events”.

Jefferson County Public Health

Local spotlight

“The following work is in process:

- (1) (1) Creating communication materials for community and partners on wildfire and smoke impacts and extreme heat;
- (2) (2) Updating and collecting new data for the 3rd Regional Climate and Health Monitoring Report;
- (3) (3) Analyzing and reviewing data to create seasonal hazard and health outcome reports on extreme heat and wildfire smoke;
- (4) (4) Working across public health programs to plan and prepare for community engagement efforts to assess community need and priorities for climate and health;
- (5) (5) Meeting with regional local public health partners regularly to identify areas of collaboration and shared assessment”.

Washington County Public Health

Local spotlight

“Promoting within agency to increase job retention and satisfaction.

Redesigning PH workforce to PE related teams for promotion of more horizontal decision making & greater diversity of opinions & problem solving

Team leading revolves around expertise of team members”

Morrow County Public Health

Programmatic goals and requirements

- **Goal 1: Protect communities from acute and communicable diseases through prevention initiatives that address health inequities.**
- Goal 2: Strengthen and expand communicable disease and environmental health emergency preparedness, and the public health system and communities' ability to respond.
- Goal 3: Protect communities from environmental health threats from climate change through public health interventions that support equitable climate adaptation.
- Goal 4: Plan for full implementation of public health modernization and submission of local modernization plans by 2025.

Examples of communicable disease prevention strategies implemented by LPHAs

Working with LTCFs to prevent COVID, influenza and other infectious diseases

Expanding outreach and partnerships to reach underserved populations

Educating health care providers on screening and treatment guidance

Performing deeper data analyses to identify priority populations and system level gaps in care

Creating communicable disease data dashboards

Partnering with schools and universities on prevention initiatives

Local spotlight

“The major area we are excited about is adequately staffing our communicable disease group for the first time in our history. We’re even able to go beyond investigations and connect people with providers and resources. We have also been creating feedback loops to address diagnosis and treatment gaps with our medical community”.

Linn County Public Health

Local spotlight

“CHD formed a cooperated call with Eastern Oregon University. This meeting is a platform used to address communicable disease interventions, updates, and educational opportunities for students and staff.

WRAPDAP Meetings formed with OHA and CBOs. Meeting is utilized to discuss events and opportunities to expand services and resources for communicable disease. The meeting also provides opportunity for partners to work together on outreach efforts”.

Union County, Center for Human Development

Local spotlight

“Quarterly communicable disease reports are released to members of LPHA teams in Central Oregon, which are also shared with the Central Oregon Health Council (COHC) and St. Charles Health System, and added to the public-facing Central Oregon Health Data website.

<https://www.centraloregonhealthdata.org>.

Also, weekly flu reports incorporating data from regional labs analyzed across selected priority population groups and shared with Communicable Disease LPHA leadership/team members, added to Deschutes County website, and disseminated to any additional interested partners/community members via a Constant Contact send-out”.

Deschutes County Public Health

Local spotlight

“Marketing materials for STDs have been very popular with community partners such as posters and bags of condoms and lubricants with a new outer sticker that lists all the LPHA services.

Monthly tracking of CD based on counties, race, age and zip code has also been well received by partners such as public schools and colleges”.

Josephine County Public Health

Local spotlight

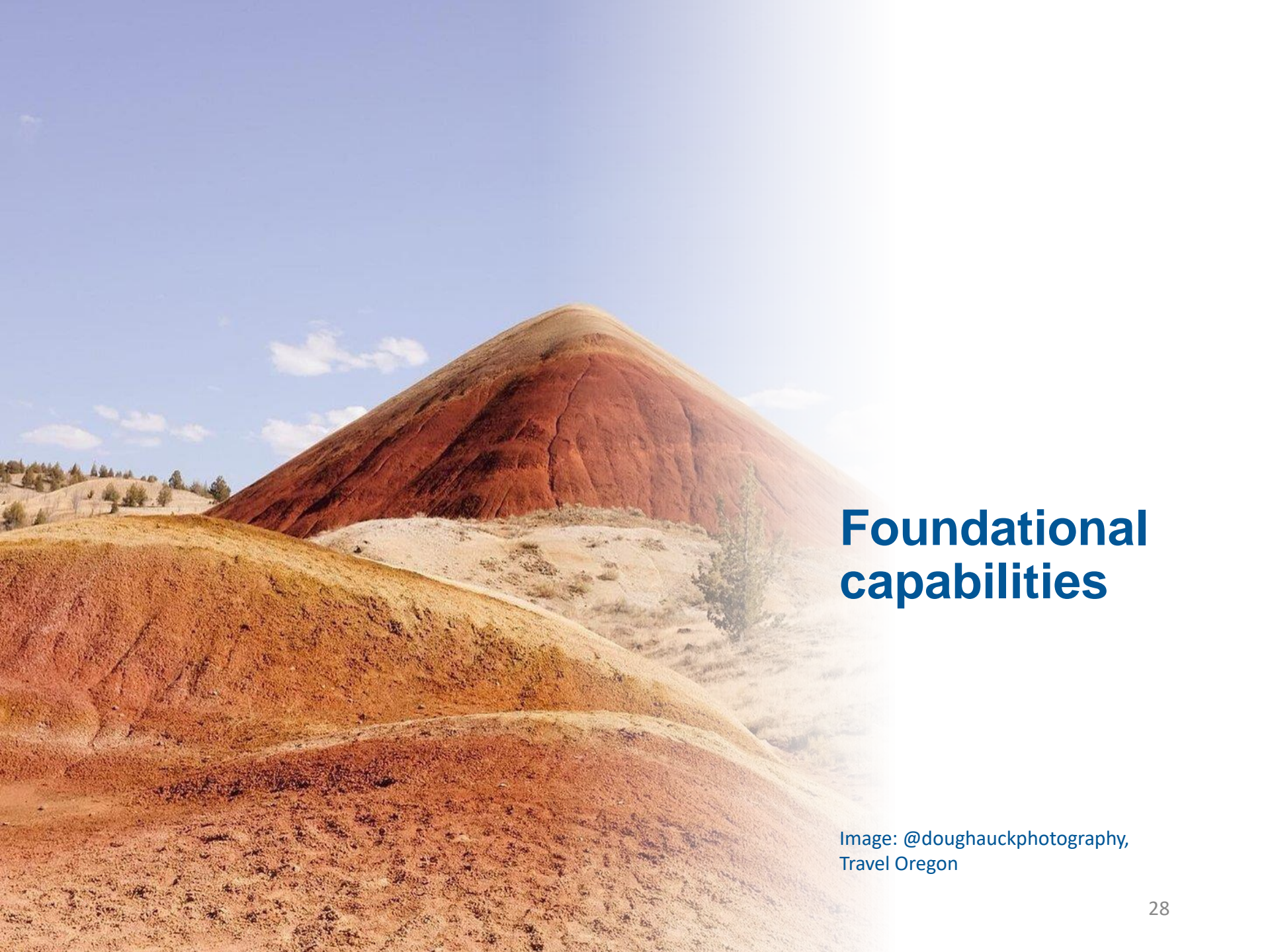
“Shared DIS has been hired with Baker and Grant Counties to supplement work by existing staff, boost morale and minimize turnover.

Increased staffing ensures availability for investigation and follow up of changing communicable disease concerns”.

Harney County Public Health

“We have implemented a collaboration with Grant/Harney/Baker Counties to hire and use a DIS. This has drastically improved our CD work”.

Grant County Public Health



Foundational capabilities

Image: @doughauckphotography,
Travel Oregon



**Leadership and organizational
competencies:**
Strategic direction for public health goals

Strategies for Leadership and Organizational Competencies

Which strategies are LPHAs using to meet requirements?	
Collect, analyze and report data for data-driven decision-making.	22
Expand use of local and/or regional public health workforce with specialized skills needed to achieve community goals for communicable disease control, emergency preparedness and non-regulatory environmental health interventions.	21
Establish workforce development strategies that promote the skills and experience needed to perform public health duties and to carry out public health's mission.	20
Demonstrate work toward local modernization plans, which may include development of business models for public health infrastructure or alignment of priorities across strategic plans, CHIPs, and other local plans.	18

Local spotlight

“In Spring 2022 there were changes in leadership, including a new Public Health Administrator recruited and a Supervisory position added.

The Public Health structure transitioned into two teams, a clinical team and an education/planning team. This new structure has resulted in more clear lines of accountability as well as innovative ways to work together”.

Polk County Public Health

Local spotlight

“In 2022, Linn County Public Health contracted with an experienced facilitation team to lead the program through strategic planning.

Staff at every level of the organization as well as representatives from key sectors and the Public Health Advisory Board worked together over six sessions to identify goal areas, potential strategies, and actions that can be taken in the short term to get the work started”.

Linn County Public Health

Local spotlight

“Our health department has created and implemented a comprehensive workforce development plan to address staff's requests for professional development, continuing ed, and skill building.

We've created a 12month calendar of trainings to hold at each monthly staff meeting that address topics such as best practices for data sourcing and communication, principles of trauma informed care, health equity/diversity/inclusion, 10 Essential Public Health Services, structure/function of the Oregon public health system, among others”.

Yamhill County Public Health

Types of organizational changes LPHAs are making as a result of modernization investments and priorities

Creating new staff positions for foundational capabilities that span program areas	23
Restructuring teams to align with modernization priorities	16
Increasing management positions to support teams and progress toward priorities	15
Implementing a performance management system for the agency	15
Aligning plans, such as agency strategic plans, business plans, workforce development plans or CHIPs, to achieve strategic goals	12
None	2



Number of new staff positions for foundational capabilities that span program areas

- Assessment and epidemiology = 16
- Health equity and cultural responsiveness = 14
- Communications = 12
- Community partnership development = 12
- Policy and planning = 12
- Other = 7

Restructuring teams to align with modernization priorities

Klamath County Public Health developed a multidisciplinary modernization team. Under this model, a subject matter expert for each foundational capability has been assigned to a work group charged with specific modernization priorities.

Jefferson County Public Health updated job descriptions and work responsibilities are being expanded to include deliverables outside of Program Elements and program specific tasks

Restructuring teams to align with modernization priorities

In Jackson County, the communicable disease team has been restructured with fully dedicated CD staff. This allows for expanded community partnership development and communications capacity within the CD team as each member is tasked with developing relationships with different key CD stakeholders.

Tillamook County has developed a framework and structure for staff support and engagement with foundational capacities. This includes a designated lead for each capacity and additional support staff.



Assessment and epidemiology:

Using data for planning, policy and decision-making

Strategies for assessment and epidemiology

Which strategies are LPHAs using to meet requirements?

Track cases of acute and communicable diseases to ensure individuals and their partners receive treatment to curb the spread of disease	28
---	----

Assess environmental health risks using available public health data and/or integrate into community health assessments	25
---	----

Make communicable disease data easily accessible to health care providers and community members	21
---	----

Collaborate with community partners serving priority populations to generate qualitative data that informs assessment and prioritization of future interventions	18
--	----

Local spotlight

“Engaging surveillance workgroup on review and update of overdose data collection and reporting.

Epi and Health Strategist trainings on data communications/ accessibility”.

Crook County Public Health

Local spotlight

“We have started to become familiar with current best practices for culturally responsive data collection and communication systems. We continue to engage with community-based organizations serving priority populations”.

Tillamook County Public Health

Local spotlight

“Our CD epidemiologist and Environmental Health Specialist are leading efforts to track outbreaks in long-term care facilities and schools and link these facilities with infection prevention resources.

Strong investments have been made in developing data visualization and data communication skills for Epidemiologist and plans are being developed to apply these skills to more public-facing reports”.

Jackson County Public Health

Health equity and cultural responsiveness

Ensure public health strategies, programs and policies are co-created with communities and public health programs are culturally and linguistically competent.

Strategies for Health Equity and Cultural Responsiveness

Which strategies are LPHAs using to meet requirements?	
Complete an assessment of the LPHA's capacity to apply a health equity lens to programs and services and to provide culturally responsive programs and services within the last five years.	25
Complete and implement an action plan that addresses key findings from health equity assessment.	24
Develop and/or enhance partnerships with Regional Health Equity Coalitions, federally recognized tribes, community-based organizations and other entities in order to develop meaningful relationships with populations experiencing a disproportionate burden of communicable disease and poor health outcomes.	24
Develop an ongoing process of continuous learning, training and structured dialogue for all staff.	24

Local spotlight

“Our greatest accomplishment this year was the Malheur County Health Equity Conference. We had nine community organization participate weekly in planning and 27 community partners present sessions at the conference.

Our goal was to connect and collaborate to advance community health and equity during a robust day focused on solutions and strengths. **The conference really focused on community partnership development and the fruits of those connections are evident and still building.**

Approximately 175 people attended the conference”.

Malheur County Public Health

Check out the terrific pictures captured by Leap Photography at the reception and conference here: <https://leapphotography.passgallery.com/-malheurcountyhealthequityconference/gallery>

Local spotlight

“Lane County is engaging with the newly funded RHEC and will be working in close collaboration to establish and participate in the governance structure as well as collaborating on priorities that will be included in that coalition’s strategic plan.

LCPH hosts twice monthly CBO meetings where CBOs share their work and are asked what kinds of support they need from LCPH. The Community Partnerships Program is also conducting stakeholder interviews of existing partners. CPP will use information gathered and collaborate with above partners to build a regional health equity plan. This plan will align with the RHEC’s plan as well as the Community Health Improvement Plan (CHP)”.

Lane County Public Health

Local spotlight

“CCPHD is collaborating on a ‘data equity’ project with the Regional Health Equity Coalition, the Oregon Health Equity Alliance (OHEA), and metro LPHAs. The partnership is building LPHA capacity to authentically engage communities of color in data collection, analysis and distribution with the goal of understanding the circumstances contributing to communities’ disproportionate burden of disease and addressing the root causes”.

Clackamas County Public Health

Local spotlight

“Implementing equity-focused strategies in our Community Health Improvement Plan, applying an equity lens to the CHIP community grants, and implementing equity training for the CHIP Leadership Team and CHIP committees.

Incorporating equity into suicide prevention program planning, including building a cohort of bilingual/bicultural trainers and working with partners to implement a culturally responsive suicide prevention training for the Latinx community.

Leading with race in the Food Equity program to ensure resources are distributed to communities most impacted by inequities”.

Washington County Public Health

Local spotlight

“Currently conducting a Latinx population health equity needs assessment with contractor and community partners”.

Columbia County Public Health



Community partnership development

Invest in relationships to achieve collaborative public health goals

Strategies for Community Partnership Development

Community partnerships

Which strategies are LPHAs using to meet requirements?	
Sustain and expand partnerships with community agencies to reach, communicate with and empower marginalized populations.	22
Co-create disease prevention and control plans with community-based organizations, including all-hazards emergency preparedness plans so that communities are prepared, receive timely and culturally and linguistically responsive information about how to stay safe during an emergency	17
Engage stakeholders and community members to plan, exercise and implement emergency preparedness plans with a focus on populations most impacted by inequities	16
Identify and begin developing relationships with community-based organizations representing people disproportionately impacted by climate and other environmental hazards	15
Co-create health-related interventions with communities experiencing health disparities.	10

Strategies for Community Partnership Development

Health care and other sector partnerships

Which strategies are LPHAs using to meet requirements?	
Expand work with key partners such as childcare providers, schools, jails and long-term care facilities on prevention and control of communicable diseases, including COVID-19.	16
Advise health care practitioners about evidence-based practices for communicable disease diagnosis, control and prevention.	14
Lead local disease prevention and control initiatives, such as policy development, antibiotic resistance education, sexually transmitted disease prevention messaging, infection control protocols, hand hygiene and field investigations of outbreaks and epidemics and statewide and local health policies	13
Expand and strengthen partnerships with CCOs	11
Expand training and technical assistance for healthcare providers	7

Local spotlight

1. Testing and screening for STI with the jail a few times a month
2. Mobile vaccination clinics offering both the COVID and flu vaccines throughout the county in partnership with CBOs, local government, small businesses
3. Outreach and engagement of members of the LGBTQ community and of organizations advocating and working with LGBTQ people to develop and review specific prevention and education messaging for HMPXV-2
4. Working on engaging with the faith-based system to promote flu and COVID-19 vaccination clinics

Lincoln County Public Health

Local spotlight

“Working with leaders from impacted communities allows them to tell us what they need help with and allows us to have our messaging go through the leaders in a culturally appropriate way”.

Wheeler County Public Health

Local spotlight

“KCPH recently finalized a contract with Central Oregon Disability Support Network to assist in providing public health emergency preparedness trainings throughout region These trainings will support our community members living with disabilities and those experiencing houselessness”.

Klamath County Public Health

Local spotlight

“Began a senior preparedness project with Senior Services to create and distribute senior specific preparedness materials. Through collaboration with Senior Services and the health disparities work undertaken in the last year, it was identified that seniors are disproportionately at risk for local disasters and hazards and need specific and targeted education and outreach. Materials will be distributed through senior dining sites and meals on wheels in the next program year (2023)”.

Douglas Public Health Network

Local spotlight

“GCPH has established close relationships with child care facilities and LTCF's to specifically support Covid-19 infections/outbreaks. We have also established an immunization outreach plan with schools and local clinics to keep children up to date on recommended vaccines”.

Gilliam County Public Health

Local spotlight

“We recently were awarded funds to create a region wide network for harm reduction and behavioral health. We are now working with new partners to streamline and strategize efforts to increase staffing and referrals”.

Hood River County Public Health

Local spotlight

“Relationships strengthened throughout the pandemic have been sustained and new partners engaged to increase outreach, engagement, and empowerment of communities, including those disproportionately impacted by climate and other hazards”.

Benton County Public Health

Community Partnership Development

LPHAs have established new or significantly expanded partnerships that are critical for carrying out planned work for achieving priorities.

- Community-based organizations = **28**
- Schools or school districts = **28**
- Other local government agencies = **23**
- Health care system, including clinics, FQHCs, hospitals and insurers = **22**
- Congregate setting organizations, including jails or shelters = **22**
- Universities or other academic organizations = 15
- Faith-based organizations = 14
- School-based health centers = 14
- Tribal health departments = 12
- None = 0

Community Partnership Development

Which mechanisms does your LPHA use to establish and/or provide ongoing support for partnerships with community-based organizations

My LPHA regularly meets with CBOs to discuss joint efforts, opportunities to leverage resources and coordination across common goals.	26
My LPHA holds Memoranda of understanding, contracts or other formal agreements with CBOs.	21
My LPHA provides technical assistance and other supports to CBOs.	20
My LPHA provides training to CBOs.	13
My LPHA directly funds CBOs.	12
My LPHA has expanded collaborations with community partners to collect and provide public health data.	32

Assessment and Epi/Community Partnerships

Ways in which LPHAs have expanded collaborations with community partners to collect and provide public health data

My LPHA is providing data upon request to community partners.	20
My LPHA is working with community partners to engage communities in data collection.	18
My LPHA is in increasing data accessibility through dashboards, improved online access or other mechanisms.	18
My LPHA is working with community partners to better understand their data needs.	18
My LPHA is working with community partners to better understand and interpret public health data from communities' perspectives.	14
My LPHA is working with community partners to provide public health data that is culturally and linguistically relevant.	13
Other	4
None	0



Communications

Be a trusted source of clear, consistent, accurate, timely, and culturally and linguistically accessible health information

Strategies for Communications

Which strategies are LPHAs using to meet requirements?

Ensure communications with the general public and/or at-risk populations about communicable disease risks, including outbreak investigations	26
--	----

Develop, update and/or implement a communications plan with partners that is cross-cutting and equity-focused.	18
--	----

Implement culturally responsive communications systems	14
--	----

Facilitate communications among priority populations and decision-makers, elevating community priorities and health equity considerations in long-term planning and policymaking	14
--	----

Develop and integrate climate change and health information into existing public health communications	8
--	---

Local spotlight

“We have increased our social media presence (Facebook/Instagram) with an estimated reach of over 100,000 people in the last year.

Additionally we continue to stay active with radio ads on several stations (including Spanish speaking radio) with rotation of content on a monthly basis”.

Umatilla County Public Health

Local spotlight

“We've made it an explicit priority to ensure any public facing communication from YCPH is simultaneously available in English and Spanish.

We have also been intentional in hiring processes to identify qualified candidates who also speak Spanish, to ensure that our programs and services can be made available in Spanish with as little administrative burden as possible”.

Yamhill County Public Health

Local spotlight

“Once we receive data from our community partner equity survey, we will begin developing a plan on how we can enhance our communication amongst all individuals in Baker County. While we provide education through social media and our local newspaper, we know there is work to be completed”.

Baker County Public Health

Local spotlight

“Re-engagement of work with Vive NW – reach the Latinx community regarding STDs/HIV education, outreach efforts to increase awareness.

Spanish Radio Poder- biweekly assistance, regional modernization health educator co-host-shared COVID, STDs/HIV, Prevention, and hMPXV information”

Marion County Public Health

Local spotlight

“We have been working with a communications company to help develop and implement communication strategies. We are in the process of recruiting a Communications and Prevention Supervisor to move our work forward”.

North Central Public Health District

Regional Partnerships

Image: Travel Oregon



Regional Partnerships Funding

Funding for regional partnerships has been a key strategy for modernizing Oregon’s public health system since 2017.

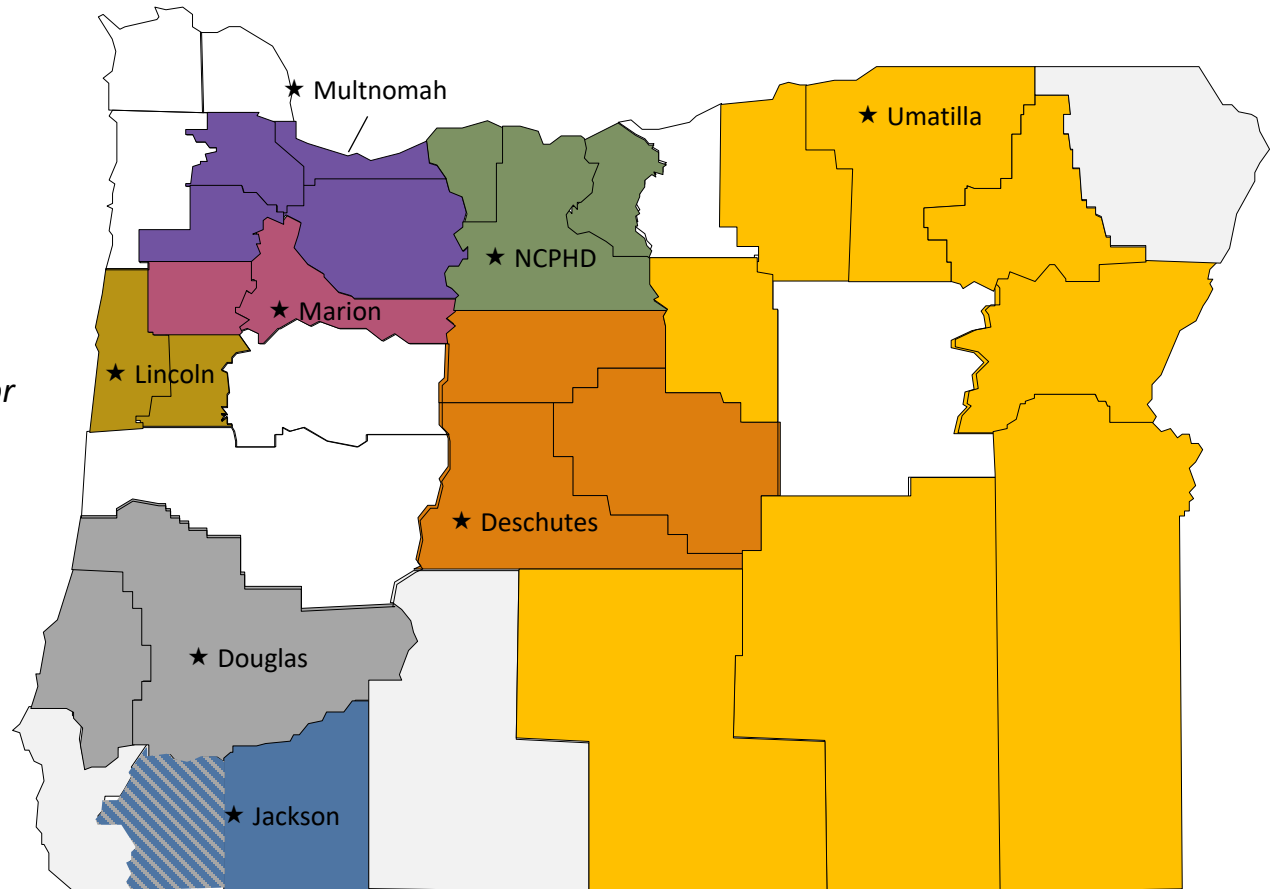
Public health modernization State General Fund investments			
	Total funds	Total funds to LPHAs through individual allocations	Total funds to LPHAs through regional allocations
2017-19	\$5 million	-	\$3.9 million
2019-21	\$15.6 million	\$7.3 million	\$3 million
2021-23	\$60.6 million	\$29.4 million	\$4 million

2021-23 public health modernization LPHA regional partnerships

Supporting communicable disease prevention and investigation, regional climate and health strategies, and community health improvement plans

“Ultimately, we have better communication and a better understanding of our region when we undertake joint projects”

LPHA Administrator



★ Fiscal agent for regional partnership

Examples of regional partnership strategies

Describe how regional resources contribute to LPHA's planned modernization work

Building equity and community engagement into all aspects of the data cycle

Regional data mart

Shared positions

Regional health equity plans and climate adaptation plans

Develop a sustainable infrastructure for regional health improvement plan

Leadership development

Regional Partnerships

Fiscal agents: Describe activities or progress made toward the regional project or partnership

Progress on health equity assessments/ plans and climate and health work

Rebuilt infrastructure for regional partnership – CHIP/CHA

Regional staff hired and supporting LPHAs

Improvements in regional data mart

Communicable disease task force

Planning regional on-call/after-hours reportable disease line; hiring regional PIO

Regional Partnerships: Non-LPHA Partners

CCOs

Regional Partnership:
Local government,
health care
organizations,
CBO/Coalitions, Tribe

Oregon Health
Equity Coalition

Steering committee:
CCO, regional health
system, United way.
Workgroups with
other partners.

Regional partnerships

Describe benefits of participating. What is working well?

Stronger connections
across LPHAs

Stronger, more
relevant supports for
rural counties

Infrastructure for
more cross
jurisdictional sharing

Shared and reduced
costs efforts for
regional efforts such
as community health
assessment and
improvement plan

Increased recruitment
pool

Partnership with
regional health equity
coalition strengthens
community
engagement and
collaboration

Regional partnerships

Fiscal agents: Describe funds contributed to regional project or partnership by LPHAs

Staff time: Supervision of regional staff

Staff time: Committees, regional project work, admin support

Contractor costs

Regional partnerships

Describe costs and challenges of participating. What is not working well?

Challenges of
communication and
coordination across
counties

Travel

Limited capacity and
delayed processes

LPHA staff turnover

Barriers to participation

Eight LPHAs chose not to participate in a regional modernization partnership

Regional focus detracts from local priorities

Lack of local capacity or funding to participate in regional efforts

Lack of support from commissioners or agency leadership

No natural partnerships with other counties

Past regional efforts have become concentrated in urban centers

Physical size of county and distance between county seats



Discussion and questions

Image: @whitwhitehouse, Travel
Oregon