

Agenda: December 20, 2016 from 3:30pm-5:00pm

1. Introductions—All
2. Promoting School Based Activities—Sean Ferrell
  - P.E. Teacher Survey Review
4. Increasing Active Modes of Transportation—Sarah Worthington
  - Recap of last month's meeting
  - Opportunities
  - Where to start?
6. Next Steps/Action Items—All

Next Meeting: January 20 from 3:30-5:00pm at PacificSource (Suite 210). We will discuss increasing healthy diet/nutrition in Central Oregon at this meeting.

## **Physical Activity Consensus Workshop**

Question asked: If anything were possible, what strategies (big or small, and currently occurring or not) would you want to have happen in the entire region of Central Oregon around increasing physical activity?

### **School Programs**

#### **Promote Innovative and Accessible School-Based Activities**

- Before & after school programs for physical activity, including elementary school
- Outdoor Education K-12
- Higher number of PE minutes
- More time in school for teachers to be active with kids
- Girls on the Run (or other similar programs)
- Reward system for kids who are active 60 or more minutes a day
- Free/no fees to participate in school sports (2)
- School incentives
- Fun activities to travel to different schools
- Bike & pedestrian safety education for all kids
- (RHIP) Increase the number of schools using the CDC School Health Index to improve their health policies and programs
- (RHIP) Engage schools to promote CVD prevention using best practice, school based model
- (RHIP) Promote coordinated school health programs that prevent risk behaviors that contribute to heart disease and stroke. (i.e. maintain or establish enhanced physical education classes, prohibit withholding recess as punishment)
- (RHIP) Engage schools to provide evidence-based interventions to promote physical activity and nutrition education in schools.

### **Affordable Programs**

#### **Increasing Affordable Physical Activity Programs for All**

- Free Parks & Rec days at public parks
- Free/Cheap memberships to fitness centers (2)
- Low-income discounts for outdoor/sports gear
- Donation-based yoga facility
- Gym passes
- Make winter sports accessible for all
- Cheaper indoor facilities (for winter)
- More alternative options to physical activity – cheap dance, yoga, etc.
- (RHIP) Create partnership with Parks and Recreation offices to offer peer led exercise sessions

## **Infrastructure & Transportation**

### **Promote a Built Environment Facilitating Physical Activity & Active Modes of Transportation**

- Safe, well-lit bike and walking paths everywhere
- Walkable, livable communities (i.e. blue zones)
- Promote an environment that facilitates physical activity
- Lights on multi-use paths
- More workout equipment at parks
- (RHIP) Encourage healthy community design and policies that increase opportunities for physical activities, access to healthy foods, and other health-enhancing features
- Bike share in Central Oregon
- Free Transportation
- Universal Commute Options
- More walking & biking to school
- More biking, transit education
- More bus routes and # of circulation times

## **Community Events**

### **Integrating Physical Activity into Community Events**

- Regular walking events
- Free summer activities for kids
- Seeing physical activity as fun, not a chore
- Bar Leagues (i.e. volleyball)

## **Incentives**

### **Incentivize Physical Activity**

- Employer incentives for physical activity
- Contests at pet stores for pet owners that walk
- Reimbursement for community runs/walks
- Any incentive

## **Clinical Support**

### **Clinical Support of Physical Activity**

- Walk with a Doc (BMC)
- Yoga Prescriptions
- A Robust Diabetes Prevention Program (DPP)

## **Increasing Healthy Diet/Nutrition Consensus Workshop**

Question asked: If anything were possible, what strategies (big or small, and currently occurring or not) would you want to have happen in the entire region of Central Oregon around healthy diets/nutrition?

### **Community Partnerships & Consumption of Produce**

- Veggie Rx (4)
- More SNAP benny's @ farmers market
- Expand Access to fruit and vegetable voucher programs
- Make healthy, organic foods affordable & accessible

### **Social Marketing to promote Positive Behaviors**

- More body positive attitudes (eat to be healthy, not skinny)
- Community awareness campaign around sugary beverages
- Junk food movement to emulate tobacco movement
- Educate how many calories are in beer
- Make the healthy choice the easy choice
- Marketing for existing programs (WIC)
- Resurrect healthy messaging for youth (5-3-2-1 ?)

### **Enact Policy to Encourage Healthy Eating**

- Work with retailers to reduce promotion of unhealthy foods
- Restrict access to sugary beverages on public property
- Tax junk food
- Required to put calories on fast food menus
- Soda tax (2)

### **Employer Based Education Programs**

- Employer Incentives for physical activity
- Work wellness subsidized CSA program
- Employer gardening program
- Free/cheap membership to fitness centers

### **Tri-County School/Community Gardens**

- More school gardens (3)
- Field trip to farms for kids
- Community gardens @ work
- Outdoor education / higher number of PE minutes
- School garden program (cooking included)

### **Improve School Nutrition Programs**

- More local, fresh produce in schools
- School based nutrition programs

- Summer healthy snacks at school
- Bring SNAP nutrition teachers to all schools
- Bring more unusual veggies and fruits to K-12
- Nutritional value of K-12 food options

**Greater access to healthy foods**

- Eliminate food deserts
- Easily accessible grocery stores everywhere
- Healthy options available at events, meetings, etc.
- Incentives to buy healthy food for WIC/food stamps
- More farmers markets in different parts of town
- Mobile farmers market
- Roaming farmers market “fruit trucks”

**Skills – based food education safety**

- Inexpensive cooking education
- Easy, well-known meal planning and shopping tools
- Cooking classes
- Expanded healthy food cooking classes
- Cooking skills
- Plan, Shop save in grocery store lessons
- Community kitchens (more)
- SNAP double cash and farmers markets
- No soda / junk food at schools or government buildings
- Nutrition summary scores for foods at grocery stores
- Fewer antibiotics/pesticides
- Required disclosure of food sources for restaurants

**DPP for All**  
**Any Incentive**

**Cascades East Transit**

Central Oregon Health Council  
CVD/Diabetes Prevention  
November 29, 2016

Judy Watts



**COIC At A Glance**  
BRIEF OVERVIEW

The Central Oregon Intergovernmental Council serves the local governments of Central Oregon, providing regional collaboration, efficiencies and service delivery for a stronger local economy and quality of life.

*Mission Statement: 2015 COIC Strategic Plan*



**COIC At a Glance**  
BRIEF OVERVIEW

- Formed in 1972 by the cities and counties as a Council of Governments – to take on regional-level planning, priority-setting and service delivery
- 130 employees, 11 locations in Central and South Central Oregon

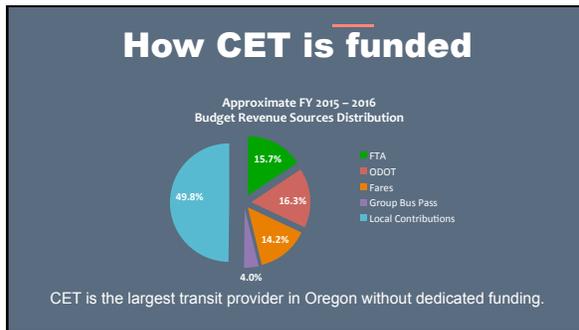
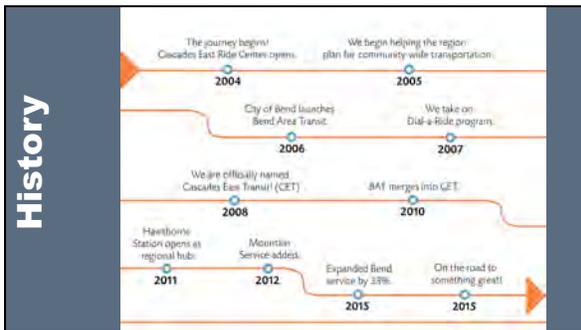


**COIC Transportation**  
BRIEF OVERVIEW

Transportation Areas:

- **Cascades East Ride Center**
  - Non-emergency medical ride brokerage
  - Veterans Rides
  - Volunteer Ride Match
  - Dial-A-Ride
- **Cascades East Transit**
  - Fixed-Routes
  - Intercity Shuttles
  - Deviated Fixed-Route
  - Demand Response





## ORS 190

### BRIEF OVERVIEW

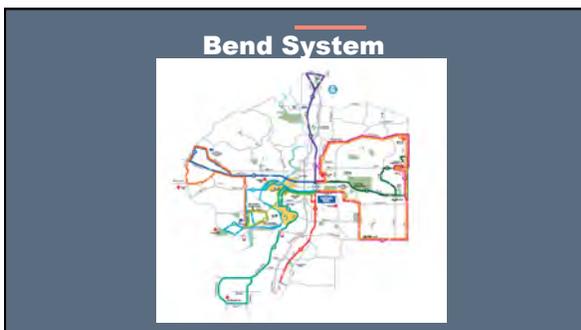
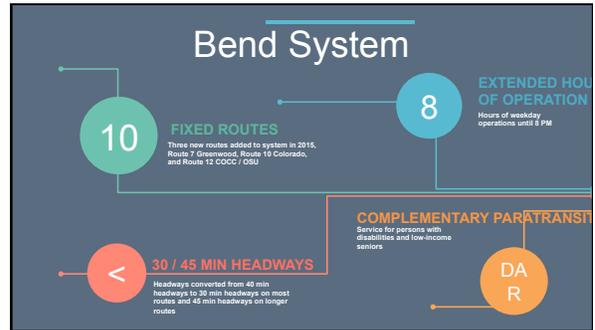
COIC is working on changing state legislation to allow COIC as a regional organization formed under ORS 190 to propose a voter-approved operating levy.

- COIC currently lacks the statutory authority under ORS 190.083 to propose and assess property taxes for transit operations.
- Available methods of collecting property taxes to fund transit operations require establishment of a new "District" organization.
- The COIC Board, composed of Central Oregon cities and counties, wants to retain governance of the CET system at COIC as opposed to forming a new layer of government to manage CET.

- ## Partners
- Without a dedicated funding source, CET relies on local partnerships.
- |                                |   |
|--------------------------------|---|
| Opportunity Foundation         | EOCC                                      |
| DHS                            | DeWaters Cemetery                         |
| Partnership to End Poverty     | Confederated Tribes of Warm Springs       |
| ODOT                           | Discover Your Forest                      |
| Cook County                    | Bend Park & Recreation District           |
| Central OR Council on Aging    | Vish Bend                                 |
| City of Bend                   | Commute Options                           |
| City of Redmond                | Downtown Bend Business Association        |
| City of Madras                 | Oregon League of Conservation Voters      |
| City of Prineville             | Trout Unlimited                           |
| City of Sisters                | City of Bend Growth Management Department |
| City of Culture                | Bend MPO                                  |
| City of Medford                | Bend Chamber of Commerce                  |
| City of La Pine                | OSU Cascades                              |
| La Pine Community Action Group | St. Charles Health System                 |
| Mt. Bachelor                   | Abletree                                  |

# Bend

Current CET Service

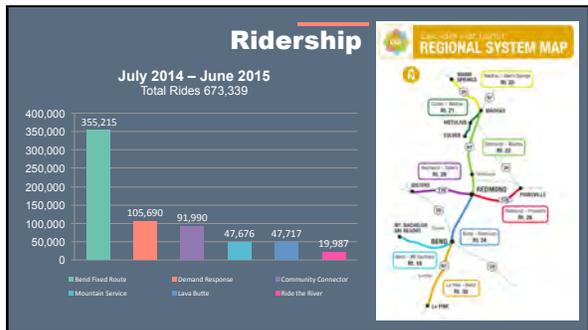


# REGIONAL SYSTEM

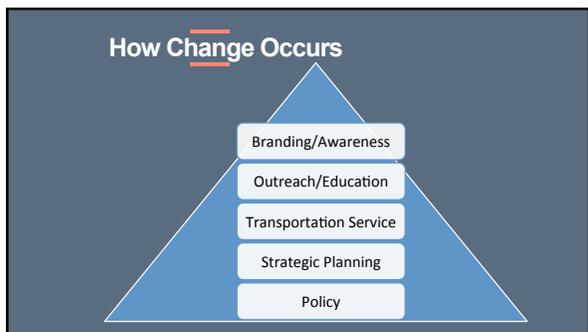
CURRENT CET SERVICE

## Regional System

Local DAR	Deviated Fixed Route	Community Connector Shuttles	Recreational Routes
La Pine	Warm Springs	CC shuttles connect Bend to all cities in Central Oregon	Mt. Bachelor Winter Shuttle
Madras		M-F, varying # depending on day	Ride the River
Redmond		Expanded service coming soon	Lava Butte Shuttle
Prineville			Mt. Bachelor Summer Shuttle
Sisters			



- ## Transportation interventions
- > **Paid Advertising**
    - High cost, difficult to measure
    - Build awareness
  - > **Events**
    - Time intensive planning
    - Personal touch point
  - > **Program Changes – i.e. route expansions, fare changes**
    - Dependent on funding/staff resources
    - Better service = better utilization
  - > **Long-range Planning**
    - Lengthy, technical documents
    - Opportunity for buy-in
  - > **Policy Change**
    - Slow process
    - Foundation for behavioral choices



On the radio



Successes outreach



**Thank You**

Judy Watts

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## **RHIP Workgroup Updates: November**

### **Behavioral Health: Identification & Awareness (Support: Rebeckah Berry & Steve Strang)**

- This group meets the fourth Tuesday of every month from 8:15-9:15am and currently has 20 members.
- In November, the group reviewed potential innovative ideas that may seek RHIP funding once the application process is reopened. The topics discussed were around Collaborative Problem Solving (CPS), and Presence trainings. The group also discussed updates around the MindYourMind regional campaign, and are involved in finalizing the community messaging.

### **Behavioral Health: Substance Use and Chronic Pain (Support: Rebeckah Berry & Rick Treleven)**

- This group meets the third Wednesday of every month from 4-5pm and currently has 23 members.
- In November, the group discussed additional accompanying documents that will be developed and shared along with the SUD referral algorithm throughout Central Oregon. The Medication Assisted Treatment sub-group received approval for reoccurring CME to be offered when the presentation is delivered in a primary care setting throughout the region. The next steps for this opportunity are being outlined.

### **Cardiovascular Disease—Clinical (Support: Rebeckah Berry)**

- This group meets the fourth Tuesday of every month from 4-5pm and currently has 11 members.
- In November, the group reviewed and finalized patient education materials for blood pressure and tobacco cessation. These documents are currently being translated into Spanish with support from the Latino Community Association. This group also began discussions around how to impact the poor blood pressure control Quality Incentive Measure (QIM) for 2017.

### **Diabetes—Clinical (Support: Rebeckah Berry & Megan Bielemeier)**

- This group meets the second Thursday of every month from 9-10am and currently has 9 members.
- In November, the group further developed supporting resources to share with the pre-diabetes algorithm of care. A Grand Rounds presentation to be delivered by Dr. Kevin Miller and Dr. Eden Miller on pre-diabetes was approved and is scheduled for March 3, 2017. In alignment with this Grand Rounds opportunity, the group will roll out their educational information to the Central Oregon provider community.

### **Cardiovascular Disease & Diabetes—Prevention (Support: MaCayla Arsenault, Sarah Worthington, & Sean Ferrell)**

- This group meets the fourth Tuesday of every month from 3:30-5pm and currently has 28 members.
- In November, the subcommittee informed the group they are putting together a survey to disseminate to P.E. teachers in Central Oregon in order to inform the best way to support and promote physical activity. This survey, among other things will capture barriers to getting children physically active. Commute Options and COIC presented on the work they are doing in the region to promote active modes of transportation and to provide suggestions of ways the group can collaborate.

## **RHIP Workgroup Updates: November**

### **Oral Health (Support: Donna Mills & Suzanne Browning)**

- This group meets the third Tuesday of every month from 11-12pm and currently has 23 members.
- The workgroup did not meet in November. Tools are being dispersed allowing prioritization of action steps over email. The group will reconvene December 20<sup>th</sup>.

### **Reproductive Health/Maternal Child Health (Support: Donna Mills & Muriel DeLaVergne-Brown)**

- This group meets the second Tuesday of every month from 4-5pm and currently has 23 members.
- The RMCH workgroup heard two presentations in November; Wild Flower Health, a smart phone app for women that are pregnant and/or post-partum, and one from Central Oregon Pediatric Association explaining how the Reach Out and Read program has been successful in their practice. It was indicated that a handful of organizations are going to partner in a RHIR Proposal for this and 2 other reading programs that promote health and wellness for children. The workgroup will meet again on December 13<sup>th</sup> and continue their work on a prenatal coding pilot, as well as hear a presentation from Central Oregon Breast Feeding Coalition.

### **Social Determinants of Health**

- This group meets the third Friday of every month from 10-11:30am and currently has 30 members in Kindergarten Readiness and 36 members in Housing.

#### **Education & Health (Support: Donna Mills & Desiree Margo)**

- The workgroup did not meet in November. The group will reconvene December 16<sup>th</sup>.

#### **Housing (Support: Bruce Abernathy & MaCayla Arsenault)**

- In November, the workgroup discussed the coordination of affordable housing efforts in Central Oregon and the general responsibilities among each group. Sarah Kelly introduced the Thrive program which connects individuals to community resources. Alan Burke discussed the impact housing has on the hospital. Rachel Marble discussed supporting “just cause eviction” legislation. The group decided to continue to discuss, among other things, the unintended consequences of “just cause eviction” and dissemination of collected housing stories during their next meeting.