1. 3:30-3:35 Introductions—All
2. 3:35-3:55 Provider Referrals to Physical Activity RFP Review—MaCayla Arsenault/All
3. 3:55-4:50 Nutrition A3—Sarah Worthington & Steve Strang/All
4. 4:50-5:00 Next Steps/Action Items—Sarah Worthington & Steve Strang
   • Cancel July meeting?

Next Meeting: Scheduled for June 26 from 3:30-5:00pm
# RHIP Cardiovascular Disease & Diabetes Updated Data

Green= Target met  
Orange= Progress  
Red= Moving in wrong direction  
* This number may be statistically unreliable and should be interpreted with caution.

### Overweight Teens

#### 8th Grade  
Target: 14%

<table>
<thead>
<tr>
<th></th>
<th>State</th>
<th>Region</th>
<th>Crook</th>
<th>Deschutes</th>
<th>Jefferson</th>
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<tbody>
<tr>
<td>2013</td>
<td>14.8%</td>
<td>16%</td>
<td>15.2%</td>
<td>13.6%</td>
<td>22.6%</td>
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<tr>
<td>2015</td>
<td>15.4%</td>
<td>12.2%*</td>
<td>20.4%</td>
<td>11.0%*</td>
<td>14.3%</td>
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#### 11th Grade  
Target: 13%

<table>
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<tbody>
<tr>
<td>2013</td>
<td>13.6%</td>
<td>14%</td>
<td>10.6%</td>
<td>12.8%</td>
<td>20.5%</td>
</tr>
<tr>
<td>2015</td>
<td>15.4%</td>
<td>13.8%</td>
<td>17.4%</td>
<td>12.8%*</td>
<td>18.7%</td>
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</table>

### Adult Smoking

#### Target: 16%

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<tbody>
<tr>
<td>2013</td>
<td>19.0%</td>
<td>16%</td>
<td>31.0%</td>
<td>16.3%</td>
<td>24.1%</td>
</tr>
<tr>
<td>2015</td>
<td>17.9%</td>
<td>18.0%</td>
<td>26.3%</td>
<td>17.3%</td>
<td>12.7%</td>
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### Teen Smoking

#### 8th Grade  
Target: 3%

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</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>4.1%</td>
<td>6%</td>
<td>8.9%</td>
<td>5.0%</td>
<td>4.9%</td>
</tr>
<tr>
<td>2015</td>
<td>4.3%</td>
<td>3.7%</td>
<td>3.1%</td>
<td>3.5%*</td>
<td>5.8%*</td>
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#### 11th Grade  
Target: 9%

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</thead>
<tbody>
<tr>
<td>2013</td>
<td>9.4%</td>
<td>12%</td>
<td>16.8%</td>
<td>10.7%</td>
<td>12.3%</td>
</tr>
<tr>
<td>2015</td>
<td>8.8%</td>
<td>4.5%</td>
<td>9.2%</td>
<td>3.4%*</td>
<td>8.8%</td>
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</table>
### Adults with no Leisure Activity

Target: 14% Crook, 12% Deschutes, 15% Jefferson

<table>
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<th>Deschutes</th>
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<tbody>
<tr>
<td>2013</td>
<td>18.0%</td>
<td>-</td>
<td>15.8%</td>
<td>13.5%</td>
<td>16.7%*</td>
</tr>
<tr>
<td>2015</td>
<td>16.8%</td>
<td>-</td>
<td>29.3%↑</td>
<td>12.7%↓</td>
<td>19.3%↑</td>
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### Teens with 0 days PA

8th Grade
Target: 5%

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</thead>
<tbody>
<tr>
<td>2013</td>
<td>6.2%</td>
<td>6%</td>
<td>4.0%</td>
<td>5.9%</td>
<td>6.9%</td>
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<tr>
<td>2015</td>
<td>6.7%</td>
<td>3.9%↓</td>
<td>4.9%↑</td>
<td>3.4%*↓</td>
<td>6.6%↓</td>
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11th Grade
Target: 10%

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<tbody>
<tr>
<td>2013</td>
<td>11.1%</td>
<td>11%</td>
<td>8.2%</td>
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<td>9.8%</td>
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<tr>
<td>2015</td>
<td>11.6%</td>
<td>4.1%*↓</td>
<td>11.1%↑</td>
<td>2.4%*↓</td>
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### OHT Survey Participants

8th Grade

<table>
<thead>
<tr>
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<th>Deschutes</th>
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<tbody>
<tr>
<td>2013</td>
<td>-</td>
<td>1,026</td>
<td>178</td>
<td>648</td>
<td>200</td>
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<tr>
<td>2015</td>
<td>-</td>
<td>568</td>
<td>165</td>
<td>291</td>
<td>112</td>
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11th Grade

<table>
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<th>Deschutes</th>
<th>Jefferson</th>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>-</td>
<td>625</td>
<td>114</td>
<td>471</td>
<td>154</td>
</tr>
<tr>
<td>2015</td>
<td>-</td>
<td>367</td>
<td>102</td>
<td>87</td>
<td>178</td>
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</table>
Request for Proposals: Provider-Based Referrals to Physical Activity for Youth

The Central Oregon Health Council’s Regional Health Improvement Plan (RHIP) Cardiovascular Disease and Diabetes Prevention Workgroup is requesting proposals for provider based referrals and navigation to physical activities among youth ages 6 years through 18 years in Central Oregon. Our region is defined as Crook, Deschutes, Jefferson and northern Klamath County which includes the towns of Chemult, Gilchrist, and Warm Springs.

Living a sedentary lifestyle is a risk factor for cardiovascular disease and type two diabetes. Based on the 2015 Oregon Healthy Teens Survey in Crook and Jefferson Counties, more than one in ten 11th grade students reported having zero days of physical activity and the rates are on the rise. (No reliable data was available for Deschutes County.) The RHIP workgroup seeks to improve physical activity among youth throughout Central Oregon by increasing provider-based referrals and navigation to physical activities in the community.

All healthcare clinics are encouraged to apply. The maximum grant awarded will be $150,000 for a regional project spanning two years. Awarded amounts given for non-regional projects will be prorated. Preference will be given to clinics with a demonstrated ability to reach undeserved populations and willing to collaborate with community partners. If more than one clinic is chosen, it is expected that they work in partnership and share system development and sustainability strategies. The aim of the project must be to improve physical activity for youth who are under-active and provide navigation for families.

Grantees will be required to provide project updates to the Central Oregon Health Council’s RHIP workgroup every six months until the grant period has ended. Grantees may choose to measure activity levels pre- and post-participation, number of participants, minutes of activity, demographics, positive increase in mood or behavior.

Please complete the attached application, budget sheet, and objectives chart, and submit by July 31, 2018. Funds will be awarded by August 31, 2018.

Submit application and questions to:

Rebeckah Berry
COHC Project Manager
Rebeckah.Berry@cohealthcouncil.org
541.306.3523
Nutrition A3 NOTES

Box 1: Reason for Action

Problem Statement:
33% of Central Oregon adults are overweight contributing to high and growing rates of diet modifiable diseases, such as type 2 diabetes, cardiovascular disease, and some cancers.

AIM: By 2019 0% of adults in Central Oregon will have a diet modifiable disease, specifically CVD and/or diabetes type 2.

Boundaries: Focus will be on adults 18+ in Central Oregon.

Trigger and End: None

Box 2: Initial State
Age adjusted BRFSS data for CVD and Diabetes in Central Oregon 2015.

Cardiovascular Disease Oregon 7%
Cardiovascular Disease Deschutes 4.9%
Cardiovascular Disease Jefferson 4.8%
Cardiovascular Disease Crook 6.3%

Diabetes Oregon 8.6%
Diabetes Crook 13.3%* Unreliable
Diabetes Deschutes 4.8%
Diabetes Jefferson 16%

Box 3: Target State
0% of CVD and Diabetes rates

Metric:
Box 4: Gap Analysis

What’s standing in our way to reach future state?

Fishbone!

Bone 1:
  • Making healthy foods more accessible
  • Increasing access to healthier food options

Bone 2:
  • Sugar tax
  • Beverage tax

Bone 3:
  • Every home with a CVD/Diabetes diagnosis receives a CSA box every other week
  • Veggie Rx program
  • Healthy food pantry at doctors’ offices

Bone 4:
  • Healthy recipes available to adults
  • Adults recognize and know how to prepare healthy foods
  • Increasing nutrition education
  • Learn how to shop wisely
  • Will power training
  • Increase awareness of CVD/Diabetes rates regionally

Bone 5:
  • Work with employer to provide onsite resources: cooking classes, CSA’s, healthy food
  • Educate community and employers on cost of these chronic, diet modifiable diseases.
Bone 6: Work with stores on putting fruit and vegetable displays in the front.

Bone 7: Increase Vegetable Consumption

Bone 8: Replace store sugar profits with grant dollars

Bone 9:
- Website and local campaign on healthy eating patterns
- Grocery literature display (nutritional value)
- Launch social marketing campaign aimed at reducing sugar beverage consumption

Bone 10: Discontinue allowing SNAP to pay for sugary beverages

Bone 11: Disband the Girl Scouts

Bone 12: Advocate for policy limits on density of fast food establishments
Scorecard Chart

- **What** - What is happening now?
- **Where** - Where does the problem occur?
- **When** - When does it occur?
- **How** - How often does it occur?
- **Who** - Who is affected?

Determine the metric for measurement and the baseline for your data.

"A problem well-defined is a problem half solved."

**Scientific Approach: Hypothesize**

If we implement "X", then we expect "Y" outcome.

Prioritize solutions and identify their potential impact.

Statistics or measurement of expected improvement are not required here.

**Identify all possible causes or gaps for the situation**

If you had to be at future state tomorrow, identify all of the things that are standing in the way or are absent. What we need to do to accomplish the aim?

Ask "why" or "how" to find the root cause – treat the root cause, not the symptom.

**Create an Action Plan**

- Create an action plan to implement the solution
- Track progress and review status
- Small tests of change and then spread
- What worked, what didn’t work, review gaps - Plan, Do, Check, Act (PDCA)

**Suggested Tool: Reverse Fishbone**

The Reverse Fishbone only works well for new problems, not existing processes

**Suggested Tool: PICK Chart**

The PICK Chart works best when there seem to be too many "If we, then we" statements.

- **Impact**
  - High impact, high effort
  - High impact, low effort
  - Low impact, high effort
  - Low impact, low effort

- **Effort**
  - Possible
  - All

Plot proposed initiatives on the PICK Chart based on their perceived impact and effort. Take action based on the quadrant they land in.

**Check & Course-correct**

What we're going to try to test the hypothesis.

What we tried, tested, implemented.

What are the conclusions?

If the Aim remains elusive, return to Box 4 and repeat the cycle until the Aim has been achieved.

**Learning**

Share the learning so we can continually improve through the future.

What worked well, what didn’t work well?

What did we learn?

What would we do differently?
<table>
<thead>
<tr>
<th>Name:</th>
<th>Organization:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Katie Ahern</td>
<td>OSU Extension Service</td>
</tr>
<tr>
<td>Katie Chipko</td>
<td>The Children's Forest</td>
</tr>
<tr>
<td>Kathy Drew</td>
<td>Gero-Leadership Alliance</td>
</tr>
<tr>
<td>Kylie Loving</td>
<td>Crook County Health Department</td>
</tr>
<tr>
<td>Meg Moyer</td>
<td>Bend-La Pine School District</td>
</tr>
<tr>
<td>Leslie Neugebauer</td>
<td>PacificSource</td>
</tr>
<tr>
<td>Brian Potwin</td>
<td>Commute Options</td>
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<tr>
<td>Lindsey Stailing</td>
<td>Mosaic Medical</td>
</tr>
<tr>
<td>Steve Strang</td>
<td>Mosaic Medical</td>
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<tr>
<td>Crystal Sully</td>
<td>Deschutes County Health Services</td>
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<tr>
<td>Emily Wegener</td>
<td>Jefferson County Health Department</td>
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<tr>
<td>Jess Weiland</td>
<td>High Desert Food and Farm Alliance</td>
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<td>Name:</td>
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<tr>
<td>---------------</td>
<td>---------------------------------------------------</td>
</tr>
<tr>
<td>Sarah Worthington</td>
<td>Deschutes County Health Services</td>
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