Agenda: November 28, 2017 from 3:30pm-5:00pm

1.  3:30-3:35  Introductions—All

2.  3:35-3:40  Rx to Move Update—Lindsey Stailing & MaCayla Arsenault

3.  3:40-4:50  Active Transportation & Continuation of A3—Sarah Worthington & Steve Strang

4.  4:50-5:00  Decide on December meeting/Next Steps/Action Items—Sarah Worthington & Steve Strang

Next Meeting:  Scheduled for December 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%

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<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>
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<td>13.8%↓</td>
<td>17.4%↑</td>
<td>12.8%*</td>
<td>18.7%↓</td>
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### Adult Smoking

**Target: 16%**

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<tr>
<td>2015</td>
<td>17.9%</td>
<td>18.0%↑</td>
<td>26.3%↓</td>
<td>17.3%↑</td>
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### Teen Smoking

**8th Grade**  
Target: 3%

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<tr>
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<td>3.7%↓</td>
<td>3.1%↓</td>
<td>3.5%*↓</td>
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### Adults with no Leisure Activity

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

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### Teens with 0 days PA

**8th Grade**

**Target:** 5%

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**11th Grade**

**Target:** 10%

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<td>2.4%*</td>
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### OHT Survey Participants

**8th Grade**

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<td>568</td>
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<td>291</td>
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**11th Grade**

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<td>-</td>
<td>367</td>
<td>102</td>
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Increasing Free Active Modes of Transportation for Youth

• Fund bike checks at schools or locks
• Access to bikes
• Students incentivized to lead walking school bus
• Commute Options Program for high schools
• Centralized Coordinator for Walking School Bus
• Lighting for walkways
• Striped crosswalks
• Round about safety
• Relationships with police to police the school zones (volunteer)
• Bike Education (PE teachers?)
• Suggested bike routes
• Visible kid safety gear
• Friendly driver program
• Transit pass for students
• Transit rider education
• Parent education
Problem: Cost prevents Central Oregon youth from participating in physical activities resulting in skyrocketing obesity rates and an epidemic of chronic conditions.

Aim: Cost will never be a barrier to participate in a variety of physical activities for students.

Boundaries: Middle and High School youth in Central Oregon

Metric: Increase the number of students who didn't previously participate due to cost barriers who currently participate by 15%.

<table>
<thead>
<tr>
<th>Event Date</th>
<th>Current Date</th>
<th>Team Name</th>
<th>Event Name</th>
<th>Description</th>
<th>Action Item</th>
<th>Assignee</th>
<th>Due Date</th>
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</table>

1. Select a pilot site to establish and implement a referral system for providers to prescribe physical activity to youth who are currently inactive. The referral system would include scholarships for participation and a central staff person to coordinate referrals and recommend programs and activities.
Cost will never be a barrier to participating in a variety of physical activities for students.

**AIM**

WHAT could help us reach our aim?

- Increase sports during P.E. classes
  - Research current P.E. courses & activities
  - Implement an MOV or IGA to receive commitment from schools
  - Provide equipment to implement intramural sports
  - Outside help from nonprofits, parks and Rec
  - Influence P.E. Curriculum

- Increase scholarships & availability for physical activity programs
  - Meet & work with physical activity organizations
  - Financial incentive for youth's continued attendance in physical activity organizations

- Free transportation for after-school programs
  - Walking school bus for high use routes (i.e. Bear Creek to Boys & Girls Club)
  - School IDs as bus passes (partner with CET)
  - Offer bus for kids who stay late for activities
  - More program offerings at schools

- Diversify options for after-school non-sport physical activity
  - Discuss needs for success with adult leaders
  - Identify possible leaders in the areas chosen
  - Select top options to focus on
  - Survey students on possible activities

- Fund travel & expenses for out-of-town events (i.e. tournaments)
  - Special district funding to cover buses for sports travel
  - Funding for non-bus transportation (i.e. gas cards for families)
  - Supplement admin/coach time to coordinate transportation
  - Connect school lunches/meals to sports teams

- Affordable & free sports equipment
  - Supporting organizations during fundraising
  - Writing letters of support for outside grants
  - Identify companies willing to offer good used or discounted new equipment
  - Send out RFP to partners

**HOW do we do it?**

- Involve them to workgroup meetings
  - Promote their successes and offer help
  - Make the grant process simple
  - Meet with them where they are
  - Engage YAC leaders to survey students
  - Form county committees focused on physical activity
  - Ask for insight on the aim
  - Platform for communicating between them, schools, & the workgroup
  - Identify concrete goals for partnership

- Identify the # of students with cost as a barrier to physical activity
  - Provide referrals to physical activity & scholarships

- Provider referrals to physical activity & scholarships
  - Increase active modes of transportation
  - Free/no fees to participate in sports

- Increase scholarships & availability for physical activity programs
  - Trigger movement with physical activity organizations
  - Financial incentive for youth's continued attendance in physical activity organizations

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- Increase active modes of transportation
  - Fund “bike check” at schools and/or locks
  - Access to bikes
  - Student incentives to lead walking school bus
  - Commute Options Program for high schools

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- Provide Grants to physical activity programs
  - Support schools in obtaining funding
  - LOS
  - Identify sports with low/no cost
  - Help schools bridge the funding gap
  - Provide grants/stipends to families

- Provide Peaceful Playground training and equipment
  - Provide grants for teachers/coaches for peaceful playground modules & orientation
  - Pilot one small school with Peaceful Playground equipment

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- Provide Peaceful Playground training and equipment
  - Provide grants for teachers/coaches for peaceful playground modules & orientation
  - Pilot one small school with Peaceful Playground equipment
Major Elements
- Problem Statement: A factual statement, clear, concise, hurts. Use the voice of the customer.
- Aim: Where we want to be, think big, reach beyond what we think we can achieve.
- Boundaries: Show what is in or out of scope.
- Trigger & End: The start and finish of a process (only applicable to processes with a clear beginning and end)

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)

Create a Target State
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.

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.

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.

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

Set the Target
Expressed in the same terms as initial state.
When possible, use the voice of the customer.
Aim high for the required target, not just what we think we can achieve. The Target metric must align with the metric determined in Box 2.
Document how you will measure going forward.

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?

Understand the Situation
What – What is happening now?
Where – Where does the problem occur?
When – When does it?
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.”

Set the Target
Expressed in the same terms as initial state.
When possible, use the voice of the customer.
Aim high for the required target, not just what we think we can achieve. The Target metric must align with the metric determined in Box 2.
Document how you will measure going forward.

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Learning
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What worked well, what didn’t work well?
What did we learn?
What would we do differently?

Metrics Tracking
Track your metrics over time to visualize trends.
Verify the solution and learnings.
When box 8 = box 3 you’ve reached your target.

Track and Verify the Solution is working!
RHIP Workgroup Updates: October 2017

**Behavioral Health: Identification & Awareness (Support: Rebeckah Berry & Nikki Lemmon)**

- This group meets the fourth Tuesday of every month from 8:15-9:15am and currently has 17 members.
- In October, the group continued their A3 process with the aim of identifying and engaging 100% of individuals in Central Oregon that have a behavioral health need, and ensuring an effective and timely response. The group is working to finalize their baseline survey which will be sent out to primary care, women’s health, school based health centers, and Indian Health Services, and is intended to help prioritize their experiments.

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

- This group meets the third Wednesday of every month from 4-5pm and currently has 22 members.
- In October, the group continued their A3 process with the aim of all Central Oregonians with a substance use disorder that enter the hospital setting, including the ED, will receive engagement, treatment, or harm reductions services. The group began the process of designing a survey to gather baseline data as a starting measurement to help prioritize their experiments.

**Cardiovascular Disease—Clinical (Support: Rebeckah Berry & Shiela Stewart)**

- This group meets the fourth Tuesday of every month from 4-5pm and currently has 11 members.
- In October, this group continued their work on their first A3 around asking, engaging, and providing services/support to decrease youth tobacco use in Central Oregon. The group is very close to selecting their experiment and finalizing their A3.

**Diabetes—Clinical (Support: Rebeckah Berry & Shiela Stewart)**

- This group meets the second Thursday of every month from 9-10:30am and currently has 12 members.
- In October, this workgroup completed their A3 which they presented to Operations Council on October 20th. The workgroup also submitted a QIM proposal to pilot Point of Care testing machines in just over a dozen clinics of various sizes throughout the region. In November, the group will begin the development of their second algorithm that will focus on supporting primary care in the management of patients with A1Cs >9.

**CVD & Diabetes: Prevention (Support: MaCayla Arsenault, Sarah Worthington, & Steve Strang)**

- This group meets the fourth Tuesday of every month from 3:30-5pm and currently has 13 members.
- In October, the workgroup presented their A3 to Ops. They are launching a pilot to prescribe and connect children to organized physical actives. They have now turned their focus to promoting active modes of transportation and are currently brainstorming strategies. They will use a PICK chart to gauge these activities in November and select a strategy.
RHIP Workgroup Updates: October 2017

Oral Health (Support: Donna Mills & Mary Ann Wren)
- This group meets the third Tuesday of every month from 11-12pm and currently has 24 members.
- In October, the workgroup discussed the future focus of their efforts. They concluded that they would like to work on gathering enough data on geriatric dental care for it to be included in the next RHIP. They discussed their opportunities to partner with another workgroup and decided Diabetes Clinical could have a strong connection. They will be reaching out to that workgroup through a shared member.

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 22 members.
- In October, the workgroup met and spent their time reviewing the latest reports from the State regarding Unintended Pregnancies/Teenage Pregnancies and the report published by OHA that provided a case study of the Central Oregon Perinatal Care Continuum program, funded by the Central Oregon Health Council. A subcommittee has been established to work on the gap analysis for Unintended Pregnancies and coordinate with the RHIP Oral Health Workgroup.

Social Determinants of Health
- This group meets the third Friday of every month from 10:30-11:30am and currently has 27 members in Kindergarten Readiness and 24 members in Housing.
  
  Health & Education (Support: Donna Mills & Desiree Margo)
- In October, the workgroup met and chose to evaluate a name change to better reflect their vision versus a metric. The group heard a proposal from the TRACeS subgroup in the amount of $18k. An electronic vote will be taken regarding approval. Kim Hatfield with Friends of the Children gave an update on the efforts around standing up their program.

Housing (Support: Bruce Abernethy, Elaine Knobbs-Seasholtz & Macayla Arsenault)
- In October, the Housing workgroup discussed proposals for their Box 6 experiments intending to help meet the aims of their data & chronic homelessness stabilization A3s.