



RHIP Clinical Cardiovascular Disease Workgroup
PacificSource (Moraine Lake Room: 4th Floor)
2965 Conners Ave, Bend

Agenda: March 12, 2019 from 7:00-8:00am

Goals

Clinical Goal: Improve hypertension control

Prevention Goal: Increase awareness of the risk factors for cardiovascular disease including tobacco use, uncontrolled hypertension, high cholesterol, obesity, physical inactivity, unhealthy diets, and diabetes.

Health Indicators by 2019	QIM Measure	State Measure	Healthy People 2020
1. Increase the percentage of OHP participants with high blood pressure that is controlled (<140/90mmHg) from 64% to 68% (Baseline: QIM NQF 0018 - Controlling high blood pressure, 2014).	√		√
2. Decrease the prevalence of cigarette smoking among adults from 18% to 16% (Baseline: Oregon BRFSS, 2010-13; QIM Cigarette Smoking Prevalence).	√		√
3. Decrease the prevalence of smoking among 11 th and 8 th graders from 12% and 6%, respectively to 9% and 3%, respectively (Baseline: Oregon Healthy Teens Survey, 2013).			√
4. Decrease the prevalence of adults who report no leisure time physical activity from 16% in Crook County, 14% in Deschutes County and 17% in Jefferson County to 14%, 12%, and 15 % respectively (Baseline: Oregon BRFSS, 2010-13).			
5. Decrease the prevalence of 11 th graders and 8 th graders who 0 days of physical activity from 11% and 6% to 10% and 5%, respectively (Baseline: Oregon Healthy Teens, 2013).			

1. **7:00-7:05** **Introductions—All**
2. **7:05-7:55** **Discussion & Vote of Marketing Firm for Blood Pressure Campaign—All**
 - Eclipse Marketing (\$451,000 for varied media over 2 years)
 - GMMB (\$499,913 for varied media over 4 months)
 - Mandala (\$201,300, \$303,800, or \$403,955 for varied media over 6-12 months)
 - The Marketing Dept (\$284,980, \$348,880, \$506,080 for varied media over 3 years)
 - Quon Design (~\$50,000 for varied media over 3-12 months)
3. **7:55-8:00** **Clinical Champion Provider & Community-Based Presentations—All**
 - Proposal Approval (\$66,736.00)
4. **8:00** **Action Items & Announcements—All**

Next Meeting: 4.9.2019 from 7-8am, PacificSource: Moraine Lake



Cardiovascular Disease: Clinical (11)	Organization
Karen Ard	Deschutes County Health Services
Mark Backus, MD, FACP	Cascade Internal Medicine Specialists
Brenna Francis	La Pine Community Health Center
Maria Hatcliffe, RN, MPH	Mosaic
David Huntley, MPH	Epidemiologist - Community Member
Alison Little, MD, MPH	PacificSource
Ann Ottesen	Community Member
Katie Plumb	Crook County Health Department
Robert Ross, MD, MScED, FAAFP	St. Charles Health System/St. Charles Medical Group
Divya Sharma, MD, MS	Mosaic & Central Oregon IPA
Shiela Stewart, RN, BSN	Central Oregon IPA



Request for Proposal: Central Oregon Blood Pressure Awareness Campaign

The Central Oregon Health Council's Regional Health Improvement Plan (RHIP) Clinical Cardiovascular Disease (CVD) workgroup is requesting proposals from marketing firms to create a blood pressure messaging campaign aimed at reaching all adults in Central Oregon. Our region is defined as Crook, Deschutes, Jefferson (including the Confederated Tribes of Warm Springs), and northern Klamath County (Chemult and Gilchrist).

The following facts are provided by the American Heart Association (www.heart.org):

- Nearly half of American adults have high blood pressure. (Many don't even know they have it.)
- High blood pressure is a "silent killer". Most of the time there are no obvious [symptoms](#).
- Certain physical traits and lifestyle choices can put you at a [greater risk for high blood pressure](#).
- When left untreated, the damage that high blood pressure does to your circulatory system is a significant contributing factor to [heart attack](#), [stroke](#) and other [health threats](#).

The RHIP Clinical CVD workgroup seeks a consulting company to develop and implement a community-wide messaging campaign in Central Oregon targeting all adults. The messages will focus on: (a) motivating adults to know their blood pressure, (b) what is healthy and high blood pressure, and (c) what to do if their blood pressure is high.

The contractor will work closely with the RHIP Clinical CVD workgroup to develop the campaign. The scope of work will include material development, media outlet placement, monitoring, and evaluation.

Components of Work:

- Development of campaign materials and testing in varied communities throughout the region.
- Development of a media plan and materials.
- Implementation of campaign.
- Campaign timelines and budgets indicating specific materials placement, associated costs, printing needs, etc.
- Evaluation of the campaign.

Contractor will be required to report back to the RHIP Clinical CVD workgroup at 30-days post launch and upon completion of the campaign.

To apply, please submit a campaign outline and budget sheet by end of day February 18, 2019. Funds will be awarded by March 31, 2019 and the goal launch date is June 15, 2019.

Please contact the following individual with any questions or to submit a proposal and budget:

Rebeckah Berry
COHC Operations and Project Manager
rebeckah.berry@cohealthcouncil.org
541.306.3523

Blood Pressure RFP Rating Form February 2019

Organization name _____ Reviewer _____

	UNSATISFACTORY 0	SOME DEFICIENCIES EVIDENT 1	SATISFACTORY 2	EXCEPTIONAL 3	CLEARLY OUTSTANDING 4	INSERT SCORE
EXPLANATION of why their organization is the best fit? (Proven Experience)	Very limited or minimal explanation of their organization being the best fit.	Less than we would prefer.	Meets our requirements for fit.	Exceeds our expectations of fit.	Thoroughly versed and a very strong fit.	
ENSURE all adults in each town in Central Oregon will see the messaging?	Very limited explanation of a plan.	Minimal, would prefer a better explanation.	Adequate plan.	More than adequate plan & has some experience in other related areas.	Very strong specific plan and has strong experience in other areas.	
EVALUATING message penetration in all communities in Central Oregon?	Did not communicate how they will evaluate message penetration.	Some difficulties communicating how they will evaluate message penetration.	Sufficient explanation of how they will evaluate message penetration.	More than sufficient explanation for how they will evaluate message penetration.	Outstanding ability and plan to evaluate message penetration.	
DEMONSTRATES FAMILIARITY with community messaging strategies.	Does not convey a familiarity with community messaging strategies.	Demonstrates minimal conveyance of familiarity with community messaging strategies.	Demonstrates a sufficient familiarity with community messaging strategies.	Demonstrated a more than sufficient familiarity with community messaging strategies.	Demonstrated a very strong familiarity with community messaging strategies.	
DEMONSTRATION of message development.	Did not explain or show examples of message development.	Minimal explanation or examples of message development.	Adequate explanation or examples of message development.	More than adequate explanation or examples of message development.	Very strong explanation or examples of message development.	
REASONING for media buys/selections.	No explanation/ reasoning for chosen media buys/ selections.	Minimal explanation of explanation/ reasoning for chosen media buys/ selections.	Sufficient explanation of explanation/ reasoning for chosen media buys/ selections.	More than sufficient explanation/ reasoning for chosen media buys/ selections.	Very strong explanation/ reasoning for chosen media buys/ selections.	
	UNSATISFACTORY 0	SOME DEFICIENCIES 1	SATISFACTORY 3	EXCEPTIONAL 5	CLEARLY OUTSTANDING 7	
OVERARCHING GOAL	Showed no or little sense of overarching goal.	Minimal sense of overarching goal.	Adequate sense of overarching goal.	More than adequate sense of overarching goal.	Very strong sense of overarching goal.	
COMMUNITY SUPPORT/ CONNECTIONS	Did not explain their organization's community support/ connections.	Minimal explanation of their organization's community support/ connections.	Sufficient explanation of their organization's community support/ connections.	More than sufficient explanation of their organization's community support/ connections.	Very strong explanation of their organization's community support/ connections.	
PROJECT BUDGET	Not acceptable for the project	Some deficiencies for the project.	Within satisfactory range for this project.	More than adequate for this project.	Very strong for this project.	
OVERALL FIT	Not a good fit for this project.	Some deficiencies present that may inhibit fit for this project.	Generally, appears to be a good fit for this project.	Especially desirable fit for this project.	Great fit. Majority of traits considered especially desirable for this project.	

Total _____

	Mandala	Quon	Eclipse	Marketing Dept	GMMB
EXPLANATION of why their organization is the best fit?	2.0	2.0	2.3	1.9	2.7
ENSURE all patients who enter the hospital/ED have access to care?	1.6	1.1	2.4	1.3	2.7
DOCUMENTING referrals based on patient need?	1.6	1.0	1.6	0.7	2.1
ENSURE FAMILIARITY with regional SUD/harm reduction resources?	2.9	2.0	2.4	2.0	2.9
DOCUMENT/ COMMUNICATE barriers to care?	3.0	1.3	1.7	1.9	3.1
FOLLOW-UP after hospital discharge?	2.0	1.1	2.3	1.4	2.6
OVERARCHING GOALS	3.3	2.1	3.3	2.3	3.9
COMMUNITY SUPPORT	1.4	3.3	3.6	2.9	3.4
PROJECT BUDGET	3.9	2.7	3.1	2.6	2.3
OVERALL FIT	1.3	1.9	3.1	1.9	4.0
TOTAL AVERAGE	2.3	1.9	2.6	1.9	3.0
TOTAL SUM	22.9	18.6	26.1	18.7	29.7



Grant Application

COHC Application - Standard Process

Crook County Health Department

Clinic and Community Hypertension
Control Presentations

Application Snapshot	
Amount Requested	\$67,736.00
Organization Contact	Dr. Mark Backus, Cascade Internal Medicine
Contact Phone	541-447-3260
Contact Email	KLoving@h.co.crook.or.us
Organization Address	375 NW Beaver St Suite 100 Prineville, OR 97754
Website	http://cohealthcouncil.org/

A3 Metric:

Improve hypertension control

Pillar 10 Vital Condition:

Nutritious Food
Physical Activity
Preventative Services & Policies

Note: * indicates required questions

Proposal Overview

Investment/Project Name*

Name of Project.

Clinic and Community Hypertension Control Presentations

Name of project lead*

Please provide the first and last name of the project lead for this funding request.

Dr. Mark Backus, Cascade Internal Medicine

Email for project lead*

Please provide a good email address for the project lead.

mbackus808@yahoo.com

Requestor/Agency location*

Prineville

Other towns

If you chose 'other' above, please specify where your agency is located.

Counties included in project*

Which of the following counties will your project include?

Crook
Deschutes
Jefferson

Inclusion of all counties

If your project does not include all of the counties listed above, please provide explanation.

Project Description/Overview*

Please describe your project.

This project would be a collaboration between the Crook County Health Department and Dr. Backus. We would like to build upon the work that Dr. Backus did in 2017-2018 providing educational sessions to providers regarding effective hypertension control. In this expansion project, Dr. Backus will continue to offer lectures to regional clinics. He will also develop a presentation that will cater to lay persons wanting to become more active in the management of their own hypertension. These 30 minute presentations would be given by Dr. Backus, and offered to the community organizations throughout the tri-county area and as an employee wellness opportunity. Dr. Mark Backus is a board-certified internist and co-founder of Cascade Internal Medicine. Dr. Backus has practiced in Bend for 16 years. In 2014, he was one of 30 providers nationwide, and the only provider in Oregon that year, to be recognized by the Department of Health and Human Services' Million Hearts Hypertension initiative for successfully controlling the blood pressure of at least 70% of his hypertensive patients.

Crook County's role would be to support Dr. Backus in marketing, scheduling and organizing the presentations, as well as assisting with the data collection. Kylie Loving, Health Educator at the Crook County Health Department (CCHD), will be the point person at CCHD for this project. She currently coordinates the Diabetes Prevention Program in Crook County. She has experience in the development, implementation and evaluation of community health programs.

Project Goals*

Please concisely describe the goals of this project.

The goal of this project is to decrease the number of people in the Central Oregon region who have uncontrolled hypertension through provider engagement and community education. This will be accomplished through conducting one clinic presentation and one community presentation per month over a two year period for a total of 48 presentations. Our priority is to disseminate guideline-adherent methods for controlling high blood pressure and Dr. Backus' nationally-recognized expertise to as many providers, and employees in Central Oregon as possible.

Target Population*

Please select all that apply.

Adults (ages 18-64)

Older Adults (ages 65+)

Target Population (continued)

If your project targets a more narrow subset of the population, please provide that here (ex. postpartum females; individuals diagnosed with pre-diabetes, etc).

Timeline - project start date*

*Please provide an estimated **start date** for your project.*

04/01/2019

Timeline - project end date

*Please provide an estimated **end date** for your project.*

03/31/2021

Project duration*

Please indicate the number of years you expect this project to span.

2

Identified Need*

Please describe the identified need for this project.

This project targets patients in Central Oregon with uncontrolled hypertension. Controlled blood pressure reduces risk for heart attack, stroke, kidney disease, and heart failure. Nationwide, about 1 in 2 adults have been diagnosed with hypertension, and of those, only half are controlled (<http://www.cdc.gov/bloodpressure/facts.htm>). Additionally, many people with high blood pressure are undiagnosed and untreated. For these reasons, cardiovascular disease and uncontrolled hypertension were singled out as targeted areas in the current Central Oregon Regional Health Improvement Plan. Hypertension is also an area of focus for the Oregon Health Authority's quality improvement measures reported to the state by the Central Oregon Coordinated Care Organization. This workgroup has identified the dual strategies of work site wellness and provider education as priorities to meet their goal of having 80% of Central Oregonians with controlled blood pressure.

Community Support*

Please describe the community support you have received for this project.

This is a direct request from the workgroup as part of their A3.

Optional: Community Support Letter #1

Please attach any letters of support that you have received for this project. You may attach up to 5. Letters must be uploaded separately.

Optional: Community Support Letter #2

Optional: Community Support Letter #3

Optional: Community Support Letter #4

Optional: Community Support Letter #5

How will we know if the project is successful?*

We will demonstrate the success of this project by tracking and reporting the number of community presentations made, and the number of people attending them. The number of clinical presentations given, and the number of providers that attend. We will also take pre and post surveys at each session and will report back the data we receive from those surveys. We feel the project will be a success if we have reached a total of 720 providers and community members, and that the majority of them demonstrate an increase in knowledge regarding hypertension control.

Affiliations*

Does your project/program have any national affiliations?

No

Best Practice*

What, if any, are the emerging best practices and/or evidence-based guidelines upon which the project is based?

This project will use strategies based upon the CDC's Million Hearts Campaign, an evidence based program for improving cardiovascular health. The educational materials and the presentation will be developed using this evidence based program as a starting point.

Fidelity*

If your program is evidence-based or best practice, will it be reviewed for fidelity?

N/A

Funding Match*

Are you seeking any funding matches or additional contributions to support your project? If so, provide the organization/entity name that will be providing the match. If you are not seeking a match, please write

N/A

Funding Match Amount (if not applicable, leave blank)

Sustainability*

Please provide the sustainability plan for this project.

If the project is successful, we would consider applying for further funding.

Evaluation*

Please provide the evaluation plan for this project.

Pre and post surveys will be conducted to evaluate how much knowledge is gained by attendees during presentations. These surveys will be done electronically using a clicker system. Each person attending a presentation will be given a clicker remote. They will be asked to respond pre and post survey questions using the clicker remote. This will enable us gauge retention and collect data quickly and efficiently.

The level of engagement will be measured by the number of education sessions given and people who attend. This will be tracked through sign-in sheets at the events.

Preliminary approval*

All applicants must go through a preliminary approval process before applications can be approved.

*Please select how you will receive preliminary approval from the list below. **The majority of applicants will present to a RHIP workgroup.***

Present to a RHIP workgroup

RHIP Workgroup*

*If the proposal **will**, or has **already been** presented to a RHIP workgroup, please select the workgroup from the list below.*

Cardiovascular Disease: Clinical

RHIP Goals*

If your proposal has been or will be submitted through a RHIP workgroup, it must contain at least one goal (clinical or prevention) that corresponds with a workgroup. Please select the applicable workgroup goal(s) that your proposal addresses.

Improve hypertension control

Pillar 10 vital condition - maximum impact*

Please select the Pillar 10 condition(s) that you expect your project to have the **most** impact.

Nutritious Food
Physical Activity
Preventative Services & Policies

Pillar 10 vital condition lesser impact (continued)

Please select any additional Pillar 10 vital condition areas that you expect your project may have a **lesser** impact on, if any.

N/A - I do not expect this proposal to impact any of the above

Board of Directors Approval*

If you have been notified that your proposal must be presented to the COHC Board of Directors, your proposal must address one of the Board's priority areas. Please select which priority area your proposal addresses.

N/A

Objectives

Objective #1*

Give presentations to health care clinics to review medication management and the care team approach to hypertension control.

Target for objective #1*

Target for objective #1. Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).

By 3/31/21, 24 presentations will have been given to medical care clinics

Baseline data for objective #1*

Please provide information that indicates where you are starting as it relates to your target (see example above).

No presentation have been given in the Central Oregon region.

Objective #2*

Give presentations to community based sites (i.e. employer staff meetings, sr centers, rotary club etc.) to help people understand high blood pressure and how to manage it.

Target for objective #2*

Target for objective #2. Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).

By 3/1/21, 24 presentations will be made at community based sites.

Baseline data for objective #2*

No presentation have been given in the Central Oregon region

Objective #3

Presentations will be made in all 3 counties in the Central Oregon Region.

Target for objective #3

Target for objective #3. Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).

A minimum of 5 presentations total will be done each in Jefferson and Crook Counties, as the larger county, Deschutes will receive more presentations.

Baseline data for objective #3

There are not any presentations of this kind being done in the tri-county area.

Objective #4

We expect that there will be an increase in knowledge from baseline in community presentations. Our goal will be that 80% participants will get 80% of post survey questions correct.

Target for objective #4

Target for objective #4. Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).

Pre and post surveys will be given, and the target will be an increase from pre to post.

Baseline data for objective #4

Baseline will be determined from the pre-survey.

Objective #5

We expect that there will be an statistically significant increase in knowledge from baseline in clinical presentations.

Target for objective #5

Target for objective #5. Please include a numerical target whenever possible, and the date that you expect to hit the target (see example above).

Pre and post surveys will be given, and the target will be an increase from pre to post.

Baseline data for objective #5

Baseline will be determined from the pre-survey.

Objective #6

Increase the percentage of medicaid patients in Central Oregon who have controlled hypertension.

Target for objective #6

Original target for objective #6

68% of medicaid patients with hypertension will have it controlled.

Baseline data for objective #6

64% of medicaid patients with hypertension currently have it controlled.

Objective #7

Target #7

Baseline data for objective #7

Objective #8**Target #8****Baseline data for objective #8****Objective #9****Target #9****Baseline data for objective #9****Financial Information**

Project Budget*

Please download the Health Council's budget document, found [here](#). After downloading and completing the budget document, please upload it below.

COHC-Hypertension-Project-Budget-Draft.xlsx

Amount requested*

Total amount of funds requested from the Health Council for this project.

\$67,736.00

Funding request - year one

\$42,163.00

Funding request - year two

\$25,573.00

Funding request - year three**Follow-up questions and/or supplemental information**

Follow-up questions and/or supplemental information

*This section is to be used **ONLY if** you received follow-up questions following your presentation to a workgroup or to the Board of Directors. Please use this space to provide the answers to all questions you may have received post-presentation.*

- *Please make every effort to type or copy the answers into the text box below.*
- *In the event that you have documentation such as flow-charts or graphics that you would like to provide that will not copy into a text box, you may use the file upload to attach.*
- *If you have multiple attachments, they will need to be scanned together and uploaded as one file.*

Workgroup Approval

Did you complete all portions of the application?

Was your project solicited by a RHIP workgroup as part of an A3 process?

Did you include a proposed budget?

RHIP Workgroup Approval*

Have you already presented and been given preliminary approval by a RHIP workgroup?

Yes, I presented and have been given preliminary approval

Process Following Submission

Application Files

Applicant File Uploads

- COHC-Hypertension-Project-Budget-Draft.xlsx

Project Budget

Total Requested Project Funds from COHC:

Personnel	Position (FTE dedicated to this)	Salary	Benefits	Total Cost	Amount Requested
Kylie Loving	Project Coordinator (.1)	9,014	2,704	11,718	11,718
				0	
				0	
				0	
Sub-Total: Personnel		\$ 9,014.00	\$ 2,704.00	\$ 11,718.00	\$ 11,718.00

Materials & Supplies	Total Cost	Amount Requested
2 BP cuffs per presentation (approx. \$35/each for regular size \$120 for large)48 regular, and 48 large)	7440	7440
Copies of Handouts	300	300
Clickers for data collection	1400	1400
Laptop and projector for presentations	1500	1500
Sub-Total: Materials & Supplies	\$ 10,640.00	\$ 10,640.00

Travel Expenses	Total Cost	Amount Requested
Age for travel to education sessions for Kylie 3456 miles at \$.50 /	1728	1728
Sub-Total: Travel Expenses	\$ 1,728.00	\$ 1,728.00

Consultants & Contracted Services	Total Cost	Amount Requested
Maximum of 48 sessions by Dr. Backus @ \$450 /session	21600	21600
Yearly position oversight 2500/year	5000	5000
Clinical Data Collection James McCormick	\$750	\$750
Sub-Total: Consultants & Contracted Services	\$ 26,600.00	\$ 26,600.00

Meeting Expenses	Total Cost	Amount Requested
Lunches for presentations @\$15 per person	10800	10800
48 presentation average 15 people each for 720 people		
Sub-Total: Meeting Expenses	\$ 10,800.00	\$ 10,800.00

Professional Training and Development	Total Cost	Amount Requested
Sub-Total: Professional Training and Development	\$ -	\$ -

Other Budget Items	Total Cost	Amount Requested
Slideshow development 20hrs x \$275	5500	5500
Sub-Total: Other Budget Items	\$ 5,500.00	\$ 5,500.00

Total Project Budget **\$ 66,986.00** **\$ 66,986.00**