



Promote Enhanced Physical Health Across Communities
Regional Health Improvement Plan Workgroup

St. Charles Hospital
(main entrance – conference room B)
2500 NE Neff Rd.
Bend, OR 97701

February 25, 2020. 8:00-9:30am

Aim/Goal
Equitably and measurably support all Central Oregonians to prevent disease by improving health behaviors and reducing risk factors that contribute to premature death and diminish quality of life.
Future State Metrics
<ol style="list-style-type: none">1. Decrease asthma, cancer, cardiovascular disease, and diabetes rates2. Decrease obesity rates in adults3. Increase fruit/vegetable consumption and physical activity in youth4. Decrease risk factors for cardio-pulmonary and/or preventable disease5. Decrease sexually transmitted infections6. Increase individuals receiving both an annual wellness visit and preventative dental visit

AGENDA

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| 8:00-8:05 | Introduction and Guiding Principles - All |
| 8:05-8:10 | Housekeeping - Facilitator |
| 8:10-8:25 | Activity: Broadening Partnerships - All |
| 8:25-9:00 | Structured Problem Solving - All <ul style="list-style-type: none">• Review progress and prepare for root cause analysis in March |
| 9:00-9:25 | Workgroup Orientation Part 2: Funding - All |
| 9:25-9:30 | Closing - Facilitator |



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Future State Metrics – Full Detail			
1. By December 2023, decrease chronic disease rates by 10% in each County, age-adjusted:			
	Crook County	Deschutes County	Jefferson County
Asthma (%)	7.4	8.2	12.9
Cancer (%)	7.0	6.4	4.9
Cardiovascular Disease (%)	8.7	4.3	5.1
Diabetes	9.5	5.3	18.3
2. A.) By December 2023, reduce adult obesity rates in Central Oregon Region by 7% in each county:			
Crook County	Deschutes County	Jefferson County	
29.3%	19.9%	39.2%	
2. B.) By December 2023, increase the percentage of Central Oregon youth who meet the physical activity and fruit/vegetable consumption goals by 10 percentage points in each county to:			
8 th Grade Rates	Crook County	Deschutes County	Jefferson County
Percentage of students reporting 60 minutes or more of physical activity in the last 7 days.	47%	38%	32%
Index of 6 fruit and vegetable consumption questions, what percentage of youth are getting at least 5 servings of fruit or vegetables per day.	38%	33%	41%
11 th Grade Rates	Crook County	Deschutes County	Jefferson County
Percentage of students reporting 60 minutes or more of physical activity in the last 7 days.	39%	26%	30%
Index of 6 fruit and vegetable consumption questions, what percentage of youth are getting at least 5 servings of fruit or vegetables per day.	31%	26%	25%

31. By December 2023, decrease risk factors that contribute to Cardio-Pulmonary Disease and/or Preventable Disease by 7% in each county:

	Crook County	Deschutes County	Jefferson County
Age-adjusted % of adults who currently smoke	24.5%	16.1%	11.9%
The age-adjusted rate of persons hospitalized for stroke per 100k	196.0	190.0	319.0
The age-adjusted rate of persons hospitalized for diabetes per 100k	86.0	59.5	128.5

31. By December 2023, decrease 5-year rates and/or 5-year case counts of STIs by 20%:

	Crook County	Deschutes County	Jefferson County
The 5-year age-adjusted rate of gonorrhea per 100k	52.7	23.5	95.8
	Central Oregon		
5-year syphilis case count	37		
5-year HIV case count	21		

5. By December 2023, increase the percentage of PacificSource (Central Oregon CCO) Medicaid members, at any age, who received both an annual wellness visit by a Primary Care Provider and a preventive dental visit by a member of the Oral Health Care Team by 10 percentage points to:

Crook County	Deschutes County	Jefferson County
29.8%	32.75%	31.3%

The Central Oregon Health Council: Who We Are and What We Do

Central Oregon Health Council (COHC) is a not-for-profit organization dedicated to supporting and improving health and wellness for all residents of Central Oregon through cross-sector, regional collaboration and partnerships.

Our region includes Crook, Jefferson, Deschutes, Northern Klamath Counties and the Confederated Tribes of Warm Springs.

The community-driven priorities for the next four years include:

1. Addressing Poverty and Enhancing Self Sufficiency
2. Behavioral Health: Increasing Access and Coordination
3. Promoting Enhanced Physical Health Across Communities
4. Stable Housing and Supports
5. Substance and Alcohol Misuse: Prevention and Treatment
6. Upstream Prevention: Promotion of Individual Well-Being

We welcome all who are interested.

Regions we excited to partner with include:

Confederated Tribes of Warm Springs, Jefferson County, Northern Klamath County, Crook County, Deschutes County

Sectors we are excited to partner with include:

Business and Manufacturing, Civic Volunteer Groups, Government, Non-profits and Social Service, Justice, Health, Spiritual and Religious, Education, Media, and Infrastructure.

Regional Health Improvement Plan (RHIP) Workgroup Frequently Asked Questions

1. Do large organizations with many different departments only count as one vote?

It is important to give equitable value and weight to each partner voice in decision making. To do that, large organizations that completely reside within the same community sector will have one vote. If a large organization resides within multiple sectors, that organization will get one vote per sector.

For example, if there are two people from a large system (for example St. Charles Health System), and one of them is from inpatient hospital care and the other is from primary or family care, they will share one vote because both of those departments reside within the health care sector.

If there are two people from the same umbrella organization (for example Deschutes County), with one of them working in the judicial system and the other is working in public health, they will each have one vote because justice and health care are two separate sectors. Employees of these departments represent significantly different community perspectives.

2. Can I send a representative to vote in my place if I'm not able to attend a decision-making discussion?

There are multiple, on-going discussions and a lot of shared learning leading up to formalizing a decision. Regularly participating gives you a better understanding of these complexities. A representative, or proxy, attending an isolated decision-making discussion will not have the depth of understanding of the topic. Only partners who have maintained their voting partner status will be invited to formalize a decision by voting. See Participation Practices for details.

If you are one of two members representing the same organization and your coworker has attended enough meetings to be a voting partner, they will be able to vote for your organization. However, if your coworker does not qualify as a voting partner, they will not be able to vote in your place.

3. Is a final decision made when 75% agreement is reached by voting partners present in the meeting? Or by all voting partners?

We approach final decisions using the Focused Conversation method to bring partners closer to consensus. When we say consensus, we mean: "Finding and creating areas of shared

understanding; A coming together of the common sense of the total group; An agreement that everyone can live with”.

After coming to consensus, a decision is made when 75% of all voting partner organizations are in agreement.

For example, any partner present for the discussion, will work to reach consensus during the meeting time. The formal decision will be made by all voting partners through an email vote.

This applies to both a positive or negative vote. For instance, if the vote is split 50/50, partners must work to agree by 75% in favor of, or against, an issue.