



Upstream Prevention: Promotion of Individual Well-Being
Regional Health Improvement Plan Workgroup

Join Zoom Meeting
<https://zoom.us/j/602446710>

Join by phone:
+1 669 900 6833
Meeting ID: 602 446 710

June 23, 2020, 3:30-5:00pm

Aim/Goal
All communities in Central Oregon have equitable access and opportunities to health, education, healthy relationships, community support, and experiences necessary to thrive at every stage of life from prenatal to adulthood.
Future State Metrics
<ol style="list-style-type: none">1. Increase letter name recognition at kindergarten2. Increase third grade reading proficiency3. Increase proportion of pregnancies that are planned4. Increase two-year-old immunization rates5. Increase the number of people who feel they belong in their community

AGENDA	
--------	--

- | | |
|-----------|--|
| 3:30-3:35 | Welcome, Land Acknowledgement & Guiding Principles - All |
| 3:35-3:45 | Community Sharing - All |
| 3:45-3:50 | Small Group Introductions – All |
| 3:50-5:00 | Root Cause / Strategic Direction - All |



Upstream Prevention: Promotion of Individual Well-Being
Regional Health Improvement Plan Workgroup

Future State Metrics – Full Detail			
1. By December 2023, letter name recognition at kindergarten readiness will be the following by county:			
Average Number of Upper Case Letters Recognized (scale 0-26)			
	Total Population	Economically Disadvantaged	Underserved Races
Crook County	15.8	14.3	12.8
Deschutes County	17.5	14.6	16.6
Jefferson County	13.2	11.3	11.1
Overall increase of at least 10% for all students, a 20% increase for students from economically disadvantaged (ED) and underserved races (UR).			
2. By December 2023, increase third-grade reading proficiency to the following by county:			
3rd Grade English Language Arts Proficiency by County (weighted)			
	All Students	Economically Disadvantaged	Underserved Races
Crook County	54.5%	51%	33.5%
Deschutes County	67.5%	52%	47%
Jefferson County	47.5%	49.5%	40.5%
Increase of 10% overall, and 15% for economically disadvantaged students (ED) and students from underserved races (UR).			
3. By December 2023, increase the proportion of pregnancies that are planned in Central Oregon to 56%.			
4. By December 2023, increase the Central Oregon two-year-old up-to-date immunization rates to 80%.			
5. By December 2023, a Resilience Measure, such as the Child/Youth/Adult (CYARM) will be established, and the number of people who feel like they belong in their community (by gender, race, and ability) will increase by 10% from the baseline.			



**Central Oregon
Health
Council**

Regional Health Improvement Plan (RHIP) Workgroup

Guiding Principles

Shared Focus

We come together to improve the health and well-being of individuals living in various and diverse communities throughout Central Oregon region. We use the Regional Health Improvement Plan (RHIP) as our guide. It is our region's shared vision of current problems and our aims. As workgroup partners we develop agreed-upon actions to solve the issues and keep the needs of our communities as the main focus.

Shared Metrics

We measure progress, process and outcomes through a shared lens. We use the Regional Health Assessment (RHA), Regional Health Improvement Plan and community dashboard.

Involve Targeted Population

The individuals living in our diverse Central Oregon communities are the center of our work. We make every effort to include people from every part of the region in our workgroups, discussions, processes and decisions.

Collaborate to Solve Complex Issues

Inviting diverse perspectives from throughout the Central Oregon region deepens our shared understanding of complex issues and propels us toward better progress and outcomes. We practice frequent, structured, open communication to build trust, assure shared objectives, and create common motivation. We respect the privacy and sensitivity of information partners share.

Coordinate Collective Efforts

We are made up of diverse partner organizations and individuals with unique strengths, skills, and resources. We coordinate our efforts and use our unique strengths and skills to meet the goals of the RHIP.

Learn and Adapt Together

We embrace shared learning and a growth mindset. We create a space that allows for mistakes, failures, second changes, and a celebration of brave attempts. We adjust and apply our learnings to the complex and changing landscape of health and well-being in Central Oregon.

working area

Directions for Root Cause Titles:

Summarize what is blocking progress toward our metrics

3 - 7 Words

Adjective + Noun

No Solutions

Prompting Questions:

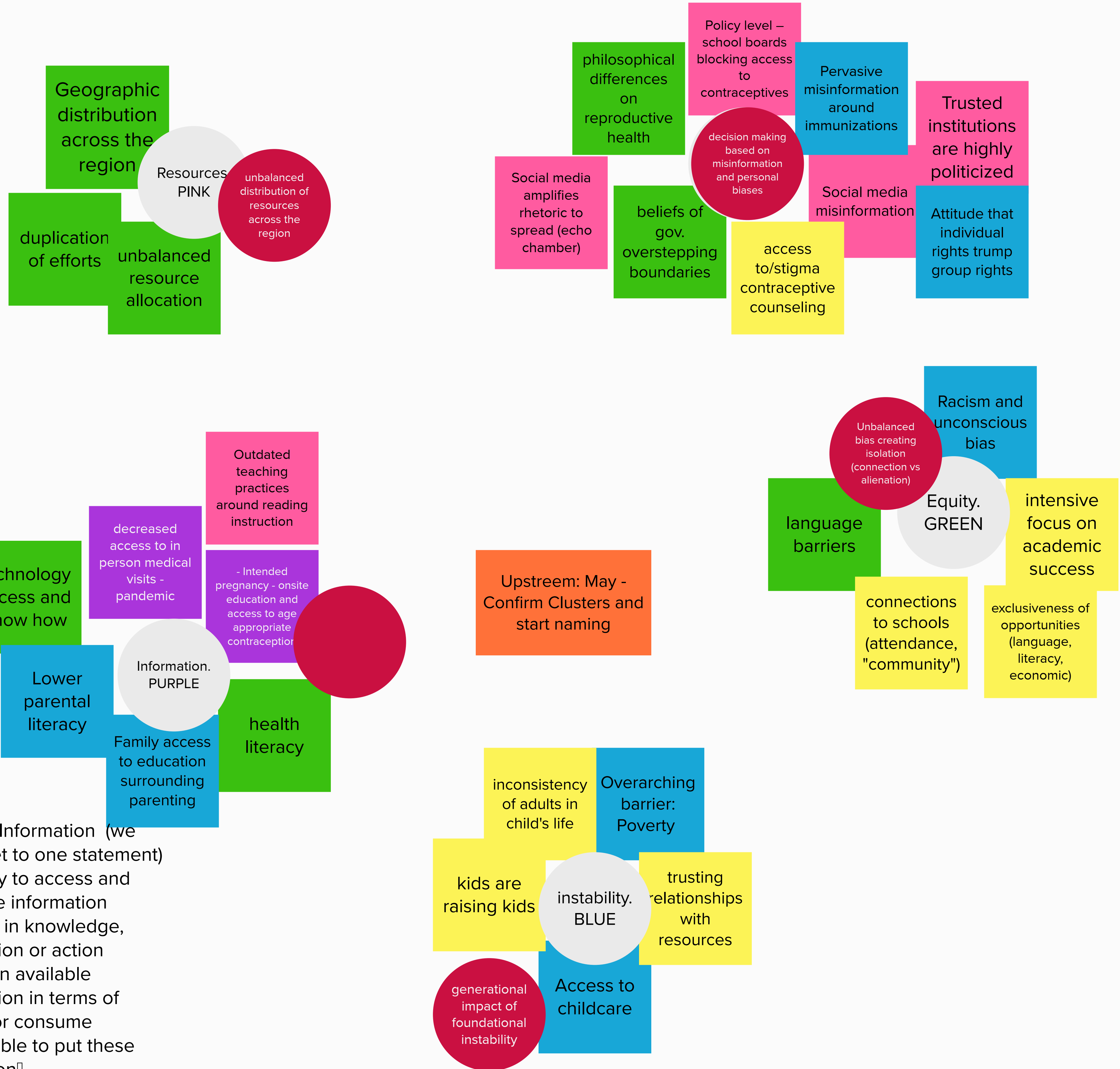
1.)What are the key words in this cluster?

2.)How have you experienced this?

3.)How does this block? What is it blocking?

4.)What 3-7 word title best describes the root cause blocking our progress?

Upstream Prevention: Promotion of Individual Well-Being



- Purple - Information (we didn't get to one statement)
- Ability to access and consume information
 - Gaps in knowledge, information or action
 - Gap in available information in terms of access or consume
 - Not able to put these into action

Stable Housing and Supports



Background: Why are we talking about this?	
1990s Mill Closures / Timber Industry Decline Federal Housing Policy 2000s Population Growth in Central Oregon Housing shortage The Great Recession Wage Vs. Housing Costs Single Income Households	Stable, healthy housing is a basic need. Insecure housing and an unhealthy living environment impact both physical and behavioral health conditions. By spending much of their income on housing, individuals and families must cut corners on other living expenses such as food, transportation, and medications, which can also significantly influence their health outcomes and overall well-being.

Current Condition: What's happening right now?
<ul style="list-style-type: none"> In 2017, 18% of Central Oregonians paid more than half of their income for rent and mortgage In Central Oregon, minority households experience more housing challenges than their white counterparts Central Oregon has a critical shortage of supportive housing units to meet the needs of people with disabilities, with co-occurring mental health or substance use disorders, and/or extended history of homelessness Current State Metrics: <ol style="list-style-type: none"> In 2017, 18% of Central Oregon households were severely rent or mortgage burdened In 2018, only 30% of Housing Choice Voucher holders were able to find and lease a housing unit No system to determine an accurate number of those experiencing homelessness exists in Central Oregon

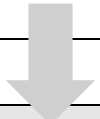
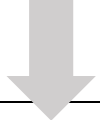
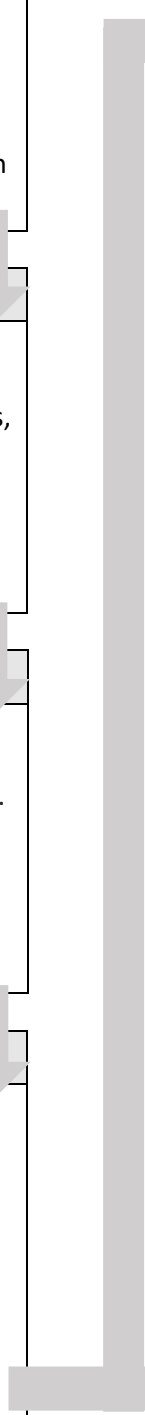
Goal Statement: Where do we want to be in 4 years?
Aim/Goal Central Oregonians experiencing homelessness and those most at-risk of homelessness will have increased and equitable access to housing and supports that offer opportunities for stability and increased individual well-being.
Future State Metrics - By December 2023: <ol style="list-style-type: none"> Decrease severely rent and mortgage-burdened households Increase Housing Choice Voucher holders able to find and lease a unit Accurately capture Central Oregonians experiencing homelessness

Analysis: What's keeping us from getting there?
Empty content box

Date updated:	Workgroup:	Version:
Strategic Direction: What are we going to try?		
{insert}		

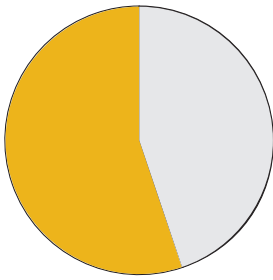
Focused Implementation: What are our specific actions? (who, what, when, where?)
{insert}

Follow-Up: What's working? What have we learned?
{insert}



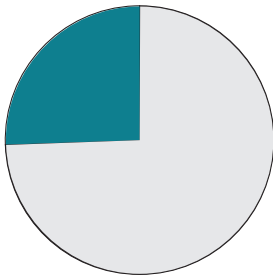
Central Oregon Health Council COVID-19 Mini-Grant Report

Non-RHIP



\$82,640 Remaining
\$67,360 Spent

RHIP



\$38,130 Remaining
\$111,870 Spent

This report gives an overview of the status of all COVID-19 mini-grants funded by the Central Oregon Health Council (COHC).

There are two funding streams available for COVID-19 mini-grants. One is from the **RHIP Workgroups**, who elected to pool their money. Each workgroup contributed \$25,000, for a total of \$150,000. Grant applications for this funding stream directly impact a RHIP metric. See pages two and beyond for information on which metrics have been impacted through COVID-19 mini-grants.

The second funding stream is provided from **the COHC reserves** in a matching amount of \$150,000. This funding pool is drawn from when a COVID-19 mini-grant is submitted due to an emergent need, but does not align with a RHIP metric. See a complete list of these mini-grants on the bottom half of page one.

Non-RHIP COVID-19 Mini-Grants

MARCH

Creach Consulting, LLC COVID-19 Virtual Community Supports
Jefferson County Public Health Department Stay Home, Save Lives Outreach Campaign
Jefferson County Public Health Department Prevent COVID-19 for At-Risk Populations
Mosaic Medical COVID-19 Care Kits for the Homeless

APRIL

Central Oregon Pediatric Associates PPE Sterilization
Crook County Health Department COVID-19 Outreach Campaign
Family Access Network FAN COVID-19 Response
NeighborImpact Homeless Services
REACH COVID-19 Services for Homeless
Ronald McDonald House Charities COVID-19 Virtual Family Supports
Rugged Thread Outerwear Repair Inc. Manufacturing Surgical Masks
Sparrow Clubs U.S.A. Virtual Sparrow Clubs for 2020-21 School Year
The Latino Community Association COVID-19 Emergency Funds for Families

MAY

REACH Solar Chargers for Homeless

RHIP COVID-19 Mini-Grants

	Decrease food insecurity	Decrease percent of individuals living at poverty level and income constrained	Decrease housing and transportation costs as a percent of income	Increase availability of behavioral health providers in marginalized areas of the region	Increase timeliness and engagement when referred from primary care to specialty BH	Standardize screening processes for appropriate levels of follow-up care	Decrease asthma, cancer, cardiovascular disease, and diabetes rates	Increase fruit/vegetable consumption and physical activity in youth	Decrease risk factors for cardio-pulmonary and/or preventable disease	Accurately measure Central Oregonians experiencing homelessness	Decrease binge drinking among adults	Increase additional services for alcohol or drug dependence for individuals newly diagnosed	Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs	Increase letter name recognition at kindergarten
Bend Farmers Market Fresh Veggies for SNAP Participants														
BestCare Treatment Services Expanding Telehealth Capacity for COVID-19 Needs														
Brightways Counseling Group Access to Care - Telehealth														
Cascade Peer and Self Help Center COVID-19 Supports for Clients														
Central Oregon Veteran Outreach COVO COVID-19 Crisis Homeless Outreach														
Council on Aging of Central Oregon Addressing Urgent Food Needs for Seniors														
DAWNS House COVID-19 Basic Needs Relief														
Deschutes County Health Services Expansion of Telehealth Services														
Friends of the Children COVID-19 Support for Youth and Family														
Healthy Beginnings Continuity of Care During Covid-19														
High Desert Food and Farm Alliance Food Security for Vulnerable Residents and Farmers														
Jericho Road COVID-19 Food Services														
La Pine Community Health Center The Behavioral Health COVID-19 Telehealth Project														
Mountain Star Family Relief Nursery Providing Basic Necessities to At-Risk Families														
NeighborImpact Social Distancing Shelter Alternatives														
Redmond Senior Center Home Meal Services - Ensuring Food Security														
Rimrock Trails Telehealth Counseling Amidst the COVID-19 Crisis														
St. Charles Health System Purchase Frio Insulin Cooling Cases														
Still Serving Counseling Services COVID-19 Veteran Mental Health Telehealth														
Sunstone Recovery, LLC Telehealth														
The Giving Plate, Inc. COVID-19 Food Relief														
Thrive Central Oregon Basic Needs Support to Low-Income Households														
Treehouse Therapies Associates Telehealth Program														

APRIL

RHIP COVID-19 Mini-Grants (cont'd)

Decrease food insecurity						
Decrease percent of individuals living at poverty level and income constrained						
Decrease housing and transportation costs as a percent of income						
Increase availability of behavioral health providers in marginalized areas of the region						
Increase timeliness and engagement when referred from primary care to specialty BH						
Standardize screening processes for appropriate levels of follow-up care						
Decrease asthma, cancer, cardiovascular disease, and diabetes rates						
Increase fruit/vegetable consumption and physical activity in youth						
Decrease risk factors for cardio-pulmonary and/or preventable disease						
Accurately measure Central Oregonians experiencing homelessness						
Decrease binge drinking among adults						
Increase additional services for alcohol or drug dependence for individuals newly diagnosed						
Reduce mental health/substance abuse emergency department visits in Madras, Prineville and Warm Springs						
Increase letter name recognition at kindergarten						

MAY	Healthy Families Oregon - High Desert Basic Needs for Families					●			●
	Stroke Awareness Oregon Stroke Education & Prevention							●	●